

Helpful Home Care Limited

Helpful Home Care LTD

Inspection report

Suite 9, 25 New Street

Oadby Leicester LE2 5EB

Tel: 01164422181

Website: www.helpfulhomecare.co.uk

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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

About the service

Helpful Home Care LTD is a domiciliary agency that provides care and support to people living in their own accommodation. 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 nutrition. Where they do we also consider any wider social care provided. At the time of this inspection the service was supporting 19 people with personal care.

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

The service was small and personalised. The registered manager knew all the people using the service and their relatives and was in regular contact with them, to ensure they were satisfied with the care and support provided. People told us the service achieved excellent outcomes for them. The staff were happy working at the service and the registered manager was supportive of them.

People were safe using the service as the staff were competent and well-trained. Staff knew what to do to keep people safe and reduce risk to them. They assisted people with their medicines to ensure they had them safely and on time. They understood infection control and used aprons and gloves when assisting people.

Managers met and assessed people before they used the service to ensure their needs could be met. Staff ensured people had access to healthcare services and were trained in medical emergencies and first aid. They supported some people to eat and drink. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The staff were kind, caring and compassionate. People had regular care workers who they got to know well. Staff communicated well with people's families and representatives and let them know how people were getting on and if there were any concerns about them. Staff respected people's privacy and dignity and were respectful and polite.

People's calls were on time and care workers ensured people's needs were met in the way they wanted. The multilingual staff team catered for people from different cultural backgrounds and understood how best to communicate with them. Information was available to people in accessible formats, for example large print.

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 inspection of this service was carried out on 19 October 2016 and the rating was Good.

Why we inspected

This was a planned inspection based on the previous rating.

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 effective?	Good •
The service was effective	
Details are in our Effective findings below.	
Is the service caring?	Good •
The service was caring	
Details are in our Caring findings below.	
Is the service responsive?	Good •
The service was responsive	
Details are in our Responsive findings below.	
Is the service well-led?	Good •
The service was well-led	
Details are in our Well-Led findings below.	



Helpful Home Care LTD

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

This 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 house and flats.

Notice of inspection

We gave the service short 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 14 June 2019, when we visited the office location, and ended on 19 June 2019.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service and two relatives about their experience of the care provided. We spoke with the registered manager, quality assurance manager, and three care workers.

We reviewed a range of records. This included three people's care and medicines records, and records relating to staffing, management and other aspects of 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 Good. At this inspection this key question has remained the same.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe using the service. A person said, "I feel safe with the staff. They are capable people who know what they're doing." A relative told us, "The staff are very careful and diligent."
- Managers and staff understood their safeguarding responsibilities. Care workers were trained in safeguarding and said if they had a concern about a person's well-being they would report it to management."

Assessing risk, safety monitoring and management

- Risks associated with people's care, support and environment were assessed and risk assessments and care plans put in place.
- Care workers knew where people were at risk and what to do to minimise this, for example supporting people to walk, shower, and eat safely.
- Managers regularly reviewed people's risk assessments to check they were up to date and reflected people's current needs.

Staffing and recruitment

- The service employed enough staff to meet people's needs. A person said, "There are enough carers and they are very pleasant and ideal for what they do."
- Having regular staff made people feel safe. A person told us, "I get a rota every week, so I know who's coming."
- The provider had safe recruitment procedures in place to help ensure the staff employed were of good character and suitable to work with people who use care services.

Using medicines safely

- Care workers assisted some people with their medicines to ensure they had them safely and on time. A care worker told us, "I prompt [person] with their medicines. I put them in a little cup and make sure [person] takes them."
- Care workers kept records to show when people had taken their medicines. The records we looked at were clear, up to date, and audited regularly by managers.

Preventing and controlling infection

• Staff were trained in infection control. Managers ensured personal protective equipment, such as

disposable aprons and gloves, were available for care workers to use in people's homes.

• People said care workers left their homes in good order. A person said, "The staff are very tidy and don't leave a mess."

Learning lessons when things go wrong

- Lesson were learned, and improvements made when things went wrong. The registered manager said, "We always do our best, but if something does go wrong we make sure we learn from it."
- Following a missed medicines dose, managers introduced a new recording chart where care workers could record they had seen a person take their medicines. This helped to make medicines prompting safer.



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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

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

- Managers assessed people prior to them using the service to ensure staff could meet their needs. The registered manager said, "We usually have a couple of meetings with people and relatives to explain what we do and reassure them that the care we provide is safe."
- Assessments considered people's background, culture and life history. The form needed updating to ensure it covered the protected characteristics of the Equality Act. The registered manager did this straight after our inspection.

Staff support: induction, training, skills and experience

- People said they were satisfied with the care workers' skills and knowledge. A person said, "The staff are very well-trained and new recruits aren't thrown in at the deep end, they shadow the experienced staff and work with them until they know what they're doing." Another person told us, "The staff are very good and very well trained."
- The service's training programme ensured all staff could meet people's needs effectively. If staff needed specialised training this was provided. For example, some care workers were trained in catheter care and peg feeding so they could support particular people using the service.
- Care workers made many positive comments about the training. A care worker said, "We have a lot of training and they keep updating us, so we can provide really good care."

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

- Care workers assisted some people with meal preparation, eating and drinking. A person told us, "The carers get me my breakfast and a nice cup of tea every morning."
- People had their nutritional needs assessed when they began using the service. If people had any allergies or restrictions on their diet this was recorded. If there were any concerns about a person's nutrition staff consulted with them and, where appropriate, their family, and referred them to a dietician and/or speech and language therapist.
- Staff were trained in food hygiene and knew how to prepare and serve food safely and effectively.

