

# Health Care Support Services Limited

# Health Care Support Services Ltd

## Inspection report

1 Drayton Road  
Shawbury  
Shrewsbury  
Shropshire  
SY4 4NZ

Date of inspection visit:  
28 February 2017

Date of publication:  
19 April 2017

Website: [www.healthcaresupportservices.co.uk](http://www.healthcaresupportservices.co.uk)

## 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

The inspection was carried out on 28 February 2017 and was announced.

Health Care Support Services is a domiciliary care agency that provides personal care and support to people in their own homes. At the time of our visit the agency was providing a service to 17 people. The frequency of and duration of visits across the service varied depending on people's needs.

There was a registered manager in post who was present during the inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People were supported to remain safe in their own home. Staff were knowledgeable about the different forms of abuse and knew how to report concerns. The provider followed safe recruitment procedures to ensure potential new staff were suitable to work with people who used the service.

Staff were aware of the risks associated with people's needs and home environments and how to minimise these. The registered manager assessed staffing levels dependent on people's level of needs.

People were supported by staff who had the necessary skills and knowledge to understand and meet people's needs. Staff felt well supported and had access to training relevant to their roles.

Staff sought people's consent before supporting them and respected their decisions. Staff provided information to people in a way they understood to enable them to make decisions for themselves.

People were offered choice about what they wanted to eat and drink. Staff monitored people's health and arranged health care appointments where necessary.

People were supported by staff who were caring and treated them with respect. Staff had formed positive working relationships with people and their relatives. People were supported to remain as independent as possible. Staff were mindful to protect people's dignity.

People received individualised care that reflected their needs and wishes. People benefitted from a flexible service that was responsive to changes in their needs and requirements. People were given opportunities to comment on the quality of the service and felt comfortable to raise any concerns with staff or management.

There was a positive working culture where staff and management worked together to deliver good quality care. People, relatives and staff found the management team easy to approach and helpful. There were quality assurance systems in place to drive improvements in the service.

## 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.

People were supported to keep safe by staff who were aware of the risks associated with their needs and how to minimise these.

Staff were able to recognise the different signs of abuse and knew how to report concerns.

People were supported to take their medicine as prescribed to maintain good health.

### Is the service effective?

Good ●

The service was effective.

People were supported by staff who received training relevant to their role.

Staff sought people's consent before supporting them.

People were offered choice of what they wanted to eat or drink.

Staff monitored people's health and arranged health care appointments where necessary.

### Is the service caring?

Good ●

The service was caring.

People were supported by staff who were kind and caring.

Staff had formed positive working relationships with people and their relatives.

People were treated with dignity and respect and were encouraged to maintain their independence.

### Is the service responsive?

Good ●

The service was responsive.

People received individualised care that took account of their wishes and preferences.

People received a flexible service that responsive to their changing needs.

People felt comfortable to raise concerns should the need arise.

**Is the service well-led?**

**Good** ●

The service was well led.

People and their relatives found staff and management friendly and approachable.

There was a positive working culture where staff and management worked together to provide good quality care.

The registered manager had checks in place to monitor the quality of the service and drive improvements.

# Health Care Support Services Ltd

## **Detailed findings**

### Background to this 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 was planned to check 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.

This inspection took place on 28 February 2017 and was announced. The provider was given 24 hours' notice because the location provides a domiciliary care service for people in their own homes and we needed to make sure there would be someone in the office. The inspection was carried out by one 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.

As part of the inspection we reviewed the information we held about the service, such as statutory notifications we had received from the provider. A statutory notification is information about important events which the provider is required to send us by law. We asked the local authority and Healthwatch if they had information to share about the service provided. We used this information to plan the inspection.

During the inspection we spoke with four people who used the service and six relatives. We spoke with seven staff which included the registered and assistant managers, a care coordinator and four care staff. We viewed two records which related to assessment of needs and risks. We also viewed other records which related to management of the service such as complaints, quality assurance processes and three recruitment records.

# Is the service safe?

## Our findings

At our last inspection, we found people were not protected from the risks of harm or abuse because concerns of abuse were not appropriately responded to. This was a breach of Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We asked the provider to make improvements and to send us an action plan detailing how they would achieve this.

