

The Human Support Group Limited

Human Support Group Limited - Pennyman House

Inspection report

30 James Street
North Ormesby
Middlesbrough
TS3 6LB

Tel: 01642433355

Website: www.humansupportgroup.co.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 caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Human Support Group – Pennyman House is a domiciliary care agency and extra care housing service which provides personal care and support to people who live in their own flats within one purpose-built building. The service supported adults some of whom were living with physical and mental health conditions, including dementia.

Not everyone who used the service received 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. At the time of inspection 20 people who lived at Pennyman House received personal care from the service.

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

People told us the service was safe. Medicines were well managed, and people were happy with the way staff gave them their medicines. Staff were aware of how to identify and report safeguarding concerns. Staff followed infection control procedures.

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 involved in their care planning. Records were regularly reviewed to ensure people's up to date needs were reflected. Staff ensured people had access to healthcare professionals, for example contacting their GP or emergency services if they became unwell. People were supported with meals and any special dietary requirements were met. Staff received appropriate training and were offered regular meetings to support them in their role.

The service was caring. People told us the staff treated them with kindness and respect. Staff were aware of how to protect people's privacy and dignity and people told us the staff did this well.

There were a number of activities arranged by the provider and supported by staff. This reduced the risk of people becoming socially isolated. Staff were aware of people's communication needs and how best to support them. People told us they had no concerns or complaints about the service. When complaints were received they were handled correctly.

People had a good relationship with the registered manager. They were asked for feedback on a regular basis to ensure the standard of care remained high.

We found the management team receptive to feedback and keen to improve the service. The registered manager worked with us in a positive manner and provided all the information we requested.

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

Rating at last inspection

This service was registered with us on 10/10/2018 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date the service was registered.

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 caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Human Support Group Limited - Pennyman House

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 and extra care housing service. It provides personal care to people living in their own flats in a purpose-built building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support 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

This inspection was unannounced.

Inspection activity took place on 21 January 2020 when we visited the office location.

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 seven people who used the service about their experience of the care provided. We spoke with 11 members of staff including the registered manager, regional director, care coordinator and eight care workers.

We reviewed a range of records. This included four 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.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe and secure with the support they received. One person told us, "It was hard to leave my other flat, but I feel much safer here knowing there is someone there if I need them."
- Staff understood the need to report safeguarding concerns to the registered manager and how to escalate their concerns if necessary.
- The provider had up to date policies and procedures in place to safeguard people from the risk of abuse.

Assessing risk, safety monitoring and management; Preventing and controlling infection; Learning lessons when things go wrong

- There were detailed risk assessments in place about people's individual care needs. Staff ensured these were up to date and regularly reviewed. Staff knew what they had to do to support with health conditions such as diabetes.
- The provider completed assessments of risk within people's flats and there were emergency plans in place.
- Systems were in place to prevent the spread of infection. Staff had access to disposable gloves and aprons.
- Accidents and incidents were recorded, investigated and analysed appropriately.

Staffing and recruitment

- The provider had processes in place to ensure the safe recruitment of staff and these had been correctly followed.
- There were systems in place to ensure that there were enough suitably trained staff to effectively meet people's care needs and to keep them safe.
- People received consistency of care from staff who knew them well. People told us that care visits were carried out by staff who arrived at the time and stayed the right amount of time. Nobody we spoke with reported having had a missed call. One person told us, "They [staff] are always there when they should be. They once apologised when they were a little bit late because of an emergency but of course I understand, they must attend an emergency."

Using medicines safely

- Medicines were administered safely. We gave some feedback to the registered manager about medicines records and this was acted on immediately.
- People who required help to take medicines received support from trained staff. One person told us, "[Staff] help me with my medicines and I have no issues at all."

- The management team carried out regular medicine audits and action had been taken where issues had been identified.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- The registered manager ensured people's needs were assessed before they began to use the service. Information gathered during the initial assessment was used to write people's care plans.

- Care plans were reviewed regularly to ensure they were up to date and care was delivered in line with current guidance.

Staff support: induction, training, skills and experience

- Staff had the skills and knowledge to carry out their role effectively. New staff were provided with an induction programme to ensure they could carry out their role safely and competently.

