

HELPR Limited

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Inspection report

54 Tonfield Road
Sutton
Surrey
SM3 9JR

Tel: 01372232140
Website: www.helpr.org.uk

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

HelpR Ltd is a domiciliary care service. The service provides care and support to older people and individuals with frailty who are living in their own homes. Not everyone who uses the service receives personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. On the day of the inspection there were ten people receiving this type of support.

People's experience of using this service and what we found

Staff were recruited in a safe way, with appropriate checks made by the registered manager prior to being appointed. People felt safe with the staff who supported them, and the staff knew them well. Trusting relationships were built between people and staff, and this in turn developed good rapport and communication between staff, the people they supported, and their wider family. Staff were knowledgeable about risks and well trained, and followed best practice procedures.

People received individual and person centred care and support. Staff were well supported by the registered manager who had good oversight of their performance. Referrals were made in a timely manner to associated health professionals when required, and family involved when appropriate.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The registered manager had made significant improvements to the management arrangements resulting in improved auditing and oversight of the quality of the service. People, staff and families we spoke with told us they felt involved and included in decisions, and the service was well managed. We also received very positive feedback from health professionals who had worked with the service to support people.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was Requires Improvement (published 13 October 2020).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an announced targeted inspection of this service on 10 September 2020. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what

they would do and by when to improve their management oversight of the quality of care, how they recruited staff, and their processes for sending in the required notifications to CQC.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe, Effective and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for HelpR Ltd on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

HELPR Limited

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service had a manager registered with the Care Quality Commission. This means they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection. Inspection activity started on 14 June 2021 and ended on 18 June 2021. We visited the office location on 15 June 2021.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and health professionals who have worked with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection-

We spoke with one person and three family members about their experience of the care provided. We interviewed the registered manager and three members of staff. We reviewed a range of records. This included two people's care and medication records, three staff files in relation to recruitment and staff supervision. We also reviewed records relating to management and governance which included policies, audits and incident/accident records.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at medication audit records, staff training records and further policies and procedures.

Is the service safe?

Our findings

Safe – this means we looked for evidence people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had not ensured appropriate pre-employment checks were undertaken for new staff. This was a breach of Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 19.

Staffing and recruitment

- We saw records that showed staff were now being recruited safely. Gaps in employment histories had been explored and reasons recorded, checks had been made with the Disclosure and Barring service (DBS). A DBS check prevents unsuitable staff working with people who may be vulnerable. Proof of identity evidence had been checked and recorded.
- Staff arrived on time and stayed for the expected duration of the support call. An alerting system had been put in place and this flagged when a carer had arrived and left a call. Should a carer not arrive, the registered manager would receive a red alert notification meaning prompt action could be taken. One person who uses the service said, "They always turn up on time."
- The registered manager regularly monitored the quality of care by carrying out spot checks. One staff member told us, "They [registered manager] turn up unannounced– they check we are tidy, have our ID (identity) badges on, are wearing correct PPE (personal protective equipment) and have a good rapport with the client."

Systems and processes to safeguard people from the risk of abuse

- People were supported by small teams of regular staff who knew them well which made them feel safe. One person we spoke told us, "Two regular girls come – I like to have the same people." One family member said, "They turn up on time, communication is very good and they will let us know of any changes to the plan."
- Staff understood their responsibility to raise concerns to the registered manager if they felt people may be at risk of harm. They had completed safeguarding training and could explain the process for escalating concerns and could identify the signs of abuse.
- Records showed safeguarding concerns were appropriately investigated and reported. The local authority and commissioners confirmed the registered manager was proactive in referring concerns about safeguarding and working with them to quickly resolve issues.

Assessing risk, safety monitoring and management

- Assessments were completed with clear, detailed guidance for staff on how to support people to reduce risks. One person told us, "They make me take care over things. They slow me down and give me advice."

- Staff told us they found information relating to risks in people's care plan. They followed the guidance for a person who had a stroke and recent fractures. It gave very clear, person centred guidelines on how best to support the person.
- The registered manager reviewed people's support plans following incidents or accidents. One person who had fallen had a risk assessment plan put in place, which involved lowering their bed at night time, and having a soft crash mat placed by the bed to cushion them and reduce the risk of injury. The person had not fallen since the measures were put in place.
- Contingency plans were in place to ensure people would receive their support in the event of an emergency. Senior members of the team had access to the online management system if the registered manager was suddenly or unexpectedly absent.

