

HISC Wigan Limited

Home Instead Senior Care Wigan

Inspection report

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Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service effective?

Inspected but not rated

Is the service caring?

Inspected but not rated

Is the service responsive?

Inspected but not rated

Is the service well-led?

Good 

Summary of findings

Overall summary

This report was created as part of a pilot which looked at new and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the Covid-19 pandemic. This was conducted with the consent of the provider. Unless the report says otherwise, we obtained the information in it without visiting the Provider.

About the service

Home Instead Senior Care Wigan Limited is a community based care provider that provides personal care and support to people in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is to help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of our inspection there were 19 people receiving personal care.

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

Staff had received training in safeguarding and knew how to keep people safe. Staff had been recruited safely and were trained and supported to provide the best possible care for people. Medication was administered safely and staff supported people following good infection control practices.

People were supported by staff who had the skills and knowledge to meet people's needs.

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.

People were supported by staff who were kind and caring and people's equality and diversity needs were respected. People's support needs were assessed regularly and planned to ensure they received the support they needed.

The management team had good oversight of the service and audits were completed regularly. Surveys were completed to gather information about people's views. Spot checks were carried out to ensure the quality of the service was maintained.

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

Rating at last inspection

The last rating for this service was good (published 27 September 2017).

Why we inspected

This was a planned pilot virtual inspection. The report was created as part of a pilot which looked at new

and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the Covid-19 pandemic. This was conducted with the consent of the provider. Unless the report says otherwise, we obtained the information in it without visiting the Provider.

The pilot inspection considered the key questions of safe and well-led and provides a rating for those key questions. Only parts of the effective, caring and responsive key questions were considered, and therefore the ratings for these key questions are those awarded at the last inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Home Instead Senior Care Wigan 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?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to effective.

Inspected but not rated

Is the service caring?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to caring.

Inspected but not rated

Is the service responsive?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to responsive.

Inspected but not rated

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good 

Home Instead Senior Care Wigan

Detailed findings

Background to this inspection

The inspection

As part of a pilot into virtual inspections of domiciliary and extra-care housing services, the Care Quality Commission conducted an inspection of this provider on 26 November 2020. The inspection was carried out with the consent of the provider and was part of a pilot to gather information to inform CQC whether it might be possible to conduct inspections in a different way in the future. We completed this inspection using virtual methods and online tools such as electronic file sharing, video calls and phone calls to gather the information we rely on to form a judgement on the care and support provided. At no time did we visit the provider's or location's office as we usually would when conducting an inspection.

Inspection team

The inspection was carried out by an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

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 professionals who work 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. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who used the service and nine relatives about their experience of the care provided. We spoke with eight members of staff including the registered manager, office staff, senior care workers and care workers. We spoke with one health care professional.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that 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.

Systems and processes to safeguard people from the risk of abuse

- People we spoke with told us they felt safe. One person said, "They are very good and I feel safe with them." A relative told us, "This is a safe service and I have peace of mind knowing they are looking after [person]."
- Staff knew how to recognise potential abuse and protect people from it. Staff had received training in how to keep people safe and described the actions they would take where people were at risk of harm.

Assessing risk, safety monitoring and management

- Risk assessments were in place for people and contained clear guidance for staff on how to manage those risks. Staff we spoke with were aware of people's risks and were able to tell us how they supported people to keep them safe.
- The provider had an electronic call monitoring system where staff logged in and out of calls. If the call is not logged into within an allocated time, the person using the service and/or staff are contacted to ensure they are safe and well.

Staffing and recruitment

- There were recruitment processes in place and recruitment checks were carried out before staff were appointed. This ensured suitable staff were appointed to support people.
- Staff were matched with clients and introduced to them to ensure they were compatible. One relative said, "[Name of person] gets the same carers each morning, and they are all really good, they've never missed a call. Especially during the pandemic, to have the same carers is really good. It's a well-managed company".
- People and relatives told us that people received their care calls on time. One person told us, "They [staff] do come on time."