- Staff told us they were provided with opportunities to discuss their responsibilities, concerns and to develop their role. One member of staff told us, "I've had supervision and other impromptu meetings with [registered manager]. I find her approachable and can discuss things personal or work related. The support is there from managers or peers."

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

- People's eating and drinking needs had been considered. Records documented people's likes, dislikes and any risks associated with eating and drinking. If people required food prepared in a certain way, for example to avoid the risk of choking, then this was done correctly.

- People who were supported with their meals told us they were happy with the food staff prepared.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were supported to have access to a range of healthcare professionals to help ensure they remained healthy. One person told us, "They get the doctor if I need them. When I had a fall, I pressed my alarm button and there was someone there in seconds. They told me straight away they were getting an ambulance."

- Staff had a good understanding of the people they were caring for and how to manage any health-related concerns.

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.

- Everybody had capacity to make their own decisions about all aspects of care.
- Consent to care and support was sought in line with legal requirements.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- Staff treated people with respect, compassion and kindness.
- People who used the service were happy with the support they received and complimentary about the staff. One person told us, "All the [staff] are lovely, they look after me and do anything I need."
- People's religious and cultural needs were respected. There was a multi-disciplinary faith room on site and staff could support people to access this is needed. One person was supported by staff to go to church whenever they wished to.

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

- Staff encouraged people to make decisions about their day to day routines and their care needs, in line with their personal preferences. People could express their views as part of daily conversations with staff, monthly review meetings and customer surveys.
- People had access to advocates if this was required. An advocate helps people to access information and be involved in decisions about their lives.

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff respected and promoted people's privacy and dignity. One member of staff told us, "I always close curtains and doors, always cover people as much as possible when they are showering. I just think what I would want for them if they were my mum or dad."
- Staff encouraged people to maintain their independence whenever possible. One member of staff told us, "I make sure that whatever I'm in there to do I don't take over. I'm a guest in their home and I respect that. I let them get on with things and ask them to let me know if they do need help."
- People's information was stored securely used appropriately in line with the provider's confidentiality policy and government regulations.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

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

- People received care and support that was focused on their individual needs, preferences and what was important to them.
- The registered manager and staff understood the importance of promoting equality and diversity and respecting individual differences.

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 management team ensured people's communication needs were assessed and any measures put in place to support them. Care plans contained relevant information about people's communication needs and information could be provided in different formats if this was required.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The provider worked in partnership with the landlord of the building to provide a variety of activities for people to enjoy. There were themed food events, Christmas and birthday parties where people's relatives and friends were also welcomed. One person told us, "I'm very happy with everything. We had a lovely party for my birthday."

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure in place. People were supported to raise any concerns and action was taken in response to these. There had only been one complaint in the last 12 months and this had been handled appropriately.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- Staff morale was mixed. Some staff gave us very positive feedback about the service and their role. However, some staff were less positive about working practices and the culture within the service. One member of staff told us, "It's been like a roller coaster since Human Support Group came into place, trying to get used to new ways of doing things. I think it's getting better." We did not receive any negative feedback from people using the service and there was no evidence that this had impacted on the standard of care.
- The registered manager had excellent knowledge of the people supported by the service. They engaged with people in a friendly and informal way, stopping to chat as they went by.

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 their duty of candour responsibilities. They had submitted notifications of specific events in line with legal requirements.
- The registered manager and provider were open and honest with us about the service, its strengths and weaknesses and areas they were further developing.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager undertook a range of audits and checks on a regular basis to help ensure high standards were maintained. The provider was also very involved in the service and committed to continuous improvement.
- The registered manager was open and responsive to our inspection feedback.

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

- People were invited to complete a survey about the care they received. The results were overwhelmingly positive.
- Staff meetings were held every three months. The registered manager had an open-door policy and encouraged staff feedback on a regular basis. The regional director also visited the service regularly and invited staff to speak with them in confidence should they wish to.
- The local authority carried out annual staff surveys. This gave staff the opportunity to give feedback externally if they were not happy to report any concerns internally.

Working in partnership with others

- The service worked in partnership with health and social care professionals who were involved in people's care.
- The provider worked closely with the landlord of the building. The registered manager had weekly meetings with the manager of the site and they worked collaboratively on activities within the building.