

Midshires Care Limited

# Helping Hands Camberley

## Inspection report

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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

Helping Hands Camberley provides personal care to people in their own homes. 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. The service was providing support to 12 people with personal care needs at the time of our inspection.

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

Risks to people's safety and well-being were assessed and monitored. Where risks were identified due to health issues, staff received specific training to support people safely. Robust medicines procedures were in place and records showed people received their medicines in line with their prescriptions. Staff were aware of their responsibilities in keeping people safe and how to report any concerns. People told us they were supported by regular staff who arrived on time and stayed for the planned duration of the visit.

The provider had responded to the COVID-19 pandemic promptly, implemented policies in line with guidance and ensured all staff had access to PPE. People, relatives and staff told us they felt listened to and there was a positive culture within the service. The registered manager had implemented systems to monitor the quality of the service people received and regularly sought feedback. Staff told us they felt valued in their roles and were able to contact the office should they need support.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection (and update)

The last rating for this service was Requires Improvement (published 20 April 2020) and there were two breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

We carried out an announced comprehensive inspection of this service on 17 February 2020. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements in relation to people's safe care and treatment and good governance. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion 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 Helping Hands Camberley on our website at [www.cqc.org.uk](http://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.

# Helping Hands Camberley

## 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### 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.

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

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.

#### What we did before the inspection

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 visited the office location on 15 April 2021. We reviewed a range of records which included risk assessments and care records for four people, three staff files in relation to recruitment, accident and incident records, contingency plans and monitoring records.

#### 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 three people who receive care and support from Helping Hands Camberley about their experience, three relatives and three staff members.

# 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 ensure risks to people's safety were assessed and monitored and that safe medicines practices were followed. 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 regulation 12.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People and their relatives told us staff supported them safely and understood their needs. One relative told us, "They (care staff) make sure he sits on the stairlift and uses his frame. There have been no falls recently."
- Risks to people's health and well-being were assessed and monitored. Risk assessments were completed in areas including mobility, skin integrity, personal care and security. Information and training were provided to staff where risks associated with specific health care needs were identified.
- Staff were aware of how to report an accident and incident and these were regularly reviewed. The online reporting system meant staff were able to record any concerns immediately. All accident and incident forms were reviewed by the management team to ensure the relevant action was taken.
- An on-call service was available to support staff should accidents or incidents occur out of office hours. The service was provided by senior staff within the branch who knew both people and care staff well. Additional support to monitor the rota and calls was provided by central office staff.

Using medicines safely

- Staff told us they had received medication training and their competency was regularly checked. One staff member told us, "I have had training to be able to administer medicines and regularly get checked to make sure my knowledge is still up to date, and I am doing so safely."
- Information regarding the support people needed with their medication was clear, up to date and accessible to staff. Since our last inspection the provider had introduced electronic record keeping for all care and medicines records.
- Medicines administration records (MAR) were fully completed and contained all information required. Staff were alerted if they had not confirmed all required medicines had been administered before they left the person's home. An alert was also forwarded to the office immediately if any errors in the system were noted to ensure this could be actioned promptly.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with the staff supporting them. One person told us, "I do feel safe, I've had no

problems and I wouldn't let anyone in the house that I didn't know." One relative said, "She usually has the same carer so it gives her a sense of security."

- Staff had received training in safeguarding. They were able to describe the different types of abuse, signs to look for which may indicate concerns, and reporting procedures. One staff member told us, "I would absolutely report anything I felt was not right and I would follow up to make sure action had been taken."
- The provider had a safeguarding policy in place. This ensured systems were in place to monitor all concerns and incidents to determine if they should be reported to the local authority safeguarding team. External audits also reviewed safeguarding systems.

