

Total Healthcare Solutions Limited

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Inspection report

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service:

Total Health Care Solutions Limited is a domiciliary care agency. It provides care for people living in their own houses and flats. People are supported in their own homes so that they can live as independently as possible. CQC regulates the 'personal care' help and tasks related to personal hygiene and eating . There was three people using this service at the time of our visit.

What life is like for people using this service:

The provider provided effective person centred care to people using the service. Staff listened to people and organised care in an effective way which met the needs of people.

Staff understood the importance of this for people using the service and provided the structured support people required. This enabled people to achieve positive outcomes and promoted a good quality of life.

There was good oversight by the management and all aspects of the service were monitored with a view to developing the service. The registered manager had a structure in place ensure that there was appropriate staffing to meet people's needs and keep them safe.

Support planning was comprehensive and involved the people and any professionals supporting their health and care needs. The information was kept updated and reviewed regularly according to changing circumstances. Risk assessments were also relevant and current and had good information on how the risk could be reduced. This included one person who was put onto a gluten free diet, support planning and risk assessments were changed to reflect this and the risks associated with being given products containing gluten.

Why we inspected

This was a first full comprehensive inspection for Total Health Care Solutions Limited since it's registration in October 2017. This inspection was scheduled in line with our timescales for inspecting newly registered services.

Follow up: We will continue to monitor this service and plan to inspect in line with our reinspection schedule for those services rated 'Good.'

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe	
Is the service effective?	Good •
The service was effective.	
Is the service caring?	Good •
The service was caring.	
Is the service responsive?	Good •
Is the service responsive? The service was responsive.	Good •
-	Good •



Total Healthcare Solutions 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 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One inspector carried out the inspection

Service and service type:

Total Health Care Solutions Limited is a domiciliary care agency. Domically care provides care and support in people's own homes to enable them to be as independent as possible. At the time of our inspection there were three people using the service.

The service had a manager registered with the Care Quality Commission. This means that 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 provider 48 hours' notice of the inspection visit. This was to ensure that the registered manager was at the office as this is a small service. The inspection took place on 13 March 2019.

What we did:

We reviewed the information we had received about the service since it's registration in October 2018. We reviewed the provider information return (PIR). A PIR is a form that asks the provider to give some key information about the service. This includes what the service does well and improvements they plan to make. We used all of this information to plan our inspection.

At the provider's office we spoke with the registered manager. We reviewed the care records for the people who used the service. We looked at a range of records relating to the running of the service such as three staff files. We also spoke with the registered manager about the key actions they took to look at quality and safety. After the visit we spoke to two members of staff and two relatives by telephone.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- •The registered manager understood their responsibilities to safeguard people from abuse. Staff told us how concerns would be acted on to make sure people were protected from harm.
- •Staff had been trained in safeguarding and how to recognise the signs of abuse.
- •A system was in place to record and monitor incidents and this was overseen by the registered manager.
- •The registered manager told us that safeguarding, and whistleblowing was the first training that staff were given along with other mandatory training to enable staff to do their job. They told us that it was paramount to the service to keep people safe and they had weekly conversations with people and their families to ensure that there were no concerns with any aspects of the service.

Assessing risk, safety monitoring and management

- •There were clear risk assessments in care plans with explanations of control measures to keep people safe. Risk assessments were linked to the people's support needs and these were reviewed regularly.
- •Staff ensured that the equipment they were required to use was visually checked at each use. They also checked if servicing had taken place for equipment which required specialist attention.

Using medicines safely

- •Staff were trained to administer medicines. The registered manager was qualified as a nurse and had systems in place to assess staff competence on administering medicine to people. There was a robust policy and procedure in place for the administration of medicine and the registered manager did regular checks and audits of Medicine Administration Record and acted immediately on any discrepancies.
- •Information on medicines was in the care plans along with direction on administration. The registered manager kept all information up to date when any changes were made.

Preventing and controlling infection

- •Staff had received training in infection control and how to prevent the spread of infection such as effective hand washing.
- •Staff were supplied with personal protective equipment his was provided to each member of care staff and replenished regularly.

