

## н&нHealthcare Limited Н&НHealthcare Limited

#### **Inspection report**

Unit N2, Eagle Close Langage Business Park, Plympton Plymouth Devon PL7 5HZ Date of inspection visit: 09 February 2021 23 February 2021

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Ratings

## Overall rating for this service

Inspected but not rated

Is the service safe?	Good	
Is the service well-led?	Good	

## Summary of findings

#### Overall summary

#### About the service

H & H Healthcare Limited is a domiciliary care agency registered to provide personal care to people in their own homes. The service provides care and support to people which include personal care, food preparation and medication support. At the time of this inspection, the provider informed us that they were providing personal care to 51 people who used the service.

Not everyone using H & H Healthcare Limited received a regulated activity. CQC only inspects the service received by people provided with 'personal care'; 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

People and relatives were happy with the care workers who supported them. Comments included, "I get on well with them all" and "Really cheerful staff, makes you feel so much better".

People felt safe and comfortable when staff were in their home. People were kept safe as potential risks had been assessed and managed. Staff recruitment practices were safe.

People felt staff were trained and experienced to meet their needs. One person said, "They are very careful when helping me and they are well trained". However, one person and one relative told us some staff were not meeting their needs as well as others. We raised this with the registered manager who assured us they would follow this up.

People's medicines were managed safely. Medicines Administration Records (MARs) contained all of the required information and were fully completed. Regular medicines audits were carried out to ensure people received their medicines safely.

People and their relatives confirmed staff followed good infection control practice in their homes. Staff had completed infection control training and additional training specifically relating to COVID-19. Some staff were unsure of the order they should put on and take off Personal Protective Equipment (PPE). During the inspection, the provider sent further information out to staff, so they understood their responsibilities in relation to this.

People told us the service was well managed and there was good communication. Comments included, "I feel the company is well managed, very happy", "The service does everything well, I wouldn't want to change anything". A healthcare professional told us, "Communication is good and I have found this has improved over the last 12 months."

Since the previous inspection, the registered manager had restructured the leadership of the service. This had led to the development of new processes to monitor the service, drive improvement and provide

oversight. An electronic system had been introduced to monitor people's visits and ensure people and staff were safe. Following the previous inspection, the management team had worked hard to make the required improvements and had plans to further develop the service.

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 November 2019).

The service was rated as Requires Improvement because we found the registered provider to be in breach of six regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Following the last inspection, we asked the provider to complete an action plan to show what they would do to improve and by when. During this focused inspection, we were given assurances that improvements had been made in relation to the assessment of people's mental capacity, the delivery of person-centred care, and staff training. However, as this was a focussed inspection based on risk, we did not look in detail at these areas of care, therefore the rating remained the same.

#### Why we inspected

This was a planned inspection based on the previous rating.

We undertook this focused inspection to check the provider had followed their action plan and to confirm they now met legal requirements. This report covers our findings in relation to the key questions of safe and well-led. There will be no overall rating given for the service as this was not a comprehensive inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for H & H Healthcare Limited on our website at www.cqc.org.uk

#### 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 well-led?	Good •
<b>Is the service well-led?</b> The service was well-led.	Good •



# H&HHealthcare 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.

#### Inspection team

This inspection was completed by one inspector and one assistant inspector. One Expert by Experience telephoned people who received care from the service and relatives to obtain feedback about their 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

H & H Healthcare Limited is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was announced. We gave the service 48 hours' notice of the inspection because we needed to be sure the provider would be available to assist. Inspection activity started on 9 February 2021 and ended on 23 February 2021.

#### Before the inspection

We reviewed information we held about the service. This included details about incidents the provider must notify us about, such as allegations of abuse, and accident and incidents. 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 judgement in this report. We received feedback from two healthcare professionals. We used all of this information to plan our

#### inspection.

#### During the inspection

We spoke with six people who used the service and eight relatives to gain their views about the service. We also spoke with nine staff which included care workers, care co-ordinators and the registered manager. We received feedback from a further three staff and three healthcare professionals.

We reviewed a range of records. This included five people's care plans and risk assessments. We looked at documentation relating to medicines for four people. We looked at three staff files and checked recruitment. We also looked at records relating to the management of the service such as audits and a variety of policies and procedures developed and implemented by the provider.

#### After the inspection

We received feedback from a further two healthcare professionals.

## Is the service safe?

## Our findings

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

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Using medicines safely

At our last inspection, risks to people had not always been properly assessed. Medicines were not always managed safely. Improvements had been made at this inspection.

• Detailed risk assessments had now been completed for each person which considered personal care and the environment in which care was to be provided. A healthcare professional told us, "Always appear to have a good understanding of the current situation with the individuals who they support, and are very quick in identifying any changes and raising their concerns to the multidisciplinary team in a timely manner to prevent deterioration and manage risk."

• Records gave staff guidance on how to reduce risks and were up to date.

- The service had contingency plans in place to ensure people's care would continue in the event of an emergency.
- People's Medicines Administration Records (MARs) contained all of the required information and were fully completed.
- Guidance was in place for medicines prescribed on a 'when required' (PRN) basis. This included detail about how the medicine should be given and what quantity to give if the dose prescribed was variable, for example one or two tablets.
- Staff were trained to support people to take their medicines safely and staff competency was assessed.
- Regular medicines audits were carried out to ensure people received their medicines safely.

#### Staffing and recruitment

At our last inspection, the provider didn't have robust recruitment practices in place. Improvements had been made at this inspection.

