

Midshires Care Limited

Helping Hands Sale

Inspection report

43 Stanley Square
Sale
M33 7ZZ

Date of inspection visit:
08 December 2022
09 December 2022

Date of publication:
27 February 2023

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?	Outstanding ☆
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Helping Hands Sale is a domiciliary care service providing personal care to people in their own houses and flats in the community. At the time of our inspection there were 31 people using the service. 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 inspection, the service was providing personal care to 15 people.

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

The service was exceptionally responsive to people's needs. The provider promoted person-centred approaches and was responsive to changing need, ensuring positive outcomes for people. People and their relatives told us they were involved in the support planning process to ensure it met their individualised needs. People were actively encouraged to live full and active lives and were empowered to participate in value-based activities.

People felt safe and staff knew what to do if they thought people were at risk. Staff managed people's medication safely. Staff recruitment processes were robust and staffing levels ensured peoples' needs were met. The provider followed current infection prevention and control guidance.

People's needs were assessed and reviewed regularly, and staff were trained to provide support whilst promoting independence. People told us staff were polite and always asked before providing support. People were involved in decisions about their support needs.

People were happy with their support and felt they could talk to staff if they had concerns. The provider had systems in place to learn from issues as they arose, and outcomes were communicated to staff. People had access to healthcare professionals. Staff and managers supported people's mental, social and emotional needs as well as their physical healthcare needs.

Systems were in place to monitor quality and safety. The provider sought regular feedback from people to improve their support. Staff worked well in partnership with other agencies to deliver effective support.

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.

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 5 May 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Helping Hands Sale

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 1 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

This service 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 the provider or registered manager would be in the office to support the inspection. Inspection activity started on 8 December 2022 and ended on 9 December 2022. We visited the location's office on 8 December 2022.

What we did before the inspection

We sought feedback from the local authority and professionals who worked 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 the registered manager, 1 care coordinator, and 4 support staff. We spoke with 3 people receiving support and 5 relatives. We reviewed 3 people's support records. We reviewed records and audits relating to the management of the service. 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.

Systems and processes to safeguard people from the risk of 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 received safeguarding training and gave clear examples of when and how they would report any concerns.

Assessing risk, safety monitoring and management

- The registered manager ensured risks to people's safety and welfare were identified and managed safely.
- The provider had procedures in place to make sure staff knew what to do in the event of an emergency; for example, if they could not gain access to a person's home.
- Staff had completed the appropriate mandatory training to keep people safe.

Staffing and recruitment

- The provider's systems allowed staff to be recruited safely; all appropriate checks were carried out to protect people from the employment of unsuitable staff.
- The registered manager planned rotas to ensure people, and their needs, were matched to staff and their skills; this provided consistency in support to keep people safe.
- An electronic system ensured managers knew the whereabouts of staff, to ensure the safety of both people and staff. Late calls could be tracked, and alternative arrangements made through consultation with people. No calls had been missed and staff told us managers would help with support tasks when needed.
- People told us staff were punctual and consistent. One person said, "I always have the same staff; I receive a rota weekly, so I know who is coming. They always arrive on time and if they finish [personal care] a little early they stay and have a chat with me; it's very nice."

Using medicines safely

- The provider had well organised systems in place to ensure people were receiving their medicines when they should.
- Staff had received medicines training and had their competency assessed to ensure they gave medicines safely.
- The registered manager supported staff by providing clear guidance on administration of medicines. Records were completed in a timely manner and audited appropriately.

Preventing and controlling infection

- The provider used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them.
- Managers had plans in place to alert other agencies to concerns affecting people's health and wellbeing.
- The provider's infection prevention and control policy was up to date.
- People told us staff made them feel safe. One person said, "Staff always make me feel extremely safe; they are very, very good. They always wear masks, aprons, gloves; they always wear their uniform."

Learning lessons when things go wrong

- The provider ensured systems were in place to identify issues which might affect people's safety.
- Accident and incidents reports were reviewed by the registered manager who took appropriate action to ensure any risks were reduced and lessons learned were shared with staff to keep people safe.
- The provider ensured lessons were learned from investigations into incidents, and actions were put in place to stop similar incidents occurring.

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.

