

Kindered Hearts Limited

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Inspection report

Unit 5
Priory Works, Priory Avenue
Southend-on-sea
SS2 6LD

Tel: 07846214983

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21 November 2022
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23 November 2022

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Kindered Hearts Limited is a domiciliary care agency who provide personal care to people in their own homes. At the time of inspection 14 people were using the service and receiving 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.

The provider had not always used safe recruitment processes to ensure the right people were employed to safely care for people. Recruitment procedures needed to be more robust to ensure safe recruitment practices were in place.

Improvements were needed with auditing to ensure issues were identified and addressed promptly.

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

People and their relatives were very positive in the feedback they gave about the service. One person said, "I give them full marks, a really good service."

Care planning was person-centred and delivered in a way that was intended to ensure people's safety and welfare. Staff had received appropriate training. There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents. Medicines when needed were dispensed by staff who had received training to do so.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service support this practice.

People when needed were supported with hydration and nutrition. The provider responded to complaints received in a timely manner. People were supported to make plans for the end of their life.

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 6 April 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Enforcement

We have identified breaches in relation to recruitment at this inspection.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve recruitment practices. We will work alongside the provider to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 not always safe.

Details are in our safe findings below.

Requires Improvement ●

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 not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Kindered Hearts 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 completed by 1 inspector.

Service and service type

Kindered Hearts Limited is a domiciliary care agency. It provides personal care to people living in their own homes.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 21 November 2022 and ended on 23 November 2022. We visited the location's office on 21 November 2022.

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. 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 2 people and 3 relatives. We spoke with the registered manager and 2 members of care staff. We reviewed a range of records including 3 people's care records, 2 staff recruitment folders, audits, policies and training records.

Following the inspection

We continued to seek feedback and documentation from the registered manager.

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 of this newly registered service. This key question has been rated requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Staffing and recruitment

- Improvements were needed with recruitment processes to ensure staff were safely recruited in line with regulations.
- Application forms did not allow for a full work history to be explored and references were not available to be viewed. The registered manager did request 1 missing reference which was then provided, however another remained missing.
- We found staff recruitment records did not contain all the information required to ensure people were of good character and suitable for the role. Disclosure and Barring Service (DBS) checks had not been completed promptly. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Robust recruitment checks had not been implemented; this placed people at risk of being supported by unsuitable staff not suitable for the role. This was a breach of regulation 19(2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- The registered manager was able to make assurances that these processes would be improved following the inspection.
- People told us they received support from regular staff who knew how to support them.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives provided positive feedback about the service and the care they received.
- Staff had received training on how to identify safeguarding concerns and what they should do to raise these. One member of staff said, "I would gather all the information I needed and report to my line manager. If no action was taken, I would go to the authorities."
- The registered manager had raised safeguarding concerns appropriately and worked with the local authority to keep people safe. One person said, "They are fantastic people they show up on time."

Assessing risk, safety monitoring and management

- Risk assessments were in place to assess people's needs and mitigate risks of harm to them.
- Risk assessments and care plans provided guidance to staff on how to support people safely.
- Staff used a system to show they had attended calls and supported people with their care needs. The registered manager could check care calls were happening and monitor for the risk of missed calls.
- Environmental risk assessments were completed before care commenced to ensure staff were safe and

people were being supported safely.

- Staff we spoke with told us how they kept information secure such as key codes to ensure people were protected.
- Staff knew what to do in an emergency or if they found someone to be unwell.
- The registered manager had business contingency plans in place to support the service through any untoward events, to ensure the service could continue to run.

Using medicines safely

- People were supported safely with their medicines.
- Staff had received training in medicine administration and had their competency to do this checked.
- There was a medicine policy in place to provide guidance to staff and the registered manager completed regular audits of medicine records.

Preventing and controlling infection

- Staff had received training in infection prevention and control (IPC) and risk assessments were in place to support them working safely with people.
- Staff had access to personal protection equipment (PPE) and followed government guidance on using this.
- A relative told us, "The staff always wear aprons, gloves and masks."

Learning lessons when things go wrong

- The registered manager used reflective practice to learn lessons when things go wrong and to address any issues identified. Information was shared with staff when needed to improve practice.