At this inspection we found improvements had been made. People were supported by staff who had been trained to in how to protect them from abuse and avoidable harm. The staff we spoke with understood the different forms and potential signs of abuse. These included changes in people's behaviour and unexplained injuries. They recognised it was their responsibility to immediately report any such concerns. They told us that the registered manager encouraged them to complete incident forms regarding any concerns that they identified. One staff member said, "I would go straight to the office and do an incident form about what I had seen or been told." The registered manager showed us they had appropriately reported a concern to the local authority safeguarding team and taken prompt action to reduce the risk of harm. They had also reviewed their policies and they and staff were aware of how to report concerns to external agencies if required.

People and their relatives told us they felt safe with the support provided by staff. One person said, "If I am worried about myself then I can rely on them (staff) to ring the doctor for me which makes me feel safe. Another person told us, "I feel very safe with them all." A relative told us, "They (staff) are very careful when they move [family member] and always ask when they do it."

People were protected from the risk of harm by staff who were aware of the support and equipment they needed to keep them safe. Staff told us they received training on how to use equipment before they used it. We saw that the management team completed assessments on both the environmental risks at people's properties and risks associated with people's individual needs. These included risk associated with people's mobility which detailed the equipment to be used and how many staff were required to assist them with each aspect. Staff told us they informed the office staff if they noticed any changes in people's needs to allow the risk assessment to be updated.

Staff told us they continually looked out for any hazards that posed a risk to people and reported these to the office staff who took action to address their concerns. Where appropriate, staff also took care to secure people's properties before they left and ensured that people's key safe numbers were protected.

Staff we spoke with demonstrated they would take appropriate action in the event of any accidents or incidents. They initially ensured people's safety and subsequently reported the incidents to the office. The registered manager showed us that they had oversight of the incident forms and demonstrated that they took appropriate action to address the concerns raised. For example, we saw that they were in regular contact with one person's social worker regarding concerns raised by staff.

People and their relatives described staff as reliable and usually punctual. One person told us, "They (staff)

generally arrive on time and if they are late it is only by a minute or two. They also stay for the full time and sometimes a bit longer if I need it." A relative said, "They (staff) always turn up on time and if they are going to be late then they will ring to let us know what is going on. They never leave until they have finished their work." The registered manager assessed and planned their staffing based on the care hours provided and people's individual care needs. They told us they were not taking on any additional work until they had recruited more staff. Staff we spoke with told us they were unable to start work with people until references and Disclosure and Barring Service (DBS) checks had been made. The DBS enables employers to make safer recruitment decisions. Records we looked at confirmed the necessary checks had been made. The provider employed an external company to support them on disciplinary issues such as staff misconduct.

People and their relatives told us they were supported to take their medicines safely. One person said, "They (staff) cream my legs each day and give me my tablets. They write everything up in the book." A relative said, "They give my [family member] their tablets each night and make sure that they take them. They cream their legs in the morning and do a very good job." Another relative told us, "They (staff) give [family member] eye drops and they are always very careful when I have seen them doing it. They also fill in the book so I know what they have done." Only staff who received training on the safe management of medicines administered them. We saw that 'spot checks' of staff practice included observation of the safe management of medicines.

# Is the service effective?

## Our findings

People and their relatives felt staff had the knowledge and skills to meet people's needs. One person told us, "The staff who come to see me seem to know what they are doing. Most of it is personal care and they are very good at that." Another person said, "[staff member's name] is brilliant. I hope to keep them they are very good." A relative we spoke with told us, "I have total confidence in my [family member's] carers. They know how to care for [family member] and take every care when they move them or wash them."

Staff we spoke with were given training to prepare them for their roles and to meet people's individual needs. All new staff received an induction into the service. This included working alongside experienced colleagues where they learnt about people's needs. They also had the opportunity to participate in training, to read people's care plans and policies relating to the service. New staff who had not had experience of working in care were supported to complete the care certificate training. The care certificate is a nationally recognised programme that trains staff about the standards of care required of them. Staff were positive about their training opportunities and felt able to approach the registered manager should they wish to undertake additional training. Staff told us they had regular one-to-one meetings with their line manager. They found these meetings beneficial as they were able to discuss any concerns they had as well as receiving feedback on their practice and development.

