

Homecare Haven Ltd

Homecare Haven Ltd

Inspection report

1 Belmont House
Deakins Business Park, Blackburn Road, Egerton
Bolton
BL7 9RP

Tel: 01204937137

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28 September 2023

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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

Homecare Haven Ltd is a domiciliary care service providing personal care to older people in their own houses and flats in the community. At the time of our inspection there were 20 people using the service. 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 inspection, the service was providing personal care to 15 people.

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

The provider managed medicines safely; however, some processes were not always robust in reducing people's risk. We made recommendations about the safe management of medicines.

People were kept safe from risk and harm. Staff had a good understanding of safeguarding processes. Risk assessments were robust and relevant. Staffing levels were safe and reviewed regularly by managers. Infection prevention and control (IPC) systems were in place to reduce people's risk of infection.

People's needs were assessed and reviewed regularly. People's health and nutrition needs were supported, and staff were aware of their responsibility to promote people's rights. People had access to healthcare professionals.

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.

People and family members knew how to make a complaint. They were confident their complaint would be listened to and acted upon quickly. Staff approaches promoted dignity & respect.

The provider was open and honest in its approach to supporting people. They were in regular contact with people receiving support to ensure they obtained feedback on the quality of support provided. Staff knew how to support people to ensure end of life needs were met. The registered manager ensured systems were in place to monitor the running of the service. Staff worked well in partnership with other agencies to deliver effective support.

The registered manager audited support records, including accidents and incidents to assure themselves of quality. Lessons were learned when concerns were raised and these outcomes were communicated to staff.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 18 October 2022 and this is the first inspection.

Why we inspected

This inspection was a planned inspection based on the date the service was registered.

Recommendations

We have made a recommendation about the management of medicines.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Homecare Haven 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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by an inspector and an 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

Homecare Haven Ltd is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

We gave the service 24 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. Inspection activity started on 19 September 2023 and ended on 28 September 2023. We visited the office on 19 September 2023.

What we did before the inspection

We sought feedback from the local authority and professionals who work with the service. We used this

information to plan our inspection.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with the registered manager and the human resource manager. We spoke to 3 support staff. We spoke with 2 people receiving support and 5 relatives. We reviewed 3 people's support records, including medicines administration.

We looked at staff files in relation to recruitment, and a variety of records relating to the management of the service, including policies and procedures. We asked the registered manager to send us documents before and after the on-site inspection. These were provided in a timely manner and this evidence was included as part of our inspection.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Instructions for medicines given when required 'PRN' were not always available and were not always person centred. After the inspection the service sent evidence this had been rectified.
- Topical medicines did not always have body maps in place to instruct staff where, or how, to apply creams so we could not be assured they were applied as prescribed.
- After the inspection the service sent evidence these issues had been rectified. We noted there was no impact of harm on people at the time of the inspection.

We recommended the provider consider current guidance on safe medicines management and administration and takes action to update their practice accordingly.

- The provider had processes in place to support people with prescribed medicines.
- The registered manager ensured staff received medicines training. Processes were in place to assess staff competency.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse. The provider had policies and procedures for safeguarding and whistleblowing to protect people from the risk of abuse.
- The registered manager modelled an open and transparent culture which encouraged people to raise any safeguarding concerns.
- Staff were aware of the different types of abuse and had been trained in their responsibilities for safeguarding adults. Staff knew what actions to take if they witnessed or suspected abuse.

Assessing risk, safety monitoring and management

- The registered manager assessed individual risk and implemented controls to mitigate these.
- Risks associated with the provision of peoples' support had been assessed. Risk assessments were detailed, and person centred.
- Staff had completed training which the provider had deemed as mandatory to keep people safe.

Staffing and recruitment

- The provider had effective recruitment processes including effective use of the Disclosure and Baring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The registered manager ensured there were enough staff, with the right training and skills, to meet

people's needs.

- The service had an electronic system to enable the registered manager to track late calls effectively and to make alternative arrangements through consultation with people where appropriate. Records showed no recent calls had been missed.

Preventing and controlling infection

- Staff followed effective infection prevention and control measures to help ensure people were safe and protected from the risk of infection.
- The registered manager had plans in place to alert other agencies to infection control concerns affecting people's health and wellbeing.
- The provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The provider had systems in place to support staff reporting and recording any accidents and incidents.
- Complaints, concerns, and incidents were recorded and followed up by the registered manager and staff.
- The registered manager ensured lessons were learned and practice changed if any trends were identified.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The provider worked closely with a range of professionals and partner agencies to ensure people received effective support.
- Support records showed the registered manager acted upon advice given by health professionals. However, delays in healthcare interventions were not always followed up in a timely manner. For example, delays in healthcare professionals assessing people's safe swallowing needs following referrals were not always safeguarded to ensure people received the correct consistency of food to ensure they were safe. The provider took action to rectify this as part of the inspection.
- Staff met oral health support needs, where this was identified as a need; this was recorded appropriately in support plans.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed by the provider before support commenced.
- The registered manager maintained an overview of people's changing needs to make sure assessments and support plans were up to date.
- Staff understood people's rights, relevant legislation, and best practice.

Staff support: induction, training, skills and experience

- The provider had systems in place to ensure staff received effective induction, training, and supervision, and were skilled and competent to carry out their roles.
- New staff were required to complete the Care Certificate training programme. The Care Certificate is an agreed set of standards defining the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards which should form part of a robust induction programme.
- The registered manager ensured ongoing training was completed by all staff as required. Staff were supported with job progression and professional development.
- Staff told us they felt confident in supporting people's needs and received a comprehensive induction, including shadowing other staff before supporting people on their own.

