

Safe Hands Home Care Limited

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Inspection report

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Ratings

Overall rating for this service

Inadequate 

Is the service safe?

Inadequate 

Is the service effective?

Requires Improvement 

Is the service caring?

Requires Improvement 

Is the service responsive?

Requires Improvement 

Is the service well-led?

Inadequate 

Summary of findings

Overall summary

About the service

Safe Hands Home Care Limited is a domiciliary care agency providing personal care to older people, those with a physical disability, people living with dementia and people with a learning disability who are living in their own homes. At the time of our inspection there were 8 people using the service who received the regulated service of personal care.

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.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

The registered manager had not read this guidance and therefore they were not fully able to demonstrate how the service was meeting the underpinning principles of 'Right support, right care, right culture.'

Right Support

An effective system to assess, monitor and manage risk was not in place. Risks relating to people's care and support and medicines had not been fully assessed.

Relatives told us that people were generally supported by the same staff and there had been no missed calls. One relative said, "There is more or less the same carers, they have been there a long time, more than 14 years. She is quite happy with them."

Right Care

Care plans did not fully reflect people's needs. The registered manager told us these were being updated.

People were supported to access the local community and take part in activities, where this was part of their plan of care.

People and relatives we spoke with talked positively about the caring nature of staff. One relative told us, "When [name of staff member] goes in, she will put bird food out for her, she likes to see the birds."

Right Culture

An effective system was not in place to monitor and manage the quality and safety of the service and ensure

regulatory requirements were met. We identified shortfalls across many areas of the service including the assessment of risk, medicines management, the maintenance of records relating to people, staff and the management of the service. These had not been identified by the provider's monitoring systems.

Whilst we did not identify any impact on people, there was the potential for people to come to harm, as risks were not adequately assessed and records were not well maintained. The registered manager told us they were reviewing their whole governance system to ensure it effectively monitored the quality and safety of the service.

People and relatives spoke positively about the service. One relative said, "I'm happy with it all - I would recommend it. I would say that they are good at their jobs, know what they are doing and are nice and kind people." Staff also spoke enthusiastically about working at the service and the people they supported.

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 requires improvement (published 1 June 2023).

At our last inspection there were 3 breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 relating to Safe care and treatment; Staffing [in relation to training] and Good governance. We issued a warning notice in relation to Regulation 17 [Good governance] and told the provider and registered manager, action needed to be taken to improve. The provider completed an action plan to show what they would do and by when to improve. We also met with the provider and registered manager to discuss how they would make changes to ensure they improve their rating to at least good.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

We have found evidence that the provider needs to make improvements. Please see the full report below for further details.

Enforcement and Recommendations

We identified 3 continuing breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 relating to Safe care and treatment, Staffing [in relation to training] and Good governance. Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

Follow up

The overall rating for this service is 'Inadequate' and the service is therefore in 'special measures.' This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions of the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as

inadequate for any of the five key questions it will no longer be in special measures.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Inadequate ●

The service was not safe.

Details are in our safe findings below.

Is the service effective?

Requires Improvement ●

The service was not always effective.

Details are in our effective findings below.

Is the service caring?

Requires Improvement ●

The service was not always caring.

Details are in our caring findings below.

Is the service responsive?

Requires Improvement ●

The service was not always responsive.

Details are in our responsive findings below.

Is the service well-led?

Inadequate ●

The service was not well-led.

Details are in our well-led findings below.

Safe Hands Home Care 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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by an inspector, a medicines 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.

This service also provides care and support to a person living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was announced.

Inspection activity started on 21 November 2023 and ended on 11 December 2023. We visited the location's office on 21 and 23 November and 5 December 2023.

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.

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager, trainee team leader and 6 support workers. We reviewed records relating to people's care and support, medicines management, staff recruitment, training and support and the management of the service, including policies and procedures. We visited 4 people at their home, spoke with 3 relatives by phone and contacted a health and social care professional for their feedback.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to inadequate. This meant people were at risk of avoidable harm. The provider has failed to achieve a rating of at least good in this key question at 4 of the 5 rated inspections carried out since 2016.

Assessing risk, safety monitoring and management; Using medicines safely

At our last inspection, an effective system to assess and manage risk was not fully in place. This was a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this regulation.