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

• Staff were knowledgeable about people's healthcare needs and knew when to invoked medical professionals. A care worker told us, "If we were concerned about a person's health we would talk to them

and their family about it and get the GP out."

- Records showed staff supported people to access a wide range of healthcare professionals including GPs, district nurses, dieticians, and physiotherapists.
- Staff were trained in medical emergencies and first aid. A care worker said, "We know what to do if there's an accident. If we go to someone's house and they have fallen, we call an ambulance if it's not safe for them to get up on their own."

Adapting service, design, decoration to meet people's needs:

• Managers assessed the safety of people's homes and supported them to acquire the aids and adaptations they needed to support their independence and meet their needs.

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 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 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.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

- Staff understood the importance of supporting people to make choices, and people were always asked for their consent before care was provided.
- Staff were trained in the Mental Capacity Act and understood their responsibilities to support people in a way that was legal and non-restrictive.



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 inspection this key question was rated as Good. At this inspection this key question has remained the same.

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 made many positive comments about how caring the staff were. A person said, "The carers are more like part of the family to me." Another person told us, "I consider the staff to be friends. They came to my birthday party."
- People had regular care workers and met them before their care commenced. A relative said, "We know them all by name." A care worker said, "We're not sent in cold, we get introduced to the clients first. I have a bond with the people I support. They trust me and see me every day."
- Care workers knew what to do if a person was distressed or unhappy. A care worker said, "Sometimes [person] gets a bit down so we encourage them and remind them of the progress they've made. This cheers them up."

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

- People and family members, when appropriate, were involved in developing and reviewing care plans. A person told us, "Once a quarter a manager comes to check I'm happy with my care and ask me if I have any problems or concerns but I never do."
- A relative said, "If the carers have any concerns about [family member] they always contact me." Staff used mobile phone applications to keep in contact with some family members and share information with them.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity. A person said, "The staff are always respectful and polite." Care workers told us they maintained people's privacy and dignity, for example, by closing doors and curtains when they were providing personal care.
- Staff kept people's documentation secure in their office and only care plans and risk assessment were kept in people's homes to reduce the risk of a breach of confidentiality.



Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

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

- People received their care flexibly and on time. A person said, "The carers are very punctual. If they were ever going to be late, which is rare, they would let you know." Another person said, They meet my needs. They are flexible in everything they do for me. If they haven't got time they make time."
- People's care plans were personalised and set out how people wanted their needs met. Some people had made progress and increased their independence while using the service. For example, one person was now more mobile through doing exercises with the staff supporting them.
- The service catered for people from a range of different cultural backgrounds some of whom did not have English as a first language. The staff team were multilingual and able to meet people's language needs.
- Care plans were reviewed and updated regularly, and the registered manager ensured care workers were aware of any changes. A care worker told us, "When I got back from holiday last year [registered manager] had a meeting with me so I knew everything that happened while I was away."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

• The service provided information for people in accessible formats including large print and sound recordings. Staff were trained to work with people with visual impairment and other sensory disabilities and understood their communication needs.

Improving care quality in response to complaints or concerns

- People said they would speak with the registered manager if they had any concerns about the service. The service's complaints procedure was in the service user's guide.
- The registered manager responded positively if a complaint was made. She met with the complainant, listened to them, and acted to resolve their concerns as necessary.

End of life care and support

- If people needed end of life care managers and staff worked closely with healthcare professionals to ensure people were comfortable and pain-free.
- Staff were trained in end of life care and knew how to provide compassionate and responsive care and

registered manager spoke at a person's funeral at the family's request as they were considered part of the family.
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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 Good. At this inspection this key question has remained the same.

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 told us the service achieved excellent outcomes. A person said, "They [the staff] have exceeded my expectations in every way. I would say they are all outstanding." A relative told us, "I got my life back with this agency. The staff are marvellous, and I can trust them to look after my [family member]."
- The service was small, bespoke and personalised. The registered manager knew all the people using the service and their relatives and was in regular contact with them, ensuring they were satisfied with the care and support provided. A relative said, "[Registered manager] is very caring, she cares for clients and their families and goes the extra mile for everyone."
- Care workers praised the service and recommended it. A care worker told us, "There is a great atmosphere at work. All the staff are understanding and helpful to the clients and each other." Another care worker said, "It's a good agency because it's small and the teamwork is there. I love this company and I hope to work for it for the next 30 years."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Staff understood their roles and responsibilities and who to go to if they had any concerns about people's well-being. Managers were always available if staff needed to contact them for support and advice. A care worker said, "We get fantastic support from the managers. You can ring them any time, there's always someone on call in the day and night and they always pick up the phone."
- The registered manager understood regulatory requirements and completed statutory notifications and the provider information return (PIR). The information given in the PIR reflected what we found on the inspection.

Engaging and involving people using the service, the public and staff

- People and relatives commented on the service via regular postal surveys. The last of these, completed in March 2019, had nine responses. Results showed a high level of satisfaction with all aspects of the care and support provided.
- Care workers shared their views at meetings, supervisions and appraisals. A care worker said, "We are a team and we all want the best for our clients. If we've got any ideas on how to improve things [registered manager] wants to hear them."

Continuous learning and improving care

- The registered manager used the service's quality assurance systems to monitor the service. Records showed audits were comprehensive and if any improvements were needed they were carried out.
- There was a culture of learning at the service. Managers and care workers were committed to continual learning through training, teamwork, and sharing good practice.

Working in partnership with others

- The registered manager and care staff worked in partnership with health and social care professionals to ensure people's needs were met and they had the community services they were entitled to.
- Where necessary, staff liaised with other agencies to ensure people received 'joined-up' care. For example, they worked with staff at a local day centre to promote the well-being of a person using the service.