

Hearts At Home HomeCare Limited Hearts At Home HomeCare Limited

Inspection report

Initiative House Suite G2 Great Whyte, Ramsey Huntingdon PE26 1HG Date of inspection visit: 06 December 2021 07 December 2021

Good

Date of publication: 30 December 2021

Tel: 01733844096

Ratings

Overall rating for this service

Is the service safe?GoodIs the service effective?GoodIs the service caring?GoodIs the service responsive?GoodIs the service well-led?Good

Summary of findings

Overall summary

About the service

Hearts at Home HomeCare Limited is a domiciliary care agency providing personal care to people in their own home.

There were nine people being supported at the time of the inspection.

People's experience of using this service and what we found People and their relatives told us communication with staff and the registered manager was good.

People were supported safely and treated with kindness and respect. People were supported consistently by the same staff who completed appropriate training to support their needs. People's medicines were managed safely.

People confirmed their needs and preferences were assessed before care was provided. They felt listened to and confirmed they received their support at a time they wanted.

Staff understood the importance of promoting choice and personalised care. Staff supported people to remain as independent as possible. People felt staff were helpful and went over and above to support them. Where required, staff supported people with their nutritional 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.

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 May 2019 and this is the first inspection.

Why we inspected This was a planned inspection based on the date of registration.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Good
The service was safe.	
Details are in our safe findings below.	
Is the service effective?	Good 🔍
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good 🔍
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good 🔍
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



Hearts At Home HomeCare 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.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

This 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 the registered manager was also the provider for this service. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave a short period notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be able to support the inspection and provide us with information we requested.

What we did before inspection

We reviewed information we had received about 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 this information to plan our inspection.

During the inspection

This performance review and assessment was carried out without a visit to the location's office. We used technology such as telephone calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation.' Inspection activity started on 06 December 2021 and ended on 14 December 2021.

We spoke with two people who used the service and one relative about their experience of the care provided. We spoke with four members of staff this included the registered manager.

We reviewed a range of records. This included two people's care records. We looked at 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.

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

• Staff knew how to identify, report and act on any concerns about safeguarding people from the risk of abuse. One staff member said, "I had safeguarding training and I feel confident about how to keep people safe."

• Staff knew how to contact the registered manager, and the local authority safeguarding team. One person told us, "Staff are very caring, and I feel safe." Another person said, "Staff always make sure they lock up properly when they leave."

- People and their relatives were positive about the skills of the staff and care they received.
- The registered manager was aware of their responsibilities for reporting concerns to the local safeguarding team and CQC.

Assessing risk, safety monitoring and management

- Risks were reviewed, and changes were made to help ensure staff had the latest information. For example, where one person's mobility needs had changed, the registered manager ensured a review by appropriate professionals and care plans were updated to reflect these changes.
- Where equipment had been introduced to promote safety and support independent living at home, staff received appropriate training and guidance. One relative said, "I have total confidence in staff, they are a god send."

Staffing and recruitment

- There were enough staff with relevant skills to meet people's needs. There were systems in place to ensure all calls were covered as agreed, including unplanned staff absences.
- People told us they always had enough staff who undertook their care and support. One person said, "My care is not rushed [staff] always take time to chat."
- Staff were deployed to ensure continuity of staff and time of calls. One person said, "[Staff] stick to my call time." They also confirmed this was important to them.

Using medicines safely

- There were safe policies and procedures for the administration and recording of medicines, staff ensured people received their medicines as prescribed.
- People's care plans contained guidance for staff in the level of help each person needed. For example, one person needed to be given their medication at the same times during the day. This was managed well by staff. One person said, "I always get my medicines on time."
- •The provider completed regular unannounced spot checks to ensure best practice was maintained.

Preventing and controlling infection

- The registered manager had up to date policies and procedures in place to safeguard people and staff and reduce the risk of transmission of infection.
- The service maintained a good supply of personal protective equipment (PPE) to help prevent the spread of infection.

Learning lessons when things go wrong

- Incidents and concerns involving people using the service or staff were managed effectively and reviewed by the registered manager.
- Learning from events were shared with staff during supervisions and team meetings.

