

Help at Hand Care Limited

Help at Hand Care Services

Inspection report

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Requires Improvement



Is the service well-led?

Requires Improvement



Summary of findings

Overall summary

About the service

Help at Hand Care Services is a domiciliary care agency registered to provide personal care to people in their own homes. The service provides care and support to people which include personal care, food preparation and medication support. At the time of this inspection, the provider informed us that they were providing care and support to 21 people who used the service.

Not everyone using Help at Hand Care Services received a regulated activity. CQC only inspects the service received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People and relatives were happy with the care workers who supported them. Each person benefited from regular staff who knew them well. Comments included, "I am extremely well looked after" and "A lovely company where I think all the staff are very well trained and professional."

People felt safe and comfortable when staff were in their home. Comments included, "I feel totally safe with them" and "I am very happy with them and feel very confident in their ability to keep people safe". However, people's risks were not always identified and there were not always clear plans in place to tell staff how these risks should be managed or reduced.

The systems and processes in place for the safe administration and use of medicines were not always clear and policies were not always followed. We found no evidence that people had been harmed however we could not be sure people were receiving their medicines safely.

When there was an infection control issue relating to the use of PPE with one person, the provider hadn't sought advice. Following the inspection, the local authority held a multi-disciplinary team meeting which included staff from the service to discuss how risks could be minimised and actions that needed to be taken to ensure people's safety. We have made a recommendation about infection control during the COVID pandemic.

Staff recruitment practices were safe.

People told us the service was well managed. Comments included, "I think it is very well led. I can always speak with someone if I need reassurance" and "(provider's name) has always been very professional, reassured me and made sure we are all very happy with the care provided". There were systems in place to assess and monitor the quality of the service provided. However, monitoring systems had not identified the issues found at this inspection. When we identified issues during the inspection, the provider was responsive and immediately started work on making improvements.

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 in October 2019 and this is the first inspection.

Why we inspected

This planned focused inspection was carried out based on the date of registration.

This inspection considered the key questions of safe and well-led and provides a rating for those key questions. There will be no overall rating given for the service as this was not a comprehensive inspection.

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service to keep people safe and to hold providers to account where it is necessary for us to do so.

We have identified breaches in relation to records, these included risk assessments, the safe management of medicines, and the governance of the service at this inspection.

You can see what action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety.

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 not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always Well-Led.

Details are in our Well-Led findings below.

Requires Improvement ●

Help at Hand Care Services

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.

Inspection team

This inspection was completed by one inspector and one assistant inspector. One Expert by Experience telephoned people who received care from the service and relatives to obtain feedback about their 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

Help at Hand Care Services is a domiciliary care agency. It provides personal care to people living in their own homes.

Notice of inspection

This inspection was announced. We gave the service 48 hours' notice of the inspection because we needed to be sure the provider would be available to assist. Inspection activity started on 12 January 2021 and ended on 19 January 2021.

Before the inspection

We reviewed information we held about the service. This included details about incidents the provider must notify us about, such as allegations of abuse, and accident and incidents. 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 judgement in this report. We received feedback from two healthcare professionals. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who used the service and seven relatives to gain their views about the service. We also spoke with 14 staff which included care workers, the provider, the director, and the manager. We received feedback from a further two staff and three healthcare professionals.

We reviewed a range of records. This included four people's care plans and risk assessments. We looked at documentation relating to medicines for six people. We looked at three staff files and checked recruitment. We also looked at records relating to the management of the service such as audits and a variety of policies and procedures developed and implemented by the provider.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We attended a multi-disciplinary meeting with the manager and professionals.

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 for this newly registered service. This key question has been rated requires improvement. This meant people were not always safe and protected from avoidable harm. Not all legal requirements were being met.

Using medicines safely; Learning lessons when things go wrong

- Medicine risk assessments and care plans were not completed for some of the people reviewed. One person's medicine administration record (MAR) did not contain all of the medicines the person was prescribed. Staff were applying topical medicines for this person but there were no body maps in place to show where these should be applied. This meant there was not always enough information to support staff in safe administration.
- Medicines were being left out by some relatives for staff to prompt or administer later. This meant medicines were not in their original containers and staff were not able to check the medicine against the MAR. Where a medication error had occurred, the provider did not take action to ensure it did not happen again.
- People with occasional use medicines, such as 'when required' (PRN) medicines, did not have protocols in place to support staff to safely administer the medicine or refer to the GP when necessary.

We found no evidence that people had been harmed however we could not be sure people were receiving their medicines safely. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- During the inspection, the management team told us they had started work on making improvements to medicines management.

Assessing risk, safety monitoring and management

- Some risk assessments had been completed which considered personal care, risk of falls and the environment in which care was to be provided.
- However, one person had complex needs. For example, staff told us they could be aggressive. There was no information about this in their care plan or risk assessments. We discussed the funded hours and complexity of this package of care with the provider and told them we would send the information into the local authority for review.

We found no evidence that people had been harmed however we could not be sure risks to the person and staff had been managed and reduced. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- The service had contingency plans in place to ensure people's care would continue in the event of an emergency.