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

- People's needs were assessed by the registered manager before support commenced. People were involved in the assessment and relatives were included where appropriate.
- People's needs were reviewed regularly. People's support plans were personalised, strengths-based, and reflected their needs and aspirations. People, those important to them, and staff reviewed plans regularly together.
- Staff understood people's rights, relevant legislation and best practice. One staff member told us, "We work hard to meet people's needs and wishes in a positive, person-centred way."

Staff support: induction, training, skills and experience

- The registered manager had systems in place to assure themselves staff were skilled and competent to carry out their roles.
- The provider ensured staff received effective induction and training, including enrolling all new staff on the Care Certificate. 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.
- Staff were supported by the registered manager through regular supervisions, spot-checks and refresher training as part of on-going professional development.
- People told us new staff were introduced gradually to maintain safe support. One person said, "New members of staff always shadow for some time. They are really caring and have a lovely attitude; you never feel rushed."

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

- The provider ensured people's support files included information about their needs regarding fluids and nutrition.
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where required.
- Managers recognised people's cultural and religious needs and ensured staff respected people's needs and wishes when supporting them at mealtimes.

Staff working with other agencies to provide consistent, effective, timely care

- The provider worked closely with a range of professionals and partner agencies, to ensure people received effective support.

- The registered manager facilitated the involvement of healthcare professionals, people, their relatives, and other agencies and staff ensured support was provided at the right time to effectively support people.
- Relatives said staff worked closely with healthcare professionals. One relative told us, "It's so comforting to know if staff don't think [my relative] is well, they will get another opinion and provide the right support before problem occur."

Supporting people to live healthier lives, access healthcare services and support

- The registered manager ensured people had regular access to healthcare to enable their health needs to be met. Staff support was in place for longer-term needs.
- Staff encouraged people to make healthy lifestyle choices such as registering with a dentist and supporting their oral hygiene needs.
- Support records showed any advice given was acted upon and staff were prompt in raising any concerns or issues.

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 service worked within the legal requirements of the MCA. Assessments of people's needs included an assessment of people's capacity to choose and make decisions. The assessment covered details of any Lasting Power of Attorney in place.
- People were supported to make their own decisions and choices. Capacity assessments had been carried out when required and decisions had been made in people's best interest for those who lacked capacity.
- Staff received training and understood the principles of the MCA and how they applied this to their day to day work.
- People felt staff always asked for consent before supporting personal care. One person told us "Staff always ask what I would like them to do today, and when they finish, they ask if there is anything else, I would like."

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

- The registered manager ensured people's equality and diversity preferences were assessed and these were recorded in their support plans.
- The provider had links with several community and national organisations to ensure people could access services culturally and spiritually important to them.
- People felt staff treated them with respect and were understanding of their personal preferences. One person told us, "I think all the staff are fantastic; they are kind, caring and helpful. I said I would prefer to have all female staff to support me, and it was agreed. I always have female staff."

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

- People were fully involved in planning their support and encouraged to express their views in person.
- Staff supported people feel empowered to make decisions about their support. The registered manager ensured people were included through use of technology.
- People, and where appropriate their relatives, told us they were regularly involved in support planning. One relative said, "We are involved in every decision about [our relative's] support. In one instance we were updated by telephone after they returned home from hospital, but usually it is face to face with the manager."

Respecting and promoting people's privacy, dignity and independence

- Staff promoted people's independence and ensured privacy was maintained.
- Support plans described what people can do for themselves and staff prompted this to ensure independence was maintained.
- Staff understood the importance of respecting people's privacy and supporting them to be as independent as possible in their own home.
- People told us staff were very caring. One person said, "Staff often suggest things to help me, for example, I have to take a water tablet so I have to get to the toilet quickly; staff suggested having two commodes, one upstairs and one downstairs, to make it easier for me."

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 Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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, responsive way.
- The registered manager reviewed people's support needs at regular opportunities, including people, and where appropriate, their relatives in decision making and goal setting, giving particular attention to people's individual wishes. People had daily access to their support records through the use of technology.
- Staff embodied person-centred care, demonstrating in-depth knowledge about people they supported. Staff supported people to make good choices and achieve positive outcomes through education and goal setting, to improve people's abilities to make informed decisions and become more independent.
- People felt managers had their best interest at the centre of support packages. One person told us, "Managers advise us on the best package of care for me and my family. We can pick the days and times of visits to give us a balance between care and social activities."

