

Hygea Care Group Ltd

# Hygea Care Group Ltd

## Inspection report

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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?

Outstanding ☆

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Hygea Home Care Ltd is a domiciliary care agency providing personal care to people in their own homes. At the time of the inspection, the agency was supporting 13 people. 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.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

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

#### Right Support:

There was a transparent and open culture which encouraged creative thinking in relation to people's safety. Risks to people's care had been identified and care plans contained detailed and person-centred information for staff to know how to mitigate the risk. Care records provided details about people's health needs, how they wished to be supported and what their long-term health goals were.

Respect for privacy and dignity was at the heart of the service's culture and values, and people were supported to maintain their independence for as long as possible. There was a thorough approach to planning and coordinating people's care. Staffing resources were organised exceptionally well to provide people with continuity of staffing resulting in safe, consistent, responsive care. Staff worked together in a mutually supportive way and communicated effectively with a range of external organisations.

The provider ensured that staff focused on building and maintaining open and honest relationships with people and their families, friends and other carers. The registered manager used creative ways to reflect people's personal histories and cultural backgrounds and matched staff with people's interests and personalities.

People were supported by staff who knew them well. People and their relatives told us they were supported by a regular team of staff and they were always aware of which staff member would be attending their home.

Staff were trained and had an exceptionally good understanding of people's needs. Staff supported people,

when needed, to access other health professionals. Staff competency was tested in relation to tasks they performed such as medicine administration.

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.

#### Right Care:

People's care was always person-centred. People told us the scheduling of their call met their requirements and staff arrived and stayed the allocated time with some staff, "Often going above and beyond and staying longer to socialise," without compromising calls to other people.

Staff showed empathy and had an enabling attitude that encouraged people to challenge themselves, while recognising and respecting their lifestyle choices. People always received positive outcomes and praised staff for supporting and encouraging them with enhanced care tasks such as speech and language therapy.

Staff had training on how to recognise and report abuse and they knew how to apply it, this ensured people were protected from harm and abuse. Staff understood people's cultural needs and provided culturally appropriate care.

#### Right Culture:

The registered manager had a clear vision for the service and was open and transparent. Staff told us they were supported and able to raise concerns freely with the management team. There were effective systems and processes in place which ensured the care delivered was monitored, assessed and improved upon.

The provider worked in partnership with other professionals and had been successful in reducing hospital admissions by upskilling and sharing best practices with other organisations.

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

This service was registered with us on 5 October 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 safe findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our safe 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 ●

# Hygea Care Group 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

The inspection was carried out by 1 inspector and an Expert by Experience who made phone calls to people and their relatives who used the service. 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 that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 10 January 2023 and ended on 13 January 2023. We visited the location's office on 10 January 2023.

### What we did before the inspection

We reviewed information we had received about the service. 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 6 people and their relatives who used the service. We spoke with the registered manager, operations manager, care manager and care support workers. We reviewed a range of records. This included 3 people's care plans and medicine records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed. We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

# 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

- People were protected from the risk of harm, abuse and neglect. Staff had a comprehensive awareness and understanding of abuse and knew what to do to make sure that people who lack voice were protected.
- All the people we spoke with told us they felt safe with the staff who visited their homes. One person said, "I feel safe, they've taken the time to get to know me." Other people described their care and carers as, "Trustworthy, friendly and excellent."
- On staff member told us, "We build relationships with people and their family so we know what normal looks like for them, this helps us identify concerns early and we can discuss with the family to solve the situation."

Assessing risk, safety monitoring and management

- The provider embedded a proactive approach to anticipating and managing risks for people, and was recognised as being the responsibility of all staff. Staff explained how they were encouraged to feedback changes in people's needs and abilities so care planning and risk assessments could be updated.
- People and their relatives were involved with managing risks and making choices which ensured they had control and remained independent. One relative said, "[Staff] encourage [name] to use their mobility aids so they remain active and independent, sometimes it would be quicker for them to do it for [name] but they never do."
- There was an open culture of learning from mistakes, concerns, incidents, accidents and other relevant events. Staff told us they were confident in approaching management and always received feedback to concerns they raised.

Staffing and recruitment

- People were supported by staff who were recruited safely. The service undertook robust checks including employment history, references and Disclosure and Barring Service (DBS) checks. 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 register manager described how consistency of staff was important to ensure people received high quality care. People confirmed they received the same staff regularly and were always informed of any changes.
- A relative we spoke with said, "New staff are always introduced to us, the registered manager usually does this and it means staff know what's needed before they commence."