Preventing and controlling infection

- People and their relatives confirmed staff followed good infection control practice in their homes. They said they felt safe and staff wore Personal Protective Equipment (PPE) appropriately. Comments included, "No worries regarding being COVID-19 safe. They are very conscientious" and "They all wear their mask and things now".
- One person became agitated when staff were wearing a mask; staff were not wearing masks at all times when working with this person. The provider had not sought advice from infection control or the local authority. Following the inspection, the local authority held a multi-disciplinary team meeting to discuss how risks could be minimised. The manager shared ideas on how they planned to take steps to make PPE seem less frightening and assured us they would start work immediately with the person.
- Staff had completed infection control training. The provider had sent them guidance specifically relating to COVID-19. Some staff were unsure of the order they should put on and take off PPE. During the inspection, the provider sent further information out to staff, so they understood their responsibilities in relation to this.

We recommend the provider seeks advice and guidance in relation to infection control during the COVID pandemic.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they always felt safe and comfortable when staff were with them in their home. Comments included "I feel totally safe with them" and "I am very happy with them and feel very confident in their ability to keep people safe".
- Staff had completed safeguarding adults training. They knew how to protect people and report concerns about people's safety.
- Staff told us they felt confident the provider would respond and take appropriate action if they raised any concerns. The provider worked with the local authority safeguarding team to ensure people remained safe.

Staffing and recruitment

- Staffing arrangements had been planned and organised in a way that met people's needs and kept them safe. There were enough staff available to support people in their own homes.
- People told us staff were usually on time, stayed the full time and contacted them if they were running late. Staff told us they usually had enough time at visits and between visits.
- People told us they had good continuity of regular care staff. People felt staff were trained and experienced to meet their needs. Comments included, "The staff are amazing and so willing. They help me with shopping, medication, personal care and cleaning. I am extremely well looked after" and "A lovely company where I think all the staff are very well trained and professional."
- Staff recruitment practices were safe. Checks such as a disclosure and barring (police) check, had been carried out before staff were employed. This helped to ensure they were suitable to work with people.

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 requires improvement. This meant the service was not consistently managed and well-led.

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

- Since registration, the service had not consistently had a manager in post. The registered manager left the service in August 2020. A manager was recruited and started work in August 2020; they left in December 2020. At the time of the inspection, there was no registered manager in post. A new manager started work at the service during our inspection. The provider told us the manager was starting the process to register with the CQC.
- Quality assurance systems were in place to assess, monitor and improve the quality and safety of the service. The provider had recognised improvements were needed. However, monitoring systems had not identified the issues found at this inspection.
- For example, whilst some 'spot checks' of care were undertaken, there was no evidence of a formal process to assess staff's continued competency in administering medicines. The service had a medicines policy, although staff did not always follow this.
- Records of the care provided to people were not always complete. This meant staff may not deliver people's care in a way that met their needs and kept them safe.

This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- During the inspection, the provider told us they were starting work on making improvements to practice and the information in records.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People told us the service was well managed and there was good communication. Comments included, "I think it is very well led. I can always speak with someone if I need reassurance" and "(Provider's name) has always been very professional, reassured me and made sure we are all very happy with the care provided".
- People told us they would feel able to raise any concerns. Where concerns had been raised, people told us these had been dealt with quickly.
- The service had started a 'Wellness Wednesday' to promote staff wellbeing and provide support. One staff member had attended a 'Covid Recovery Champion' course and had been promoting wellness. One staff member told us "It has been great with the Wellness Wednesday's – they have been very useful and there is always someone there to talk and generally we all work together". Another staff member described the provider as, "highly approachable, welcoming, supportive, friendly and resolves any issues with diligence

and dedication".

- Staff enjoyed their work and were passionate about achieving good outcomes for people. Comments included, "I genuinely think you guys should know how fantastic our team is and how kind and caring they all are. All our staff go above and beyond and that starts from the office and goes right into the field" and "It's a pleasure to work for Help at Hand, and of course a privilege and blessing to work with the customers."
- A healthcare professional told us, "I have always found (provider's name) and her team to be extremely courteous, professional and empathetic".

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 provider was aware of their responsibilities to provide CQC with important information and had done so in a timely way.
- The provider understood the need to be open and honest with people and relatives.

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

- People and their relatives were asked to share their views about the service through regular home visits, telephone discussions and questionnaires. The latest feedback showed people were satisfied with the care delivered and how the service was managed.
- The service had received five star ratings on the local Healthwatch reviews website.
- Staff told us they felt able to contribute their thoughts and experiences on the service. Staff meetings hadn't been held due to COVID and there were plans to restart these. Staff spoke positively about communication within the service. They told us they were provided with information they required.

Working in partnership with others

- The service worked in partnership with key organisations including the local authority and other health and social care professionals to provide joined up care.
- A healthcare professional told us, "They genuinely care for their service users and take time to get to know them well and appreciate diversity, differences and involving the service users in their care planning and reviewing. They have often taken on care packages at very short notice and delivered a first-class service."

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment Risks associated with people's needs had not been assessed and action had not been taken to mitigate risks. Regulation 12 (2)(a)(b)(g)
Regulated activity	Regulation
Personal care	Regulation 17 HSCA RA Regulations 2014 Good governance People's records were not complete, accurate and up to date. Monitoring systems were not fully effective. Regulation 17 (2)(c)(f)