Using medicines safely

- Staff received training in the administration of medicines. Staff managed people's medication in a safe way and recorded this appropriately.
- People's care plans included information for staff about people's preferences in relation to their medicines. Where a person expressed a wish to reduce their medicines, the change had been actioned by the registered manager who consulted with their GP. Another plan recorded how a person would like to take their medicines and we saw that the person had been supported in this way. Body maps were included in support plans to show staff exactly where prescribed creams should be applied.
- Regular audits of medication records had been implemented by the registered manager. Errors had been identified promptly and actions put in place. In some cases, they had been rectified by a one to one conversation with the member of staff, and in other cases refresher training had been arranged and competency re-assessed to reduce future errors. The registered manager told us, "The audits have been invaluable – the carers are now learning and there are fewer errors and omissions now." We saw that errors had reduced each month since the new system was put in place.

Preventing and controlling infection

- People were protected from the risk of infection. Staff had received recent training in infection control and COVID-19 related issues. Personal protective equipment (PPE) was in good supply and staff used it appropriately and routinely following the latest government guidelines. One family member confirmed, "Yes, they are very careful – they still wear their masks."
- Staff had received training in food safety so they knew how to safely cook, store and prepare food for people.
- Feedback from the local authority confirmed the provider was fully engaged with their recent COVID-19 training and promotional work. One member of staff from the service had taken part in a promotional video to encourage other care staff to have the vaccine.

Learning lessons when things go wrong

- The registered manager carried out investigations when things went wrong. These events were seen as an opportunity to learn and improve and this was evident in the records we reviewed. We saw staff had been interviewed about the incident and had been involved in discussions to prevent the situation recurring in the future. Lessons learned from the incident were then shared with the wider team to help them develop their knowledge and understanding.
- One family member we spoke with told us issues were very quickly addressed, "I have been at breaking point. I raised my concerns with the registered manager who suggested we add in a tea time call, contacted the council and got it all in place."
- Staff felt well supported by the registered manager and able to call her should they make a mistake. "She [registered manager] is available all the time, so I would contact her and tell her what had happened. She

would get it sorted. I never worry about calling her – she is always happy to hear from you. She is the best manager I have ever worked with."

Is the service effective?

Our findings

Effective – this means we looked for evidence people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

Following our last comprehensive inspection in February 2019 we made a recommendation that the provider should improve their initial assessment procedures. At this inspection we saw that the new care planning system in the process of being implemented addressed this shortfall.

- People's needs had been assessed to ensure the service could support them well. People and their families were involved where appropriate in creating and reviewing support plans. The plans were centred around the individual's preferences and choices.
- The registered manager had good working relationships with the local commissioning teams, and they worked together to improve outcomes for people they support. One commissioning manager told us, "We have regular contact with the registered manager. They are very proactive and contact us for a reassessment when people need longer visit times or specialist equipment."
- Families we spoke to confirmed additional or longer calls had been arranged when needed, and equipment sought to prevent or reduce risk of falling when there were concerns.
- The provider followed best practice guidance through their membership of Skills for Care, UK Home Care Association (UKHCA).

Staff support: induction, training, skills and experience

Following the last comprehensive inspection in February 2019 we had made a recommendation that the provider improve training and supervisions with staff and maintain accurate records of these. At this inspection we found that adequate improvements had been made.

- New staff received a comprehensive induction into the role. They completed their initial training and then attended shadow shifts with a senior staff member who introduced them to the people they would support. They learned about each person's care needs and how they preferred things to be done, and once they were ready to work unsupervised, the registered manager was informed. Regular spot checks and supervisions were put in place to continue to support them.
- Staff had completed practical training in moving and handling, first aid and basic life support. Staff completed training on fire safety, food safety, safeguarding, health and safety, medicine administration and infection control. The registered manager discussed plans to enhance training now in-person restrictions due to COVID-19 were easing.

- Health professionals we spoke with confirmed staff knowledge was good about the people they support. One said, "When the manager is out of the office, any of her team covering will be able to answer queries."
- The registered manager had introduced a messaging app for staff teams to communicate with one another. This enabled staff to handover any information or updates in addition to the daily notes recorded in people's care plans.

Staff working with other agencies to provide consistent, effective, timely care

- The provider made referrals to relevant health professionals for specialist advice and support when required. One person had been referred to a continence nurse and their GP for support when it became difficult for them to reach the bathroom in time. Another person had been referred to a district nurse for additional support with a painful heel.
- The local authority told us the registered manager raised concerns promptly, and a social worker confirmed this. They had worked collaboratively with the provider when dealing with a particularly complex and challenging situation. They had also commended the service on the standard of their person-centred case notes.