Learning lessons when things go wrong

- •The registered manager told us that they would be reviewed when they happened and that they would learn from what had happened and put measures in place to reduce the risk. At the time of our inspection there had been no incidents or accidents.
- •The registered manager telephoned relatives weekly and discussed the care provided and asked if there were any issues or concerns. A relative told us "[name] is in regular contact and telephones regularly, the staff know [relative] well and the support is excellent."

•One relative told us "There was one care staff who [name] didn't really get on with, clash of personality I think, I told the registered manager and they immediately asked another member of staff to provide care for [name] which works well. They are always in touch and act on concerns, they genuinely listen."

Staffing and recruitment

- •There were enough staff available to meet the needs of the people using this service.
- •The registered manager told us that they had a system in place to assess staffing levels according to people's needs. They had safe recruitment procedures in place to check suitability to role and current DBS checks and references.

We advised the registered manager that they should look at a more formal dependency assessment to calculate staffing levels if the service had plans to develop and take on more people to support.



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

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 •Assessment of people's needs, included protected characteristics under the Equality Act 2010, had been completed. For example, people's marital status, religion and ethnicity was recorded. This is important information to ensure people do not experience any discrimination.

- •People's health needs were assessed and monitored, professionals were involved in people's care and treatment and their care plans and risk assessments were reviewed and updated accordingly.
- •Staff applied learning effectively in line with best practise which led to good outcomes for people and supported a good quality of life.

Staff support: induction, training, skills and experience

- •Staff were competent, knowledgeable and skilled and carried out roles effectively. One relative told us ''My [relative] was having regular falls and infections before using the service, they were constantly in Accident and Emergency. Since using Total Health Care Solutions Limited [relative] has not fallen and hasn't had any infection which is testament to the care and support, they are brilliant.''
- •The registered manager is a qualified general nurse and he is able to assess staff competencies and support them to carry out their role with his skills and experience.
- •There was a comprehensive training scheme where staff could complete all mandatory training. There were also courses on specialist areas which the registered manager told us were available depending on the people's needs. One of these was made available because a relative asked and explained it would be more useful if staff had a greater awareness of the specific condition. The staff we spoke to all mentioned the specialist training and how useful it had been in supporting the person.

Supporting people to eat and drink enough to maintain a balanced diet

- •Total Health Care Solutions Limited staff offered support to prepare meals and drinks where people needed it. The staff also offered support with daily tasks when people were less independent.
- Staff told us that they had the skills to support people to do their own food shopping and they were trained in nutrition and hydration and the importance of keeping people healthy and eating a balanced diet.

Staff providing consistent, effective, timely care

- •People had support that met their needs from a consistent team of staff. A relative told us that the staff remained consistent and that they ensured that the staff got to know people and their support needs.
- •The registered manager had plans in place to increase the staff team in accordance with increasing the number of people using the service. This would ensure that they were able to cope with the increasing demands of the service.

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

- •The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of those 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 decisions, any made on their behalf must be in their best interest and as least restrictive as possible.
- •People at Total Health Care Solutions Limited had full capacity and could make decisions regarding their care and treatment.
- •The registered manager and staff had received training in the mental capacity act.
- •People can only be deprived of their freedom and liberty in the community by the Court of Protection. At the time of our inspection no applications had been made to the Court of Protection.



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

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

People were supported and treated with dignity and respect; and involved as partners in their care.

- •People received support from staff who were kind, caring and compassionate. People were complimentary of the staff who they told us had developed positive relationships with them. One relative told us "They phoned me one time saying that there was something not right with [name] they were always smiley but not that day so called me to let me know because they were genuinely concerned."
- •Staff were competent, knowledgeable and skilled and showed a good knowledge of people's needs and preferences. One staff member told us how they supported one person; they knew their needs and preferences and what activities were important to them, such as attending church.