Using medicines safely

- Peoples' medicines were managed safely. Medicines administration records we observed showed people received their medicines as prescribed.
- Care staff received training and regular competency checks to ensure they were administering medicines safely.

Preventing and controlling infection

- Staff received training in how to prevent and control infection and told us PPE was readily available to them. One person told us, "All the carers wear the protective equipment."

- The provider had an action plan in place in order to manage the spread of the Covid-19 virus.

Learning lessons when things go wrong

- Accidents and incidents were recorded and investigated to reduce the risk of them from happening again in the future.

Is the service effective?

Our findings

Effective – this means we looked for evidence that 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 good. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

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 that, 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.

- People were involved in decisions about their care and a signed consent form was recorded on their care plan. Where people needed support to make particular decisions, a best interest decision was documented.
- Staff had received training in the MCA and told us how they asked for consent before providing support.
- Where people had a DNAR (do not attempt resuscitation) in place, this was clearly recorded in their care plan.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

Ensuring people are well treated and supported; respecting equality and diversity

- People were supported by kind and caring staff. One person told us, "They [staff] are lovely, they look after me very well. "A relative said, "[Name of person] loves every carer. I'm impressed with the whole service".
- Staff we spoke to told us how much they loved their job and the people they supported. One care staff member said, "It's wonderful, I love the job. It is the best job I have ever had."
- We found people's equality and diversity needs were respected and people's individual needs were clearly recorded in their care plans.

Supporting people to express their views and be involved in making decisions about their care

- People and their families were involved in care planning and their views and wishes were respected. One relative said, "I was there when we put the care plan together. It's very impressive that [name of staff] pops in sometimes to check on [name of person] and make sure everything is OK, I find that very good".

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- A care plan and assessment were in place to show the support people needed and these were reviewed regularly. People were involved in reviews of their care.
- Care plans contained personalised information about what was important to them, including people's hobbies, likes and dislikes, to enable staff to provide person centred care.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager told us how people could be offered alternative forms of documentation, for example, producing documents in easy read format in order to accommodate people's individual communication needs.

End of life care and support

- People's wishes and beliefs were respected at the end of their life and recorded in their care plan. One member of staff told us how staff had played music which was special to the person receiving end of life care and how it had meant so much to both the person receiving the care and their family. One member of staff told us, "Everyone should be entitled to dignity when they are dying."

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 good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Feedback we received about the service was very positive. One person said, "I can't think of any improvements. They do exactly what it says on the tin!" A relative said, "I think it's an impressive agency. They are very approachable and I can talk to anybody in the office, very good communications".
- A health professional we spoke with was also very positive about the service. They told us, "One of the best companies we have worked with. They train the staff well."
- All staff we spoke with told us how supportive and approachable management was. One staff member said, "They make you feel valued, I do feel Home Instead go above and beyond and we care about each other and it's a very nice feeling. I feel respected and part of a team."

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

- The registered manager understood the duty of candour and told us, "We need to be open and transparent, reporting things and making sure you learn from it. Being open and transparent when things go wrong."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The management team had good oversight of the service and carried out regular audits to monitor the quality of the service and drive forward improvements.
- Spot checks and competency checks were carried out regularly on staff in order to ensure they were providing good quality care for people.
- Staff received regular supervisions. Staff confirmed this and we saw evidence of this in records we checked.
- The registered manager understood their legal requirements within the law to notify us of all incidents of concern.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Regular reviews of care were carried out to obtain people's feedback of the service.
- The provider sent out questionnaires to people who use the service and feedback we saw was positive. Results from a recent survey showed that 100% of people who returned the survey were either likely or very

likely to recommend Home Instead.

Continuous learning and improving care

- Management and care staff received on-going training to ensure their learning, skills and knowledge were current to be able to support people.

Working in partnership with others

- The service worked in partnership with social workers, health professionals and relatives to ensure the service supported people's needs.