Supporting people to live healthier lives, access healthcare services and support; Supporting people to eat and drink enough to maintain a balanced diet

- The provider had encouraged people to remain as independent as possible. One person had been supported to revisit their hobbies and interests following a bereavement which had affected their confidence. The registered manager had arranged for a carer to support the person with home baking. They had encouraged them to go for short outings with carer support to improve their mobility. This had enhanced the person's well-being.
- Staff supported people with eating and drinking. One staff member told us they had become concerned about one person who had lost weight. They had informed the family and agreed to refer to a dietician. A plan had been implemented to fortify meals, but as the person preferred smaller plates of food, carers would provide smaller portions and give an additional sweet treat. The person had gained weight following the revised plan.
- Where people had cultural preferences around eating and drinking, these were clearly documented in the care plan and the guidance followed by staff. Records showed people were being provided with their preferred choice of food. People we spoke with confirmed fresh drinks were left for people, and when the weather was hot, people were reminded to drink more.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA

- The service was not providing care to anyone who lacked the capacity to make day to day decisions.
- The registered manager showed us the capacity assessment process that would be used when people had

difficulty making a particular decision and required support.

- People told us the staff respected their views and asked them for their consent. They said, "She will come and say, what would you like in your sandwich?" Another person confirmed staff asked them before providing care. "They always ask me," they said.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

At the last inspection the registered provider had not ensured good governance processes were in place. There were insufficient audits to check the quality of care provided and to make improvements. The provider had not sent in the notifications required by law to CQC.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 17 of the Health and Social Care Act, and Regulation 18 of the Registration Regulations 2009.

- The registered manager had notified CQC about events that were required by law. They had recently attended some management training and told us this had been invaluable. Many new procedures had been implemented as a result, such as management audits, and self evaluation. Feedback from the training programme about the registered manager said, "The manager is receptive, willing and open to ideas."
- The provider had made improvements to quality monitoring processes, which had resulted in reduced medication administration recording errors. We saw regular audits were taking place for incidents and accidents, and notifications and safeguarding.
- Staff performance was closely monitored by the registered manager through regular supervisions and spot checks. Where issues were found, they were raised with the individual staff member and an improvement plan agreed. Refresher training had been arranged for staff when there were performance issues. One staff member said, "Issues get sorted early so they don't become a big thing."
- Staff felt well supported by the registered manager and were happy working for the service. One said, "It is one of the best companies that I have worked for – the support from the manager and other carers is excellent." Support was available for staff at any time and they told us they always received a positive response when they called.
- The duty of candour requires the provider to be open and honest with people when things go wrong with their care, giving people support and providing truthful information and a written apology. The registered manager understood this duty.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager had created a culture which was open and transparent, where the staff, people

and their family members collaborated in the person's best interests. One family member told us, "I think we fell on our feet when we found this agency – they have been excellent." Another said, "I think they are wonderful. I have worked in the care industry for over 30 years and I have to say my impression of them is extremely high."

- People and staff told us the registered manager visited people in their homes and made themselves available and approachable. They told us nothing was too much trouble and they felt involved when changes were needed or proposed. One said, "They let me know of any changes and if I have any issues or concerns I can go to them."
- Feedback we received from health professionals about the registered manager were very positive. They said, "Easy to work with and a positive attitude", "Honest and professional." and "Good leadership skills."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- There was evidence of learning from incidents and events. The registered manager had introduced a new electronic system which alerted them if a carer had not arrived on time. This enabled prompt action to communicate with the person and arrange a substitute staff member if necessary.
- The latest feedback survey completed by people and families showed a high level of satisfaction. Comments included, "I can't praise them highly enough." One person had said they would like a regular telephone call to chat as they had no family. The provider had adapted their plan of care to include this and arranged for their laptop computer to be mended as they had previously enjoyed playing computer games. They felt this may help the person to feel less isolated.
- The provider was in the process of implementing new care plans. We saw that these were more robust and easier to navigate. As the service grows the provider hoped this would aid staff by being more standardised when they may be supporting more people.
- The registered manager had plans to improve people's outcomes by adding a friendship and buddying service in the future, which would reduce the risks of social isolation for people. They had also planned to enhance their training for staff by arranging for talks by specialists on topics such as Parkinsons disease, sensory issues, stroke etc.

Working in partnership with others

- The registered manager had developed strong links with the local authority and they worked closely to improve people's outcomes. They took part in registered manager forums and support groups where best practice was shared.
- Health professionals were complimentary about the registered manager and the service they provided to people. The local authority commented they had not received any negative feedback about the service and their last quality survey came back with positive results.