- Risks relating to people's care and support such as eating and drinking, choking and medicines management had not been fully assessed.
- An effective system was still not in place to manage medicines. Guidance and records were not fully in place to support the safe administration of medicines. This meant there was a risk people may not receive their medicines consistently.

The failure to ensure an effective system was in place to manage medicines and assess and monitor risk was an ongoing breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Whilst we did not identify any impact on people, there was the potential for people to come to harm, since risks were not adequately assessed. The registered manager told us they were updating people's risk assessments to ensure these reflected people's needs. In addition, they were reviewing their medicines management and had devised a new medicines audit.

Learning lessons when things go wrong

- Lessons had not been learned from the previous inspections and the necessary improvements had not been fully made.

The failure to ensure an effective system was in place to make sure lessons were learned and improvements were made was an ongoing breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Staffing and recruitment

At our last inspection an effective system was not fully in place to ensure records evidenced that safe recruitment procedures were followed. This was a breach of Regulation 17 (Good governance) of the Health

and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this Regulation.

- An effective recruitment system was not fully in place. Records did not always demonstrate that effective recruitment procedures were followed. Records did not always evidence that right to work checks had been undertaken in line with government guidance.

The failure to ensure records evidenced that an effective recruitment system was in place was an ongoing breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Recruitment was ongoing. Recruitment had been affected by the current workforce pressures in adult social care services.

- Whilst there were sufficient staff deployed to meet people's needs; due to staff sickness, the registered manager was having to cover care visits which meant they had less time in the office to manage the service. One relative told us, "I think they are bit short staffed, we haven't had any problems with his care, but they are a bit stressed at times."
- Daily communication records demonstrated staff did not always stay the contracted length of time to meet people's needs. The registered manager told us they would start auditing these.
- Relatives told us they generally saw the same staff and there had been no missed calls.

Systems and processes to safeguard people from the risk of abuse

- The local authority had placed the service into 'organisational safeguarding' on 22 August 2022. This meant the local authority was monitoring the service and supporting them to ensure the correct procedures were in place to keep people safe. Not enough action had been taken by the provider and registered manager to reassure the local authority the service could be removed from their organisational safeguarding procedures.
- Staff had completed safeguarding training; however, the registered manager told us they had completed level 1 safeguarding training which included a basic awareness. They explained they were going to complete the "manager's safeguarding training" at the earliest opportunity.
- Relatives told us people were safe with the staff who supported them. One relative said, "Yes, he is safe, I am pleased as I can't get down every day and I know someone is going in to see he is alright."

Preventing and controlling infection

At our last inspection, risks relating to infection control had not been effectively assessed, monitored and managed. This was a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of this Regulation in relation to infection control.

- Risks relating to infection control had been assessed and recorded. Relatives said that staff wore personal protective equipment to reduce the risk of cross infection. One relative said, "They have plastic aprons and gloves, they have all the gear and masks."

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 our last inspection we rated this key question requires improvement. At this inspection the rating has remained requires improvement. This meant the effectiveness of people's care, treatment and support did not always achieve good outcomes or was inconsistent. The provider has failed to achieve a rating of at least good in this key question at 4 of the 5 rated inspections carried out since 2016.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

At our last inspection, an effective system was not in place to assess people's needs and ensure care and support was delivered in line with best practice was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this Regulation.

- Records relating to people's care and support and the management of the service did not evidence that people's care and support were assessed and delivered in line with best practice guidance. We identified shortfalls relating to the assessment of risk, medicines management and planning people's care.

The failure to ensure an effective system was in place to assess people's needs and ensure care and support was delivered in line with best practice was an ongoing breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Staff support: induction, training, skills and experience

At our last inspection, an effective system to ensure staff were competent and trained was not fully in place. This was a breach of Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Whilst additional training was being carried out, not enough action had been taken and the provider remained in breach of this Regulation.

- An effective system was not fully in place to demonstrate that staff were competent and trained.
- Records did not fully evidence what induction training staff had completed. In addition, training had not been completed in line with the provider's training policy or people's assessed needs.

The failure to ensure staff were competent and trained was an ongoing breach of Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The registered manager told us and records confirmed that training was ongoing.

- Staff told us they felt supported in their job role and spoke positively about working at the service and the

people they supported.

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

At our last inspection an effective system was not in place to demonstrate how people were supported to eat and drink safely and access health care support. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this Regulation.