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 make particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People told us staff always requested their permission before supporting them. One person said, "They (staff) are always ask if I am happy with what they are going to do." A relative we spoke with told us, "They (staff) always ask [family member] if it is alright to do things they need to do for them. They always involve them in what they are doing." Staff told us the people they supported were able to make decisions about their day-to-day support. They recognised that some people had difficulty communicating their needs and therefore adapted their approach to suit. For example, one staff member told us, "I always give them choice. I would not take that away from them. I show them different options. If they weren't able to speak they could point." Another staff member told us they assumed everyone had capacity unless proven otherwise. Where there were concerns about people's capacity they said they would follow the best interest process involving the person as much as possible, their relatives and relevant professionals to ensure their rights were protected.

People and their relatives were happy with the support they received with meals and drinks. They confirmed that staff offered them choice. One person told us, "I organise my own lunch and the staff always make me sandwiches for my tea and they always ask me what I would like." A relative said, "They (staff) do [family member's] lunch and tea and always make sure it is how they like it. The always ask [family member] if it is alright for them and what would they prefer." Staff told us they were made aware of people's dietary needs and encouraged people to follow healthy diets. If someone refused a meal they said they would always make them something up for later and ensured that they gave them a drink before leaving.



Staff monitored people's well-being and worked with other professionals to promote good health. One relative told us, "When [family member] came out of hospital they had bed sores which the staff and the district nurses worked on. [Family member] is now clear and the staff work hard to make sure it does not happen again." Another relative said, "They (staff) are very responsible and on one occasion they rang my [family member's] doctor and me because they had a concern about their health. They are fine now because of their prompt action." Staff told us they observed for any changes in people's health and either spoke with their relatives or contacted the office to arrange medical appointments.

## Is the service caring?

### Our findings

People and their relatives were complimentary about the support they received. One person told us, "I think the care I get is very good. They (staff) are always ready to do anything for me. They are very good at the personal care and always ask if it's alright to do things for me. They are all very polite." A relative told us, "The care my [family member] gets is excellent. They (staff) are always looking how they can make my [family member's] life better and I can't fault them. They are all very polite and courteous and arrive with a smile on their face."

Staff had formed positive working relationships with people and their relatives. People and their relatives described being supported by staff who knew them well and were friendly and caring. One person told us, "They (staff) are good." They went on to explain they liked to have a chat and joke with the staff. A relative told us, "The care my [family member] gets is excellent and neither of us could fault it. They (staff) are all very polite and have a good relationship with [family member]. They get on really well." Another relative said, "They (staff) are all very polite and they always chat with [family member] when they are with them. There is a lot of laughter which is really nice and cheers everybody up."

People and their relatives felt staff took time to promote their choice and listened to how they liked things done. One person told us, "They (staff) do know what I like and we get on very well together." Another person said staff always asked them what they wanted them to do and always checked if there was anything else they could do before they left. A relative we spoke with said, "The care my [family member] gets is excellent and I can't fault it. They always make sure they are happy with what they are doing and treat them as they were one of their family." Another relative told us, "They know how to help [family member] and make sure that they are always involved in what they are doing as the care is very personal."

Staff recognised people as individuals and acknowledged they all liked things done differently. One staff member told us, "The more you communicate with people and other staff you find how people want things done in a certain way." Another staff member said it was important to check with people how they wanted things done each time as they could change their mind.

People were treated with dignity and respect. When asked if staff promoted their dignity one person replied, "They certainly do." They went on to tell us they found staff respectful towards them and that they never talked about other people they supported. A relative we spoke with said, "They (staff) are all very respectful and do not demean [family member] in any way." Staff spoke about people with warmth and respect. They were mindful of protecting people's dignity. They ensured their privacy by closing curtains and doors and covered people up as much as possible when providing personal care. Staff also recognised the need to maintain people's confidentiality. They told us they only shared information with people's consent and on a need to know basis.

People were supported to remain as independent as possible. One person told us, "They do try and keep me active even at my great age." This was confirmed by relatives. We spoke with one relative who said, "They (staff) do help to get [family member] to do as much for themselves as possible without putting them at

risk." Another relative told us, "[family member] tries to remain as independent as possible and the carers do much to help that happen so they can make their own choices." Staff recognised that it was important to maximise people's independence to enable them to continue living in their own homes. One staff member told us they encouraged people to wash the areas they were able and offered assistance with the hard to reach areas.

## Is the service responsive?

### Our findings

People and their relatives told us the support they received was tailored to their individual needs and preferences. One person told us, "They (staff) do know what I like and we get on very well together." Another person said, "If I ask or tell them (staff) to do something they do it." A relative we spoke with said, "The carers do know what my [family member] likes and make sure that is what they do. They're always careful to make sure they are dressed the way they want to be."