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

- An assessment of people's needs was completed and regularly reviewed. A person said, "I had a talk with [registered manager] about my needs and they listened to my choices."
- Staff ensured they respected people's choices in a fair and equal way. One example of this included supporting people to attend social events that were important to them. One person said, "Nothing is too much trouble for staff."
- A staff member said, "We provide good care, each person has different needs. We are like a big family."

Staff support: induction, training, skills and experience

- Staff received a range of training based on people's assessed needs and were supported to develop further skills. These included the completion of nationally recognised qualifications in care.
- Staff confirmed they received support from the provider, including supervision and regular contact. One staff member told us, "As part of my induction I was placed with a qualified staff member and introduced to all our clients and shown how to support them."

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

- People were supported to eat and drink independently and to make healthy choices.
- One person told us, "[Staff] always make sure I have a drink." A relative told us, "Staff are really good and friendly, they support my [relative] with food and they are really happy."
- People s nutritional needs were noted within their care plans.

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.

• Staff understood how to apply the principals of the MCA in their daily work. One staff member said, "I never assume its ok to do something. I always make sure people are involved with decisions about their care."

• Staff we spoke with understood the importance of choice and respected peoples wishes.

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

- People and their relatives were very positive about the staff and the service they provided. One person said since starting with the company, "It has been an excellent experience. Staff are friendly and come on time, they are a happy lot." A relative said, "Staff are lovely and have time to chat, they have got to know my [relative] and they are very happy."
- People confirmed they were involved in decisions about their support, care plans contained enough guidance for staff to ensure that people received appropriate care.
- People's preferences were documented to ensure staff understood what was important to them. For example, their preference for a male or female staff member.

Respecting and promoting people's privacy, dignity and independence

- Staff were clear on how to promote people's dignity and independence. One staff member said when supporting people with personal care, "It's nice to speak with people and put them at ease. We use towels to cover and protect their dignity and ask their permission before we do anything."
- People we spoke with confirmed that staff were respectful and dignified when supporting them. One person said, "My care is not rushed, and staff always take time to chat and are respectful."
- People were supported to remain as independent as possible. A person told us, "I struggle to get in and out of the car and needed to attend a funeral." They confirmed that the registered manager had supported them to attend the funeral.
- One person who needed support to attend a Christmas gathering told us, that they would not be able to do this if it were not for the support from the registered manager.

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 and their relatives confirmed that their care and support needs were discussed and personalised to how and when people wanted their care and support.

• Staff took the time to develop relationships and provide support in a kind and caring way. One person said, "They listen to our needs."

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.

• Care plans showed that people's communication needs had been considered and gave clear guidance on whether people needed support with communication. One person said, "I can communicate my needs."

Improving care quality in response to complaints or concerns

- People and relatives knew who to raise concerns and felt confident in communicating any concerns they had.
- People confirmed they had no concerns or complaints and were happy with the communication from staff and the registered manager. One relative said, "We know how to raise a complaint, we discussed it with the registered manager."
- The service had systems in place to respond to any concerns or complaints that might be made. Complaints would be investigated and responded to by the registered manager

End of life care and support

• Staff were not currently supporting anyone who was at the end of their life. All staff had completed end of life training

• Not all care plans reflected people's end of life wishes. This was discussed with the registered manager who has assured us that all care plans will be updated to reflect these choices.

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

- The registered manager was committed to developing a person-centred culture within the service. They told us, "The care and support is all about the person, we discuss their preferences and wishes to ensure good quality care."
- People and their relatives were positive about the care and support they received and were confident in staff capabilities One person said, "Staff are always prepared to help."

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; Continuous learning and improving care

- The registered manager used information gathered from audits, spot-checks and feedback to develop the service and make improvements.
- The registered manager was clear about their responsibilities for reporting to the CQC and the regulatory requirements
- Staff were extremely positive about the skills and leadership of the registered manager. One member of staff told us, "I feel supported if there is ever an issue there is always someone who will help, we are a good team."

• People told us the registered manager was in contact with them regularly, to check they were happy with their care and support. The registered manager told us, "There is nothing I wouldn't do to ensure people have good care."

• Staff were given the opportunity to feedback, with regular staff meetings and one to one supervision. One staff member said, "I have supervisions, [registered manager] always checks I'm okay and supervisions also include support with development."

Working in partnership with others

• Staff and the registered manager worked in partnership with other professionals and agencies, such as the GP, Occupational Therapists and other health care professionals and the local authority to ensure that people received joined-up care.