

Mrs O's Caring Hands Homecare Limited

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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

Mrs O's Caring Hands Ltd - Northumberland Office is a domiciliary care service providing personal care to adults. 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. At the time of our inspection there were 65 people receiving support.

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

People and relatives spoke positively about the caring nature of staff. Comments from relatives included, "When they come into my home they come in as new friends" and "They are so patient, they don't rush her or try and tell her what to do. One lady [staff] came in with treats for my dog."

People were safeguarded against the risk of abuse. People told us they felt safe with the staff who supported them.

Recruitment had been affected by COVID-19 and the current cost of living crisis. The provider had reduced the areas they covered to ensure they had enough staff to cover people's needs. People and relatives told us that they usually saw the same team of staff who knew their needs.

People and relatives told us that staff wore PPE to help reduce the risk of infection.

There was a system in place to manage medicines. We identified several issues relating to the recording of medicines which the registered manager told us would be addressed. We have made a recommendation that the provider reviews best practice in relation to medicines management and reiterates this to staff to ensure this is followed.

The provider used an electronic rostering and monitoring system. There had been a cyber-attack in August which was not due to any fault of the provider; however, this had caused several missed calls. The provider had introduced temporary new management and recording systems until the IT system was fixed.

Audits were carried out to monitor the quality and safety of the service. The provider was strengthening their assessment and monitoring of medicines management. Whilst we understood the impact which the cyber-attack had upon the service; we did identify several shortfalls in relation to the maintenance of records relating to people who required specialist feeding techniques and the use of certain medical equipment. The registered manager told us this would be addressed immediately.

Most people and relatives thought the service was well managed. Comments from relatives included, "It is very well managed and well organised. They have been round to introduce themselves" and "They have done everything they need to do, when they need to do it. I would definitely recommend them." Some

people told us they felt that communication could be improved since they did not always know who was coming to support them. We passed this information to the registered manager who explained that the recent cyber-attack had impacted upon their recent communication and rostering abilities; however this had been addressed.

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 9 December 2020).

Why we inspected

We carried out a focused inspection of this service in November 2020. A breach of legal requirements was found in relation to medicines management. The provider completed an action plan after the last inspection to show what they would do and by when to improve in this area.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions safe and well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last comprehensive inspection to calculate the overall rating. 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 Mrs O's Caring Hands Homecare Limited on our website at www.cqc.org.uk.

Recommendations

We have made a recommendation in the safe key question in relation to medicines management. Please see this section for further details.

Follow up

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?

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.

Mrs O's Caring Hands Homecare 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 carried out by one inspector and Expert by 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

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

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was announced. We announced the inspection to make sure the provider or registered manager would be in the office to support the inspection. We also asked the registered manager to seek consent from people, relatives and staff so that we could contact them for feedback about the service. Inspection activity started on 19 August and ended on 1 September 2022. We visited the location's office on

1 September 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 and professionals who work with the service. 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 four people, three relatives, nominated individual, registered manager, finance/HR director, compliance officer, supervisor and three support workers. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included records relating to people, staff and the management 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 our previous inspection we rated this key question as requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our previous inspection, we identified that medicines were not managed safely. This was a breach of regulation 12(1) 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, however further improvements were required around the recording of medicines.

- There was a system in place to manage medicines safely. We identified several issues around the recording of medicines. The registered manager told us this would be addressed.

We recommend the provider reviews best practice in relation to medicines management and reiterates this to staff to ensure this is followed.

- Staff medicines competency checks had not been completed as regularly as planned. The registered manager was reviewing the medicines competency assessment process.

Systems and processes to safeguard people from the risk of abuse

- There was a safeguarding system in place.
- People told us they felt safe with the staff who supported them. One person told us, "There's never been a dodgy carer." Staff had undertaken safeguarding training and raised no concerns about practices at the service.

Assessing risk, safety monitoring and management

- There was a system in place to assess, monitor and manage risk.
- Risks were assessed and monitored so action could be taken if any issues were identified.

Staffing and recruitment

At our previous inspection we made a recommendation that the provider reviewed recruitment procedures in line with best practice guidance. The provider had made improvements; although we signposted the provider to additional best practice guidance around recruitment.

- Recruitment checks were carried out before prospective staff started at the service to help ensure they were suitable to work with vulnerable people.

- There were sufficient staff deployed to meet people's current needs.
- Recruitment had been affected by COVID-19 and the current cost of living crisis. The provider had reduced the areas they covered to ensure they had enough staff to cover people's needs.

Preventing and controlling infection

- An infection control system was in place.
- People and relatives told us that staff wore PPE to help reduce the risk of infection.

Learning lessons when things go wrong

- Lessons learned had been identified following the previous inspection and action had been taken to improve. Lessons learned had also been recognised following the recent cyber-attack. The provider had introduced new temporary management and recording systems until the IT system was fixed.

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 our previous inspection we rated this key question requires improvement. At this inspection the rating has changed 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

- The service is a family run company and part of the local community. Many of the staff lived in the same area as people and so they shared a common interest in amenities and events in the local community. One relative told us, "They are excellent, all of them, they are very caring and they are all pleasant. They are all local so I know most of them."
- Staff spoke positively about working at the service. One staff member told us, "I love my job every day is different."

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

At our previous inspection we made a recommendation that the provider reviewed their quality assurance procedures and care records. The provider had taken action to strengthen their quality monitoring system and record keeping; however the cyber-attack had impacted the maintenance of electronic records.

- Management and staff were clear about their roles and responsibilities.
- A system was in place to manage the maintenance of records relating to people, staff and the management of the service.
- Whilst we understood the impact which the cyber-attack had upon the service; we did identify several shortfalls in relation to the maintenance of records relating to people who required specialist feeding techniques and the use of certain medical equipment. The registered manager told us this would be addressed immediately.
- Audits were carried out to monitor the quality and safety of the service. The provider was strengthening their assessment and monitoring of medicines management.

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

At our previous inspection, we recommended that the provider reviewed their customer survey procedures in line with best practice. The provider had made improvements.

- There were systems in place to involve people, relatives and staff in the running of the service.

- Surveys were carried out. Some people told us they felt that communication could be improved since they did not always know who was coming to support them. We passed this information to the registered manager who explained that the recent cyber-attack had impacted upon their recent communication and rostering abilities; however, this had been addressed.

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 their responsibilities in relation to the duty of candour. There had been no incidents at the service which required them to act upon this duty.

Working in partnership with others

- The nominated individual and registered manager liaised with other providers and the local authority. The registered manager provided training to staff from other providers. They also attended job fairs to promote ongoing recruitment.