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

- The registered manager recorded people's cultural and religious needs and ensured staff respected people's needs and wishes when supporting them at mealtimes.

- The provider ensured people's support plans included information about their needs regarding fluids and nutrition.

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 MCA 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The provider had processes in place to ensure the service worked within the legal requirements of the MCA. Assessments of people's needs included people's capacity to choose and make decisions.
- Staff demonstrated an awareness of supporting people to make decisions and understood the principles of the MCA.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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 received kind and compassionate support from staff who used positive, respectful language which people understood and responded well to.
- The registered manager ensured people's equality and diversity was considered and people were treated fairly regardless of their age, sex, race, disability, or religious beliefs.
- The provider supported people to access services culturally and spiritually important to them.

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

- The provider ensured people were fully involved in decisions about their support and treatment. For example, people could review 'staff profiles' to help them choose which staff supported them based on skills and shared interests.
- Staff supported people to feel empowered to make decisions about their support. The registered manager ensured people were included through the use of technology. For example, policies and updates were accessible via a secured 'app'.
- People said they were asked regularly by staff if they wanted to make any changes to their support plans, and the plans were changed accordingly.
- Relatives felt people had control of their support and could choose the staff who supported them. One relative told us, "The service sends new staff in for a trial with the existing staff. We always see if [my relative] is happy (to be supported by them) before we decide whether we want to go ahead. It's important that staff are comfortable as well and they can build up a good rapport with [my relative]. The registered manager does deliver on that service."

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff promoted people's independence and ensured privacy was maintained.
- Staff understood the importance of respecting people's privacy and supporting them to be an independent as possible in their own home
- The provider and staff ensured people's needs and aspirations were understood by recording them in their support plans; they checked staff were meeting them by carrying out regular observations and speaking with people.
- Relatives told us staff were person-centred in their approach to people's needs. One relative said, "[My relative] has a bond with the staff; there is companionship (as well as care tasks), and they look forward to the visit. Homecare Haven have been very good to us."

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. 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

- The provider ensured people had clear support plans in place detailing their needs and preferences in a personalised and responsive way.
- The registered manager regularly reviewed people's support needs, including people, and where appropriate, their relatives in decision making and goal setting.
- The registered manager ensured staff had a good understanding of people's needs and kept them informed of any changes to people's support.
- Relatives felt staff were responsive to people's fluctuating needs. One relative told us, "If [my relative] is not feeling well and doesn't want to shower, staff take her wishes into consideration and support in a different way."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager ensured people had their communication needs assessed as part of their initial assessment; these needs were regularly reviewed.
- The provider enabled people to access information in different languages, easy read versions and in large print if needed.
- The registered manager ensured staff were recruited who could meet people's individual communication needs.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The registered manager assessed and recorded people's social needs, wishes and aspirations and supported people to attain those goals.
- Staff spent time getting to know people's background and history to enable them to support participation in activities meaningful to them.
- Staff understood people as individuals and how their needs and emotional wellbeing should be met. For example, the provider had developed links with local community organisations to provide 'pet therapies' to meet people's emotional needs.

Improving care quality in response to complaints or concerns

- The provider had processes in place to ensure people felt confident to raise concerns and complaints. People and their relatives told us they knew how to make a complaint and felt confident any issues raised would be dealt with appropriately by the registered manager. The registered manager felt communication was a key service strength.
- The registered manager tracked and analysed complaints to ensure lessons were learned and improvements were made to the quality of people's support. For example, changes were made to call times when concerns about timings were identified.
- People told us the registered manager was very responsive. One person said, "If I ever need anything I can just call [the registered manager]; they always answer the phone. It's just been minor things. I'm new to homecare and it's taken a while for me to settle into a routine. Staff are happy to learn and to adapt to my changing needs."

End of life care and support

- Staff knew how to support people and how to access the appropriate health professionals to ensure end of life needs were met.
- Where people had been willing to discuss their wishes for this stage of life, the registered manager ensured their support record reflected this.
- At the time of the inspection no-one was being supported at the end stages of life.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager led by example and demonstrated an open and transparent approach. Staff were encouraged to discuss concerns through 'chai and chat' sessions available at weekends.
- The provider recruited staff who were passionate about promoting person centred, inclusive support to reflect the cultural and religious needs of the people receiving support.
- The registered manager was aware of their role in supporting people's rights and in maintaining equality standards

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; Continuous learning and improving care

- The registered manager had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- The provider encouraged staff and people to take care of their environment through community recycling projects, reducing the use of paper-based documents, and encouraging the use of public transport.
- The registered manager fully understood their responsibilities around duty of candour. This was underpinned by the open and honest culture and by appropriate policies and procedures, including a designated whistleblowing champion.
- The provider had robust processes in place for receiving feedback and suggestions on how to improve the quality of support

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Working in partnership with others

- The provider had effective systems in place to monitor and assess the quality of the support provided including monthly audits.
- The registered manager and staff understood the requirements of their roles and staff felt well supported by the management team.
- Staff worked closely with other healthcare professionals. People's support records showed involvement and guidance from other agencies, for example, the district nursing teams.
- The provider had close links with the local community and staff were involved in mental health initiatives aimed at reducing social isolation. For example, the provider worked closely with local food banks and charities to support people who were in need of support in this area.

- Staff told us they felt supported by the provider. One staff member said, "The registered manager is lovely, friendly and caring. They always act on my concerns."