

Hands of Hope Health Care Limited

Shilo

Inspection report

61 Bensham Grove
Thornton Heath
CR7 8DD

Tel: 07837969001

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13 May 2019

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service effective?	Inspected but not rated
Is the service caring?	Inspected but not rated
Is the service responsive?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service:

Shilo is a domiciliary care agency. It provides personal care to people living in their own houses and flats. At the present time it provides a service for one person. Not everyone using Shilo receives a regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

People's experience of using this service:

People said they were happy with the service and support they received. They said, "I have no complaints at all, I am very happy with the support I get from staff."

There were appropriate safeguarding processes in place to safeguard people from harm that included a comprehensive risk assessment for people and staff.

There were sufficient staff to meet people's needs and safe recruitment practices were in place.

The person receiving the service did not need support with their medicines.

The provider did however have appropriate policies and procedures in place to support people safely with medicines if required.

The registered manager and staff had relevant health and social care qualifications and completed training to ensure they were able to meet people's needs effectively. Support was provided appropriately for staff with regards to their professional roles.

Records showed appropriate consent had been sought in line with legislation and guidance.

Records showed the person was supported to have their health needs met, with access to health professionals as required.

The person told us the relationship between them and the provider was good.

The registered manager and staff spoke about the person they supported with care and kindness. Assessments and care plans included details of their preferences and wishes for care and support.

The person told us they were fully involved in the assessment and care planning process.

There was sufficient detail and personalisation in the care plan to ensure the person's needs were met in a personalised way.

The provider had systems in place to ensure concerns and complaints were responded to in an appropriate

way.

The provider had systems and processes in place to monitor the quality and safety of the service.

Due to the service currently only supporting one person we were unable to rate the service because there was insufficient evidence available for us to do so. The registered manager told us they were hoping to expand the service and provide support to more people which may enable us to rate the service at the next inspection.

Rating at last inspection:

This was the first inspection of this service since it was registered with the CQC on 8 May 2018.

Why we inspected:

This was a planned inspection in line with our inspection schedule.

Follow up:

We will continue to monitor the service through the information we receive. We will inspect in line with our inspection programme or sooner if required.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? Inspected but not rated.	Inspected but not rated
Is the service effective? Inspected but not rated.	Inspected but not rated
Is the service caring? Inspected but not rated.	Inspected but not rated
Is the service responsive? Inspected but not rated.	Inspected but not rated
Is the service well-led? Inspected but not rated.	Inspected but not rated

Shilo

Detailed findings

Background to this inspection

The service:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

This inspection was carried out by one inspector.

Service and service type:

Shilo is a domiciliary care service. It provides personal care and support to people living in their own homes. The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

The inspection took place on 13 May 2019 and was announced. We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

What we did:

Before our inspection we reviewed the information we held about the service. We looked at information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

At the inspection we visited the office and spoke with one member of staff and the registered manager. We reviewed one person's care records and two staff files as well as other records relating to how the service was managed. After the inspection we spoke with the one person who was using the service.

Is the service safe?

Our findings

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

Inspected but not rated.

Systems and processes to safeguard people from the risk of abuse:

- The person we spoke with told us they felt safe with the staff who provided them with support.
- The member of staff said they had received recent training to do with the protection of vulnerable adults. We saw certificated evidence that supported this.
- Staff were able to describe the types of abuse they might encounter in their work and they knew how to recognise them. They were aware of the actions they should take if they had any concerns.
- The provider had appropriate policies and procedures in place that were linked with the local authority. Staff were required to sign the policies and procedures to indicate they had read and understood them.

Assessing risk, safety monitoring and management

- We saw appropriate risk policies and procedures were in place. Risk management plans were integrated with the person's support plans. Staff had clear guidance to follow.
- The provider had an appropriate whistleblowing policy and procedure in place that staff knew about.

Staffing and recruitment

- There were robust recruitment procedures in place that the registered manager told us they used to recruit staff. We inspected two staff files and saw that appropriate checks were carried out including criminal record checks, identity checks and references from previous employers.
- At the time of this inspection only one person was using this service and the two staff providing their support were sufficient to meet that person's needs.

