

Gentle Hands Home Care Limited

Gentle Hands Home Care

Inspection report

Kable House
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Gentle Hands is a domiciliary care provider providing personal care to 36 people at the time of the inspection. It provides personal care to people living in their own homes, so they can live as independently as possible.

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

People received care from a consistent team of staff who had been provided with comprehensive training. Personal preferences were observed, and these were detailed in the person-centred plans. Risk assessments had been completed and any known risks were mitigated. Staff understood the importance of reporting any concerns and these were investigated.

Staff were recruited safely and there were enough staff to support the needs of people using the service. During COVID-19 the provider had taken appropriate steps to improve infection control measures. People were encouraged to share their views through telephone reviews and annual surveys. A range of audits and systems were used to ensure that the quality of the service was maintained and there was an opportunity to drive improvement.

Rating at last inspection

The last rating for this service was Requires Improvement (published 02/10/2019).

Why we inspected

This was a planned focused inspection on the key areas Safe and Wellbeing. This was based on the previous rating of Requires Improvement. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Gentle Hands 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 re-inspection 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 ●

The service was well-led.

Details are in our well-Led findings below.

Gentle Hands Home Care

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Notice of inspection

This inspection was announced. We gave the service four days' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection. We were mindful of the impact and added pressures of COVID-19 pandemic on the service. This meant we took account of the exceptional circumstances and requirements arising as part of the COVID-19 pandemic.

Inspection activity started on 21 May to 24 May 2021. We visited the office location on 1 June 2021.

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. A variety of records relating to the management of the service, including policies and procedures were reviewed.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service

and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with 10 people or their relatives about their experience of using the service.

We spoke with the registered manager, deputy and eight members of the care staff team.

We reviewed a range of records. This included parts of four people's care records and several medication records. We looked at staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including training data and quality assurance records were considered in making our judgements.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two professionals who regularly visit the service.

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.

At our last inspection the provider had failed to robustly ensure recruitment checks had been completed prior to employment. This was a breach of regulation 19 (Fit and proper person employed) 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 regulation 19.

Staffing and recruitment

- There were enough staff to support the needs of the people currently using the services.
- The provider had a continued programme of recruitment with an incentive scheme to promote recommendations. One staff member said, "There are enough hours and staff and if you want more you can have extra, but there is no pressure to pick extra hours up."
- People we spoke with all reflected on having a consistent team of staff which reassured them in the care they received. One person told us, "Care staff are all very good, all different characters. They always call if going to be late."
- All new and existing staff received training to support their role.
- The provider had a process for ensuring that staff were recruited safely. Records showed that pre-employment checks were undertaken prior to staff commencing employment. Staff had Disclosure and Barring Service (DBS) checks in place. The DBS is a national agency that keeps records of criminal convictions

Systems and processes to safeguard people from the risk of abuse

- Staff understood the importance of safeguarding people and protecting them from harm. All the staff we spoke with had received training in safeguarding and knew how to raise any concerns. One staff member said, "We are supported to report any concerns and I know they would be acted upon."
- The registered manager had worked with the local authority when safeguards had been raised. We saw how after an incident any learning outcomes were shared with staff and people using the service.

Assessing risk, safety monitoring and management

- Risks to people's health and safety had been assessed and any areas mitigated.
- The risk assessments covered the care the person received along with the environment. These reflected any possible risks and solutions. For example, in one person's home, there was a risk at night due to poor lighting. The provider mitigated the risk by engaging with family to additional lighting. Other areas included contacting the fire service to fit smoke detectors.

- Staff were aware of the signs to look for to protect people from sore skin. Several people we spoke with complimented the staff on their caring approach in this area. One person told us, "Any sores the staff report it straight away and apply cream. They really do keep an eye on my skin."
- All care plans included the risk assessments and all the care which the person required. These care plans were person centred and had been completed in conjunction with the people using the service.

Using medicines safely; Learning lessons when things go wrong

- People received their medicine as prescribed.
- When people required support with their medicines an assessment had been completed and guidance provided to staff.
- Staff had received training in medicines and regular competency checks to ensure continued understanding of the required checks.
- When errors had occurred with medicines these were investigated, and any lessons learnt shared with staff. For example, one staff member had identified an error from the pharmacy, this was reported, and the medicine amended. This provided further learning and assurances of the checks being completed.

Preventing and controlling infection

- The provider had taken an active role in promoting infection prevention control during the COVID-19. Staff had received specific training and additional personal protective equipment was provided.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.

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 last inspection this key question was rated as Requires Improvement. 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.

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

- People we spoke with reflected on the positive approach the provider took during COVID-19. One person told us, "I was so grateful to still have the service during COVID-19. The staff always wear correct PPE, and I have felt safe." Another said, "They were my lifeline, through COVID-19 I was delighted to know they would still be coming."
- The provider ensured staff's safety by providing a work telephone system. Staff felt protected by this system, which logs all the calls and can track where staff should be. One staff member said, "It provides you with the lone working protection as some roads are bad or you may get held up at a call and they can check you are okay."

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 understood the duty of candour and was open and honest with us about the improvements they had made since the last inspection.
- The registered manager was aware of the responsibility of reporting significant events to us and other outside agencies.

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

- The provider used a range of methods to maintain the quality of the service and to drive improvements.
- We saw audits which reviewed the training needs of staff and ongoing competency assessments. These were up to date and staff we spoke with reflected on the detailed training they received which was planned into their working week when required.
- The provider used a system which logged all the calls. This provided them with the data in respect of planned calls being completed on time and when calls were late to review the reasons. This enabled the provider to regulate the service people received.
- Audits were completed to ensure that care plans were person centred and medication administration records (MAR) were completed correctly.
- The provider was in the process of reviewing the MAR sheets, so that they would be typed in the office. This would reduce the pressure on staff to complete within the home and provide a clearer record for staff to follow.

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

- People were contacted on a six-monthly basis to review their care and ensure they are happy with the service being provided. One person told us, "Staff are friendly, they have looked after me a long time so know me well. I can tell them any problems and talk to them."
- Before the pandemic the provider sent out an annual questionnaire, however this year was delayed. They have taken the opportunity to review the questions being asked to refocus to obtain a clearer picture of the service and people's preferences.
- Staff felt they were able to ask for support and received it to support their job role and wellbeing. One staff member said, "It's a good company, the managers door is always open. Any issues they always listen whether personal or work."
- Staff felt they have enough time to support people's needs. One staff told us, "You are given time to do the call and if your running late or you have to stay the office work it out and send another person to the other calls so people are not left waiting."

Working in partnership with others

- The provider worked with a range of professionals to ensure people received the required care. For example, when people required equipment to support them to move guidance from occupational therapist was used to ensure the person was moved safely and in line with best practice.
- Social care professionals we spoke with told us, "When completing reviews with Gentle hands they have been responsive and provided information requests in a timely manner." They also added, "People using the service have reported no concerns and they receive a good standard of person-centred care with positive outcomes."