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 provider ensured people's communication needs were assessed and these were recorded in their support plans.
- The registered manager ensured staff were available to support people whose first language was not English as part of pre-assessing packages of care.
- Staff told us people's communication needs were detailed in their support plans and their preferred format for documentation was always made available.
- People told us staff supported their communication needs and enhanced their skills, benefiting their mental and emotional wellbeing. One person who, following a significant setback in their health, had become withdrawn and isolated, benefited from additional support provided by staff and other agencies. This encouraged them to engage in activities meaningful to them and their history. This intervention empowered the person to seek further support from the service and their local community in times of emotional hardship and allowed them to face their personal challenges with confidence.

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 and managers spent time getting to know people's background and history to enable them to individually tailor people's support to enable people to participate in activities meaningful to them.
- The provider was committed to encouraging people to undertake voluntary work, employment, and vocational courses in line with their wishes, and to explore new social, leisure and recreational interests.
- People told us staff supported activities to meet their aspirations, with life-changing impacts on their mental and emotional wellbeing. For example, people were supported to set up an outreach group for those who had lost, or become estranged from, their children. This support was offered at key times of the year to help people communicate their feelings and share their experiences with others.
- People told us staff helped them to avoid social isolation. One person regained life skills lost through ill-health, due to staff approaches meeting their support needs. Managers worked in partnership with other organisations to reintroduce meaningful activities which were once an essential part of people's daily lives. These activities empowered people to try new activities beneficial to their health condition, as well as having a significant positive impact on their motivation to rebuild important relationships and reclaim their independence.

Improving care quality in response to complaints or concerns

- The provider had processes in place to allow people to raise concerns and complaints easily, and staff supported them to do so. Staff explained to people when and how their complaints would be addressed.
- Complaints were tracked and analysed to ensure lessons were learned and improvements were made to people's quality of support.
- Relatives told us managers were responsive to concerns and felt confident actions would be taken if needed. One relative said, "If you need to ring the office, managers are always there to talk to and will sort any changes out with you as soon as possible. They are very attentive and really do their best to get it just right."

End of life care and support

- Processes were in place to support people with end of life decisions.
- Staff knew how to support people and how to access the appropriate health professionals to ensure end of life needs were met.
- Relatives shared their experience of responsive staff support at people's end of life. One relative told us of the practical assistance and emotional support they received from staff who knew them well. Staff spent quality time exploring people's last wishes and spent time with loved ones. Relatives received the emotional support they needed and built mutually respectful relationships with staff which continued after the person was no longer with them.

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 instilled a staff culture which valued and promoted people's individuality, protected their rights, and enabled them to develop and flourish.
- The provider had processes to make sure people were at the centre of their support, and staff made sure everything they did helped to improve people's wellbeing.
- The registered manager was aware of their role in supporting people's rights and in maintaining equality standards.
- The provider sought regular feedback from staff, people and those important to them, and used the feedback to develop the service.
- People and relatives told us managers kept them informed of changes and empowered them to lead their support package. One relative said, "We are kept up to date at all times; we are provided with a very good app on the phone so we can check what staff have done on each visit. I know exactly what staff have support [my relative] with at all times."

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.
- There were systems in place to identify and manage risks to the quality of the support provided. For example, the provider had processes in place to monitor any concerns and identify patterns or trends to improve outcomes for people.
- The provider fully understood their responsibilities around duty of candour. This was underpinned by the open and honest culture and by appropriate policies and procedures.
- The registered manager 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

- The registered manager had the skills, knowledge and experience to perform their role. They demonstrated a clear understanding of people's needs and had good oversight of the services they managed.

- Governance processes and auditing systems were effective and helped to keep people safe, protect people's rights and provide good quality care and support.
- The registered manager had identified staff 'service champions' whose role was to ensure other staff knew how to support people effectively to meet their health and dignity outcomes.
- Staff were clear about their roles and responsibilities and felt supported by the management team.

Working in partnership with others

- The provider had systems in place to ensure communication with other agencies was effective and led to positive outcomes for people. The registered manager explained examples of joint working which mitigated peoples' risk and promoted their independence.
- The registered manager ensured people were included in the local community by working closely with local charities, forums and services to support people's social and cultural needs.
- Healthcare professionals felt the registered manager was effective and responsive in their approach to care. One healthcare professional told us, "The manager acts appropriately when concerns are raised and is not afraid to have difficult conversations to ensure people receive quality, person-centred, support at all times."