- Records did not fully evidence how people were supported to eat and drink safely.
- Records did not evidence that advice and guidance from a speech and language therapist had been incorporated into a person's plan of care.

The failure to ensure risks relating to eating and drinking were assessed was an ongoing breach of Regulation 12 (Safe care and treatment). The failure to ensure records were effectively maintained to demonstrate how people were supported to eat and drink safely was an ongoing breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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 MCA 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.

At our last inspection records did not demonstrate how staff were following the principles of the MCA. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this Regulation.

- Information about consent and how this was gained was not fully recorded in relation to one person's care.

The failure to ensure records evidenced how consent was gained was an ongoing breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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 comprehensive inspection this key question was rated as good. At this inspection this key question has changed to requires improvement. This meant there was a risk that people may not always be well supported.

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

- An effective system to support people to be involved in their care was not fully in place.
- Records did not demonstrate that care reviews had been carried out to ensure people's plan of care met their needs.

The failure to ensure records demonstrated that people were involved in their care was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- The registered manager told us care reviews had not been carried out since 2019 due to the pandemic, however, these would be reviewed and restarted. They explained they were a small service and they and the staff knew people and their relatives well.

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

- Due to the concerns identified during the inspection, we could not be assured people received a high quality, compassionate and caring service. We have taken this into account when rating this key question.
- Despite the shortfalls and omissions, we identified during our inspection; people and relatives spoke positively about the staff and the care provided. Comments from relatives included, "They are very good. It's their attitude and they are caring. He is happy with them and I am happy with them...I haven't got any worries, whatsoever" and "I think they like coming to see her. They are very pleasant and caring. I make sure when they first start, they know what is expected of them."

Respecting and promoting people's privacy, dignity and independence

- Relatives said that people's privacy, dignity and independence were promoted.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has remained requires improvement. This meant people's needs were not always met. The provider has failed to achieve a rating of at least good in this key question at 4 of the 5 rated inspections carried out since 2016.

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

At our last inspection care plans didn't fully reflect people's needs. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made and the provider remained in breach of this Regulation.

- Care plans did not fully reflect people's needs and records did not always show how people were involved in their care.

The failure to ensure care plans reflected people's needs was an ongoing breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The registered manager told us that care plans were being updated.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- An accessible information policy was in place. The registered manager told us no one currently using the service required information in a different format.

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

- People were supported to access the local community and take part in activities, where this was part of their plan of care.

Improving care quality in response to complaints or concerns

- A complaints procedure was in place. Relatives told us they had no complaints about the service or the care provided.

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 our last inspection we rated this key question inadequate. At this inspection the rating has remained the same. This meant there were widespread and significant shortfalls in service leadership. Leaders and the culture they created did not assure the delivery of high-quality care. The provider has failed to achieve a rating of at least good in this key question at 4 of the 5 rated inspections carried out since 2016.

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

At our last inspection an effective system was not in place to monitor the quality and safety of the service. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this Regulation.

- An effective system was still not in place to ensure regulatory requirements were met.
- We identified ongoing shortfalls across many areas of the service including the assessment of risk, medicines management, the maintenance of records relating to people, staff and the management of the service. The requirements of the warning notice issued at the last inspection had not been met.
- Documented checks of the service, with the exception of medicines, were not carried out.

The failure to ensure an effective monitoring system was in place was an ongoing breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Whilst we did not identify any impact on people, there was the potential for people to come to harm, since risks were not adequately assessed and records were not well maintained. The registered manager told us they were reviewing their whole governance system to ensure it effectively monitored the quality and safety of the service.

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

- People, relatives and staff told us they were involved in the service, although records did not always evidence their full involvement.
- The registered manager told us that because the service was small, they and the staff knew people and their relatives well. Staff meetings were not carried out; the registered manager explained they saw and spoke with staff regularly.
- Surveys were carried out to obtain feedback from people and relatives.

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 told us there had been no incidents which had required them to act upon this duty.

Working in partnership with others

- The registered manager was working with the local authorities to implement change. Further action was required to ensure improvements were made in a timely manner.

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

- People and relatives spoke enthusiastically about the caring nature of staff. They also spoke positively about the registered manager. One relative told us, "The manager - he is nice bloke; he sometimes calls in when they are a bit short staffed. He is good - no complaints."