Using medicines safely

- Where people required support with their medicines, this was administered and managed safely. Staff received training in how to deliver medicines and regular competency checks were completed to ensure this was done safely and in line with people's wishes.
- Staff completed medicine records using the provider electronic care system. The system alerted the management team instantly if staff experienced issues in administering or recording medicines. This ensured people received their medicines safely and as prescribed.
- A relative told us, "We have never experienced any problems, staff are very good. Staff adapt quickly to changes and support with short term medicines like eye drops too."

#### Preventing and controlling infection

- Staff had sufficient stock of personal protective equipment (PPE) available which included hand sanitiser, masks, gloves and aprons.
- We were assured that the provider was responding effectively to risks. For example, the provider carried out individual risk assessments for people in line with changing government guidelines which considered people individual wishes.
- The provider's infection prevention and control policy was up to date and we saw evidence of updates being communicated through team meetings and competency checks.

#### Learning lessons when things go wrong

- Lessons were learned and communicated widely to support improvement. We saw evidence of reflective practice forms being completed following incidents which encouraged open and transparent engagement from staff.
- The register manager had an accident with a person's home and used the incident to show staff how easily mistakes could happen and how best to deal with situations. A staff member said, "Not many managers would do that, it showed us were all human and mistakes happen but it's what you do about them that counts."
- All staff we spoke with agreed that management were open and transparent. A staff member said, "There is a no blame culture, so no-one is in fear of reporting an error or a concern."



# 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

- Systems were in place to assess people's individual needs and preferences. These were set out in each person's care plan and were reviewed regularly by the registered manager and care manager, in consultation with people and their relatives.
- A relative told us, "They always ask what my [relative] wants and then asks their permission before doing it. It doesn't matter what it is, whether it a wash or what they want to eat, they always let [name] make their own decisions."
- Staff applied their learning and training effectively. For example, a staff member described how sometimes people declined personal care on morning visits, so they had offered it again at lunch time. The staff member said, "Some mornings I want to relax and stay in my pyjama's, so the people I care for should have that same choice to, without missing out on their care needs being met."

Staff support: induction, training, skills and experience

- Staff had the right knowledge, competence and skills to carry out their roles. Staff received regular supervisions which ensured an opportunity for feedback and development.
- Staff received an induction which included shadowing another staff member to learn about people's care needs and safe care delivery. Staff then supported an experienced staff member on calls which required two staff or completed further shadowing and introductions before visiting people on their own.
- A staff member we spoke with said, "We get unannounced spot checks and I actually look forward to them. I like the reassurance of knowing I am delivering good care in the right way."

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

- Where people received support from staff with meal preparation, care plans recorded information about this, including instructions for staff about people's needs required during each visit. Care plans contained detailed information on people's needs and preferences and were regularly reviewed.
- A relative said, "Staff always ask [name] what they would like to eat and get it for them, I do their shopping so staff will tell me if my [relative] wants something special getting in."

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 in partnership with health and social care professionals to maintain people's health. For example, care records showed recent communication with social workers and occupational therapists.
- Care plans contained health assessments such as oral health assessments in place and monitoring charts. These included guidance for staff on when to seek advice or offer additional support.

- Good relationships had been established with health professionals in the community. The registered manager told us they worked closely with the local hospital to ensure people received the right support when discharged from hospital.
- The registered manager and staff had good knowledge and understanding about people's healthcare requirements. A professional who works with the service told us "I am relieved when I know Hygea Care Group are caring for one of my patients."

#### 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.

- At the time of our inspection, the service did not support anyone who was deprived of their liberty.
- Staff had a good knowledge of the principles and requirements of the MCA and supported people accordingly. This included comprehensive 'about me forms' that guided staff to understand and support people in a way that was person centred and reflective how they preferred to make decisions.

# 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 were treated with kindness and compassion. Staff we spoke with commented on how care was 'delivered from the heart' and how everyone was 'treated how I would want my relative to be treated.' This attitude was reflected throughout the service from care planning to delivery.
- Relatives praised the way staff supported their relatives. One person said, "From the second they walk through the door, they are smiling and friendly and treat my [relative] with so much compassion. Another relative stated, "Staff have always been kind but the sensitivity they have shown since my [relative's] partner died has been so supportive."
- The provider was committed to supporting people in a non-discriminatory way. Staff received equality, diversity and human rights training and understood the importance of adjusting their approach to take account of any cultural differences or preferences.