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

- •The registered manager told us that staff supported people to do what they wanted to do and were kind and caring.
- •People were involved in their care, they received informal opportunities to express their views and directed how they wished to receive their care. The registered manager spoke with people and their relatives weekly to ensure that they were receiving the support that they needed.
- •Support plans reflected the views of people and their wishes about both care and support and other activities they may want to be involved in.
- •People were supported to do activities and outings. One relative told us "[name] goes to church which is very important, [name] also goes to the cinema and likes to go to a local healing group when they feel up to it."

Respecting and promoting people's privacy, dignity and independence

- •People were offered choice and control over their day to day lives.
- •Staff showed a good understanding of the importance of respecting people's privacy, dignity and independence. One staff member told us that this was part of their training and that it was important for people to be respected and be as independent as possible.
- •The registered manager had an awareness of independent advocacy services should people need this to help them express their views.
- •People's confidentiality and privacy was protected. Records were stored securely. The registered manager told us they had the processes in place that ensure all records were managed in line with the General Data Protection Regulation. This is a legal framework that sets guidelines for the collection and processing of personal information of individuals.



Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- •The registered manager visited people to complete an assessment of their needs prior to them using the service. Care plans were then developed and used to provide staff with guidance of how best to support people's needs.
- •Important information was being developed in easy read accessible formats including equality, diversity and human rights. There was no-one using the service with protected characteristics at the time of our visit, but the registered manager was preparing for the possibility of this being needed in the future.

Improving care quality in response to complaints or concerns

- •The registered manager was able to show how complaints or concerns would be managed but the service had not received any. They would use this information to make changes or improvements to systems and processes or the way that people were cared for.
- •People were encouraged to express their views and a complaints policy given to all people using the service which was available in accessible format when required.
- •One person told us "I'm not afraid to complain if I need to but I can discuss everything with [name] (the registered manager) when they phone me, they always keep in contact, so things are sorted."

End of life care and support

- •At the time of our inspection, no one was receiving end of life care. The registered manager was aware of the importance of developing end of life care plans with people when they were required.
- •The registered manager was trained in end of life care and could explain how they would write a support plan for end of life and ensure that people had a pain free and peaceful death.



Is the service well-led?

Our findings

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, people-centred care.

Planning and promoting people-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- •The registered manager fully understood their duties to report notifiable incidents to relevant professionals. They had developed systems and processes to fully monitor the service, the people being supported and the staff team.
- •The registered manager showed a commitment to delivering high quality person centred care by engaging with people, families and stakeholders. He spoke with people weekly to discuss care needs and the service.

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

- The service was well run. Staff at all levels understood their roles and responsibilities and the registered manager was accountable for staff and understood the importance of their role.
- •The registered manager was clear about maintaining the quality of the service and talked about growing the service having more people needing support in the community. They were aware of the implications that may have on increasing the staffing which they had already considered.
- •An electronic system for recording, planning and monitoring was being assessed for use in the service in the future. This would allow the registered manager to monitor how people were receiving care and any changes at a glance. This was felt to be a more robust system as the service developed in the future.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- •The service had good relationships with professionals but needed to develop links with the local community. The registered manager understood that people using the service would benefit from accessing local services.
- •The registered manager had an open relationship with families and one relative told us "I wouldn't hesitate to talk to [name] if I needed anything".
- •Staff had received training in equality, diversity and human rights and was given information on different aspects of protected characteristics when it became available. The most recent being a leaflet which had been developed by the Alzheimer's society covering 'Dementia Care and LGBT Communities' which all staff had been given a copy.

Continuous learning and improving care

•The service had everything in place to enable it to grow. The registered manager had sourced training for staff and kept up to date on current legislation by email. Policies were regularly updated in line with

legislation. Relatives told us how good the service is and how kind and caring the registered manager is ensuring that he is personally involved in the support and planning for all of the people using the service.

•The registered manager was keen to develop the service and had planned the growth giving thought to keeping people at the centre of that development. It was clear that within growing the service, thought had been given to maintain the contact that the registered manager had with staff and people using the service.