People and their relatives found the service responsive and flexible. One relative said, "The office are very helpful and we get a list who is coming to see us which is really helpful. They have arranged emergency cover for us when we needed it." Another relative told us, "[family member] was in respite care after the hospital but I wanted them home as soon as possible which the care has made possible, I am very grateful for that."

The provider had introduced new care planning documentation following our last inspection. One staff member explained the importance they placed on establishing people's wishes when they developed their care plans with them. They said, "It's the little things they like that make it personal to them. It's their care plan." Another staff member told us the information provided in people's care plans was much improved. Care plans we looked at promoted a person centred approach and captured information about what was important to people. Care plans were kept under regular review to ensure information was up-to-date. Staff told us they were encouraged to report any changes in people's needs to the office staff. Management then updated people's care plans to accurately reflect their needs. Staff were informed when changes had occurred to enable them provide consistent support.

People and relatives were given opportunities to voice their opinions about the quality of the service. One relative told us, "Everything is working well. I have had a questionnaire from the care service and have returned it. It was all very positive." The registered manager told us they welcomed feedback and where appropriate used this to make improvements.

People and their relatives had not had reason to complain but felt comfortable to raise concerns with staff or management. We saw that the provider had a complaints process and that people received information about how to raise a complaint when they started receiving support. Where a complaint had been received we saw that this was dealt with appropriately in line with the provider's complaint process.

## Is the service well-led?

### Our findings

The registered manager was also the owner of the service. They told us their aim was to ensure people received a good quality service. They felt that this was achieved by investing in staff development. They told us, "I am proud of the staff. They listen and I like their nice caring approach." Staff we spoke with were aware of the vision for the service and worked with the management team to deliver good quality care. One staff member told us, "[Registered manager] wants the best possible care for people; to make sure they are well looked after and safe." They went on to tell us they enjoyed working with their colleagues who were all on the same 'wave length'.

At our last inspection, we found that two alleged incidents of abuse had not been referred to the appropriate authorities. They also had not fulfilled their statutory duty to notify us of these alleged incidents. This was a breach of regulation 18 of the Care Quality Commission (Registration) Regulations 2009. We asked the provider to make improvements and to send us an action plan detailing how they would achieve this.

At this inspection we found the registered manager had put systems in place to ensure that the relevant authorities were informed of safeguarding concerns. They had also submitted statutory notifications to us as required.

People and relatives we spoke with felt that staff and management were friendly, approachable and helpful. One person told us, they had visited the office a couple of times and found the staff their easy to talk with. A relative told us, "We are very happy with the service we get and with the main office. They are very approachable and nothing is too much trouble."

People and relatives felt that the service was well-run and found communication with staff and management was good. One person told us, "This is good service and I am really happy with it. The office are really helpful and keep me going. If I need to change anything the office are very helpful and know what they are doing." A relative told us, "We are really happy with the service and I can't fault it. The people in the office are very helpful and will make changes if we need to for any reason." Another relative said, "We are really happy with the service we get and would be hard to find better."

Staff felt that there was an open and honest working culture. They were given opportunities to put their views forward through staff meetings and staff questionnaires. One staff member told us the registered manager was open to change. For example, they had suggested a new filing system and the registered manager 'went with it'. Staff told us they felt well supported and could approach the management team for support and guidance whenever necessary. One staff member said, "Their door is always open, they will help you in any way that they can. They are really supportive." Another staff member told us they saw the registered manager on daily basis and that they were always at the end of the phone if they needed any guidance or support. Staff had access to an 'on call' system outside office hours and told us management were always available.

The registered manager had systems in place to monitor the quality and safety of the service these included audits on medicine administration records and staff 'spot checks'. One staff member told us they received feedback about what they did well and where they could improve their practice. We saw that 'spot checks' were periodically completed with staff and covered areas such as communication and safe use of equipment. The registered manager told us they intended to improve their scheduling and overview of quality checks through their scheduling system. They had arranged additional training on their scheduling system to better understand the functionality and advantages.

The registered manager told us they kept up to date with best practice through the CQC website and had good links with local training facilities. They had recently completed a course on customer service and were due to attend training about CQC key lines of enquiry. We saw that the assistant manager had put in place a system for monitoring staff training.