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

- People were supported to express their views and make decisions. We saw several examples of feedback from people and relatives that remarked the care they received was "exceptional", another person stated it was "The best care I have ever received."
- Relatives gave multiple examples of how staff supported people to make their own decisions from activities they wanted to complete to the care they received. One relative said, "[Relative] can make some decisions if it is communicated in a way they understand, and staff are very good at this."
- Staff praised the registered manager and care manager for their "hands on approach" to people and their care. They stated that management team completed care calls themselves to better understand people, which enabled them to give advice in ways and techniques of supporting people to fully express themselves. This ensured staff delivered person centred care which involved people and their loved ones.

Respecting and promoting people's privacy, dignity and independence

- People's dignity, privacy and independence were respected, encouraged and supported by the provider. Care plans contained detailed information on people's wishes and current levels of independence and gave staff clear guidelines on how best to promote and support people to become more independent.
- The registered manager told us about a person who they supported with their speech and language development. Staff supported the person to practice their speech and word recognition with the help of a tablet. A relative of the person said, "There has been gradual changes and improvements with [relative's] speech, the carers are very proactive."
- Everyone we spoke with praised staff for respecting their dignity and described different occasions where staff had asked permission to complete personal care, closed doors and curtains and asked other people to

leave the room.

## 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.

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 provider tailored the service to meet the needs of individuals and delivered care in a way that ensured flexibility, choice and continuity of care. This supported people to enhance and maintain social relationships and pursue activities important to them.
- Whilst the provider did not always receive dedicated time as part of a person's care package or funding for social activities, the provider was extremely passionate about providing a holistic care package which ensured these needs and wants were fulfilled.
- Everyone we spoke with told us they had received positive outcomes since having Hygea provide their care. One person said, "My [relative] was in care home for 9 months awaiting a care provider, Hygea has given them their life back." Another commented, "There have been massive improvements in [relatives] mobility and they have more energy." This meant people were supported to achieve personalised goals that were important to them.
- The registered manager described how one person had been an active member of a walking group and missed this activity. Staff now supported this person to take short walks outside. This ensured the person was able to enjoy an activity that was important to them and reduce their social isolation.
- Another person who had worked as a teacher had expressed to staff how much they loved cooking food from their culture but no longer had anyone to share this with. With family and staff support the person provided cooking lessons to staff members who had a similar interest.
- Care staff we spoke with told us the provider encouraged them to support people's social and cultural needs. One staff member said, "The registered manager is excellent, if I call them because one of my clients is having a bad day and needs some extra time for a chat, there are no questions asked, even if that means I have to go back later once I have completed my calls. It's about what is right for the individual, not the company."

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The provider went to considerable lengths to ensure people were supported by the same small team of staff. People and staff told us this provided benefits to them by enabling them to build open and trusting relationships. A relative said, "Receiving daily support from the carers, has made a big difference to [name's] lifestyle and well-being."
- Staff told us having the opportunity to get to know people meant they were able to recognise the small changes in people early and discuss this with family members. For example, a relative described how a staff member had identified their loved one was showing signs of a urinary tract infection (UTI) and they were

able to get medicine early to prevent further symptoms.

- Another relative said, "[Name] has had quite a few UTIs, but not since we have had Hygea coming in. The difference has been remarkable."
- All the people we spoke with stated they had been fully included in planning their own care, had access to their care plan and had their care reviewed regularly. A relative said, "My [relative] can't make complex decision but this doesn't mean that staff make the decision for them, they break it down into smaller decisions they can make, it's lovely."
- The registered manager and care manager had undertaken additional training to enable them to take people's observations, such as blood pressure, oxygen levels and blood sugar readings. We saw evidence in care plans of the management team going above and beyond to assess people who felt unwell out of hours or were struggling to access other medical support such as general practitioners (GP).
- The registered manager described an occasion where a person became unwell late on a Friday afternoon and the GP was not able to give them an appointment. The registered manager was able to give the GP the observations over the phone and a prescription was issued electronically. This ensured the person received medical attention without delay and prevented their condition deteriorating and potentially needing a hospital admission.
- A professional who worked closely with the service said, "Hygea really do go above and beyond. They have prevented unnecessary hospital admissions and allowed people to remain living in their own homes."