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 reviewed assessments of people's needs before they began using the service to ensure they could be met. People's choices for care were considered and preferences recorded.

Staff support: induction, training, skills and experience

- The registered manager invested their time in training staff to ensure they had the correct skills to deliver care safely. Before staff started working at the service the registered manager engaged them in a number of training sessions.
- Staff new to care were supported in completing the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- One member of staff said, "Before I started, I had an interview, then I went through company policies and training. I then did some shadow shifts to meet with people."
- The registered manager had regular meetings with staff and did spot checks to review their performance. One member of staff said, "The registered manager comes and checks our work, such as is the bed made properly, have we emptied the bins and cleaned the sink. As well as checking any medicines are correctly being given."

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

- People were supported to have adequate diet and nutrition. Care plans detailed how people liked to be supported.
- Staff had received training in safe food handling. The registered manager additionally made sure staff knew how to use people's cooking appliances safely when providing hot food.

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

- The registered manager has formed relationships with other healthcare professionals such as social workers, occupational therapist (OT) and palliative care team to raise with them when people require further support.
- One relative said, "When equipment was needed (registered managers name) got on to the OT to sort everything out."

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.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- People using the service had the capacity to consent to their care packages. The registered manager recorded people's consent on their care plans.
- One member of staff said, "I talk to people and always check they consent before I do anything."

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

- People and relatives were very complimentary of the staff and the registered manager. One relative told us, "The staff are very kind and caring."
- People shared they had a good experience with the service. One person said, "The staff are fantastic people." Another person said, "I have regular carer's, they are kind and reasonable and know what they are doing."
- Care was planned to meet people's individual needs whilst respecting their equality and diversity.

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

- The registered manager met with people and relatives to discuss their care and gain their feedback. One relative said, "Communication is very good with the manager."
- One person said, "I had a form to fill in about the support I need. The staff are lovely very caring."

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect whilst promoting their independence. One member of staff said, "We helped [person name] to mobilise again, they are now very happy."
- Another member of staff said, "We make sure we maintain people's privacy when supporting with personal care by closing doors or shutting curtains."

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

- Before people received care a full assessment of their needs was completed by the registered manager. In agreement with people and relatives a care plan was formulated identifying their needs and wishes for care.
- Care plans were regularly reviewed with people and their relatives so that staff had the most up to date information to support people.
- Where there were specific concerns or health related conditions risk assessments and information was in place to enable staff to support people safely.

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.

- Peoples communication needs were considered, and care planned appropriately to ensure these needs were being met.
- The registered manager is able to adapt how information is shared with people to meet their communication needs when required.

Improving care quality in response to complaints or concerns

- The registered manager had a complaints procedure in place and people knew how to make a complaint. Any concerns raised were recorded and responded to in line with this procedure.
- People and relatives told us they had not had any complaints but any concerns they may have had were addressed quickly by the registered manager.

End of life care and support

- The registered manager had formed links with the palliative care team and knew how to gain support from them when needed.
- People's end of life wishes were recorded where appropriate.

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 requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- The registered manager needed to develop clearer recruitment practices to ensure regulations are met for the safe recruitment of staff.
- Audits were in place to help develop the service with continual improvements. These audits needed to be further developed to ensure any issues were identified and addressed promptly.
- Staff were clear about their role and felt supported by the registered manager. One member of staff said, "I have had support in supervision and on spot checks, anything I raise is handled properly."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 spent time with people and their relatives to develop person centre support for people. A relative told us, "I am very confident with the staff, they go above and beyond."
- Relatives frequently told us the registered manager was very involved in ensuring the care provided met the needs of the person and that communication was good.
- Staff shared the managers vision for the service. One member of staff said, "The organisation standards are for high-quality person-centred care. When I leave my client, I want to make sure they are happy with everything."
- The registered manager understood their responsibility under duty of candour to be open and honest and investigate when things go wrong.

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

- The registered manager had systems in place to regularly engage with people and their relatives. This included meeting with them to discuss their care needs and getting feedback in person and through questionnaires.
- When required the service worked in partnership with others to support positive outcomes for people.
- The registered manager involved themselves with networks to keep them up to date with best practice such as, Skills for Care and local care associations.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed Full employment checks were not being completed in line with regulations.