#### Staffing and recruitment

- People and their relatives told us their care was normally provided by a regular team of staff. One person told us, "They try to give me the same girls, I have several regulars." One relative told us, "They try and keep to a few as far as possible. If it changes, they let me know. I get a rota every Friday for the following week."
- Staff arrived for visits at the allocated time and stayed for the correct duration of the call. An electronic rostering system enabled office staff to monitor people's calls were being provided in line with their contracted hours.
- Staff were recruited safely. The required pre-employment checks were completed to help ensure staff employed were suitable. These included conducting a face to face interview, completing a Disclosure and Barring Service (DBS) check and obtaining references.

#### Preventing and controlling infection

- People told us staff wore personal protective equipment (PPE) to minimise the risk of the spread of infection. One person told us, "They wear everything (PPE) and gloves all the time. They change their gloves for each procedure."
- Up to date guidance had been provided to staff on how to keep people and themselves safe during the COVID-19 pandemic. All staff had completed training on how to use and dispose of PPE safely. One staff member told us, "They keep us updated with all the news and changes of information. They make sure we feel happy to support people and they talk to us about our vulnerabilities or concerns. We've always had plenty of PPE."
- Regular COVID-19 testing was completed by staff and a results log maintained. All staff had been supported to access the vaccination programme.



# 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 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.

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 the provider had failed to ensure effective quality assurance processes were in place. This was a breach of regulation 17 (Good governance) 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 17.

- Additional audits had been implemented to monitor the safety and quality of the service people received. Following a full audit of the service an action plan had been implemented and closely monitored to ensure all actions were completed in a timely manner.
- A robust approach to quality monitoring had been maintained. Audits were completed regularly to check areas including care records, medicines management, staff recruitment, risk management and health and safety.
- Improvements had been made to the quality and accessibility of care records. The provider had invested in an electronic record keeping system which meant any changes in people's care needs could be accessed immediately by staff. Visit records, accidents and incidents and MAR charts were also completed on the system. This real time monitoring meant the registered manager and office staff could respond to any concerns promptly.
- Spot checks were completed regularly to monitor the quality of care provided by staff. Checks looked at areas including timekeeping, monitoring PPE use, moving and handling support and communications.

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

- People and their relatives told us there was a positive culture within the staff team. One person told us, "(Staff) give me all the help I need. If I request something, they always try and meet my needs. There is nothing I can think of to improve on." One relative said, "They are very friendly, always ask how you are. Very pleasant and caring."
- The provider promoted an open and inclusive service where people were at the centre of their care. The registered manager told us, "The foundation of the company is kindness and that comes through in the

feedback we receive from clients."

- People's care was regularly reviewed, and any changes or improvements acted upon in a timely manner. Care plans were written in a person-centred way with detailed information about each person's life history, preferences and dislikes recorded.
- The provider had a policy in place regarding duty of candour which demonstrated the need to act in an open and transparent manner with people and their relatives when things went wrong. The registered manager was aware of their responsibilities in this area although no incidents had occurred which met the criteria for implementing the policy.

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

- People were regularly asked for their feedback on the quality of service they received. Comments shared reflected people were happy with their care. One person had said, 'I'm extremely happy with the care. All carers are very helpful and nothing is too much trouble for them.'
- Staff told us they felt valued in their roles. One staff member told us, "I do feel valued. They are always responsive if I need anything. They do call and check I am ok. If I have ever needed anything then there is always someone I can speak to."
- Newsletters and information were shared with both people and staff. This provided valuable information regarding resources available and any updates within the service. The registered manager told us they had recognised the impact of the pandemic on people's mental health. They had therefore ensured a recent newsletter included a list of local resources providing mental health support.
- Staff were recognised when they went above and beyond in supporting people. 'Moments of Kindness' awards were shared with staff each month. These included staff taking additional time to support people living with dementia throughout the pandemic and supporting someone to defrost their freezer to enable them to be more independent with preparing their meals.
- The service worked with a range of health care professionals to support people with their care. These included the community nursing team, local pharmacies and dieticians. In addition, staff had supported a number of campaigns including a blanket and toy appeal for local charities.