#### 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 was extremely knowledgeable about Accessible Information Standards and staff had completed training to help them understand how to support people in a person-centred way.
- Staff were able to describe individual techniques used to communicate with people, from supporting one person with use of a tablet to communicate, to understanding people's body language and gestures.
- Several relatives commented on how well staff were able to communicate with their loved ones who were living with dementia. One relative said, "[Relative] can be moody, but staff understand those moods and adapt, [name] responds so well to them and has been more talkative since the staff started coming."

#### Improving care quality in response to complaints or concerns

- The provider had an extremely responsive approach to customer care and the registered manager and other senior staff worked in close contact with people and their relatives, enabling them to act quickly to resolve any issues or queries.
- This approach had ensured the service had received no official complaints or concerns since being registered. Everyone we spoke with told us they knew how to make a complaint but had never needed to. One relative said, "They keep in constant contact, it so reassuring. I have never needed to complain. Staff would know if there was a problem before I did, they are that responsive."
- People and their loved ones told us the registered manager was, "Open to suggestions" and, "easy to talk to" which had ensured they had not needed to complain. One relative said, "I can't imagine ever having to complain, there is nothing to fault."
- During the inspection care staff were asked what improvements they would like to make to the service. All the staff we spoke with stated they would not want to change one thing. One staff member said, "Caring for people is a passion and because of this our team makes it a priority to address concerns at every call, and

not allow things to become a complaint, that way we know people are getting the service they want and need consistently."

#### End of life care and support

- At the time of our inspection no one was in receipt of end of life care. However, staff had received training in this aspect of care and were knowledgeable about how people's conditions could deteriorate and monitored people for signs of this.
- The provider had a named end of life care champion. A care champion is someone who has received additional certified training and can support others. A staff member said, "We all work together as a team but knowing there is someone you can discuss concerns or ideas with takes our care to the next level."

# 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

- The provider's visions and values were exceptional and lived by all members of staff which had created a positive, open and empowering culture. Relatives said it was well led, and people were at the heart of the service.
- Speaking about the registered manager, one staff member said, "They [registered manager] puts their own needs on the back-burner to ensure that the clients and the team receive everything they need. Their love and passion for delivering outstanding care runs through the veins of the whole business."
- The registered manager had developed the vision and value of the provider to make them relevant to people they were caring for; its ethos was a culture of 'positive risk taking.' Staff were acknowledged and praised for the positive impact they had on people's lives for encouraging and supporting people to meet their goals.

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 understood and acted on their responsibilities to be open and honest with people. The register manager had ensured all staff were aware and supported this ethos.
- A staff member said, "There is a no blame culture, that means people are not afraid to speak up or say when something has gone wrong. It is never viewed negatively but always as an opportunity to improve; it's so refreshing to have that level of support."
- The registered manager met their regulatory requirements by notifying CQC of events which they are required to do so. A professional who worked with provider said, "I communicate with families all the time and never received any negative information about the provider, people have always been extremely happy with the care provided."

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

- The provider had ensured that all staff had a clear understanding of their roles and responsibilities. The management team strived to develop their leadership skills and upskill all staff within the organisation.
- We saw evidence of the upskilling of the deputy manager to deputise in the registered managers absence, ensuring the service was never at risk of not adhering to their requirements. The care manager said, "The support and belief the management team have shown in me has truly changed my life."



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

- People and staff were fully supported to engage with the service and give feedback. The provider used a variety of methods to ensure people could engage in the way they preferred, this included face to face meetings, surveys and telephone calls.
- Everyone we spoke with said they had had the opportunity to give feedback and would highly recommend the provider. One person said, "They [provider] phone me every month to check how things are going and recently a manager came out to speak with us." Another said, "I would absolutely recommend, they go above and beyond."
- Staff told us that the management team listened to their suggestions and acted upon them. One staff member gave an example of how the provider had introduced company sick pay following their collective feedback about improving staff retainment. This ensured staff felt valued and aided the provider in retaining staff and providing consistent care.

Working in partnership with others

- The provider had established effective partnerships with a range of other professionals including GPs and district nurses.
- A professional who worked with provider said, "Hygea Care have been professional, responsive and accommodating to my requests and they communicate as appropriate with any concerns. They go above and beyond to try and help families get the care they need at short notice."