• Staff recruitment practices were safe. Checks such as employment history, references, and a disclosure and barring (police) check, had been carried out before staff were employed. This helped to ensure they were suitable to work with people.

• Staffing arrangements had been planned and organised in a way that met people's needs and kept them safe. There were enough staff available to support people in their own homes.

• People told us staff were usually on time, stayed the full time and contacted them if they were running late. One relative commented, "They always stay their full time. They go above and beyond in what they do". Staff told us they usually had enough time at visits and between visits. The registered manager had introduced an electronic call system to monitor call times and the duration of visits.

• Most people told us they had good continuity of regular care staff. People said, "I get on well with them all", "Really cheerful staff, makes you feel so much better" and "They do change staff, but they are all

brilliant".

• People felt staff were trained and experienced to meet their needs. Comments included, "They are very careful when helping me and they are well trained" and "They look after mom very well. She is kept very safe and we are very happy". However, one person and one relative told us some staff were not meeting their needs as well as others. We raised this with the registered manager who assured us they would follow this up.

Preventing and controlling infection

• People and their relatives confirmed staff followed good infection control practice in their homes. They said they felt safe and staff wore Personal Protective Equipment (PPE) appropriately. One relative commented, "They wear a mask, gloves and apron. We feel very safe."

Staff had completed infection control training and additional training specifically relating to COVID-19.
Some staff were unsure of the order they should put on and take off PPE. During the inspection, the provider sent further information out to staff, so they understood their responsibilities in relation to this.
Infection control practice was observed to ensure staff were following guidance.

Systems and processes to safeguard people from the risk of abuse

• People and their relatives told us they always felt safe and comfortable when staff were with them in their home.

• Staff had completed safeguarding adults training. They knew how to protect people and report concerns about people's safety.

• Staff told us they felt confident the provider would respond and take appropriate action if they raised any concerns. The provider worked with the local authority safeguarding team to ensure people remained safe.

Learning lessons when things go wrong

• Where an incident had occurred, the provider had asked staff to attend additional training to minimise the risk of it happening again.

## 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 the previous inspection this key question was rated as Inadequate. At this inspection this key question has now improved to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Improvements had been made to care planning, risk assessments, medicines management, staff recruitment and governance.

The registered manager assured us improvements had been made in relation to the other breaches of regulations we found at the previous inspection. This related to the assessment of people's mental capacity, the delivery of person-centred care, and staff training. We will look at these areas at our next inspection.

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

• Since the last inspection there had been a restructure of the leadership of the service, including the appointment of two care co-ordinators and two care planners. Three senior care workers were assigned a geographical area each. Staff knew their responsibilities and there were clear lines of accountability. This had led to the development of new processes to monitor the service, drive improvement and provide oversight.

• Quality assurance systems were in place to assess, monitor and improve the quality and safety of the service. This included checks and observations to assess staff competency and audits. An electronic system had been introduced to monitor people's visits and ensure people and staff were safe.

•The management team were committed to improving care where possible. Following the previous inspection, they had worked hard to make the required improvements and had plans to further develop the service.

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

People told us the service was well managed and there was good communication. Comments included, "I feel the company is well managed, very happy", "The service does everything well, I wouldn't want to change anything" and "(registered manager's name) is absolutely fabulous and the office is very supportive."
People told us they would feel able to raise any concerns. Where concerns had been raised, most people told us these had been resolved quickly. A relative raised some concerns with us, during our inspection. We discussed these with the registered manager who assured us they would take action to resolve the issues.
The registered manager told us they had an amazing team. They told us they wanted staff to feel valued through supporting them and recognising their contribution. They had introduced an 'Employee of the Month' scheme and gave staff bonuses and small gifts. Staff told us they felt supported in their work.
Comments included, "I speak to them all in the office. I can speak to (registered manager's name) anytime.

They have supported me very well", "(registered manager's name) is absolutely amazing, on a couple of occasions when I had personal problems, I have emailed, and she has been on the phone within two minutes" and "It's brilliant. (registered manager's name) – she is very understanding. She is the best employer I have ever had."

• Staff enjoyed their work and were passionate about achieving good outcomes for people. Comments included, "I love my clients. I see all the same ones, and this is what I love about the company. Yes, I have enough time and I love it and asking them how they are and sometimes I will take their dogs out, it's about going above and beyond and just I love my job" and "It's brilliant. We are more of a family than we are a company. For instance, we had a gentleman pass away late last year. He had no family and when he was at the end of his life, we all rallied round and ensured there was always someone with him even between shifts and we all attended his funeral. It was really important to all of us."

• A healthcare professional told us, "Communication is good, and I have found this has improved over the last 12 months. We find the office staff are approachable." Another healthcare professional told us how the service had been really motivated to work with one person compassionately, promoting their independence and improving their quality of life.

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 provider was aware of their responsibilities to provide CQC with important information and had done so in a timely way.
- The provider understood the need to be open and honest with people and relatives.

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

• People and their relatives were asked to share their views about the service through regular home visits, telephone discussions and questionnaires. The latest feedback showed people were satisfied with the care delivered and how the service was managed.

• Staff told us they felt able to contribute their thoughts and experiences on the service. Staff spoke positively about communication within the service. They told us they were provided with information they required. One staff member told us "Things have definitely improved in the last 18 months."

Working in partnership with others

• The service worked in partnership with key organisations including the local authority and other health and social care professionals to provide joined up care.

• A healthcare professional told us, "I have had the opportunity to work closely with H&H Healthcare on a couple of recent complex cases and I have found them to be very adaptive and responsive to the individual needs of people they work with."