Using medicines safely

- The registered manager told us that only trained staff were allowed to assist people with their medicines. Staff told us they were trained in the safe administration of medicines.
- The person using the service told us they did not require any support with their medicines.

Preventing and controlling infection

- Staff told us they received training with food hygiene as a part of their induction training. We saw certificated evidence that supported this. The registered manager told us all staff received this training as part of their induction.
- The registered manager told us they monitored staff practices relating to infection control in the spot checks they carried out to ensure people were safe from the spread of infections.

Learning lessons when things go wrong

- The registered manager told us there had been no accidents or incidents reported to date. They said they

were implementing a system to review any that arose so they could improve policies and practices where necessary.

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

Inspected but not rated.

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

- The care file we inspected contained an initial assessment of the person's needs that they told us was agreed with them. The registered manager said this assessment was used to develop the person's care and support plan.

Staff support: induction, training, skills and experience

- The registered manager told us that all staff received a comprehensive induction. From our inspection of staff files we saw staff received a good induction. Staff told us this had helped them to carry out their roles effectively. Staff said other training they received helped them to develop their skills and knowledge appropriately for their roles. The registered manager said that training would be refreshed annually and would be delivered by a variety of methods including e-learning and classroom based learning. We were shown certificated evidence that supported this.
- Staff received support to carry out their roles effectively. Staff said that the registered manager was supportive and that they could contact them if they needed to discuss anything related to their work. ● Regular one to one supervision sessions were held with staff. The provider also carried out spot checks on staff whilst they were providing support to people in their homes. During the checks they obtained the views of people who used the service about the staff working with them. Any issues were raised with staff in supervision.

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

- The person we spoke with told us they were supported by staff appropriately with the preparation of a light snack and a cup of tea. They were happy with the support they received in this way.

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

- The agency worked in conjunction with other health services to make sure the person's needs were met. The care plans we inspected included details of involved health professionals and there were procedures for staff to follow in reporting any health emergencies and summoning assistance when required.

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 Act 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 with appropriate legal authority. We checked whether the service was working within the principles of the MCA. The registered manager knew what they were responsible for under these principles.

- The person receiving support told us they had capacity to make their own decisions, this was confirmed by the staff.

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

Inspected but not rated.

Ensuring people are well treated and supported; respecting equality and diversity; Supporting people to express their views and be involved in making decisions about their care

- The person using the service told us staff were kind to them, helpful and caring. It was evident from what we were told the person valued the support they received. They said, "Staff always arrive on time. They are polite and courteous, they stay for the agreed time and they do everything they are supposed to do. I am happy with this service."
- We noted on the person's file there was a good level of detail about the person and their history, their likes and dislikes. Staff said they wanted to provide information to people in a way they understood when providing care and support so people could make informed decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- Staff respected the person's privacy and maintained their dignity. The person confirmed that staff provided them with support in a way they were comfortable with and felt respected by staff.

Is the service responsive?

Our findings

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

Inspected but not rated.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- The person using the service told us that staff provided them with the care and support they required. They said they were happy with the service being provided and the registered manager was responsive to any requests made of them.
- The person using the service had their needs assessed before they started receiving care. Their care plan was developed based on the assessments completed by the registered manager and was agreed by the person. A copy of the care plan was kept in the person's home for reference and another in the agency office.
- The care plan provided staff with detailed information about people's preferences, needs and the tasks staff were expected to carry out to meet people's needs. Staff completed a daily record after each visit recording a summary of the care and support provided as well as any significant observations or issues.

Improving care quality in response to complaints or concerns

- The person we spoke with told us they would talk with staff and the registered manager if they had any complaints. They did say they had not had any reason to complain since they started receiving a service.
- The registered manager told us they had not received any complaints since the service was registered. We were shown an appropriate policy and procedure in place that set out the steps someone would need to take if they had a complaint. This included an appropriate timescale within which they might expect a response to their concerns. Staff were aware of how to assist people if they had a concern or a complaint to make.

End of life care and support

- The registered manager told us they were not providing end of life care for anyone at present. However, they said they were developing an appropriate policy and procedure to put in place for when this became necessary.

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

Inspected but not rated.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The person we spoke with was very positive about the registered manager and staff that supported them. They said, "The manager is very approachable and often comes to see me to see how I am doing." The person said they felt listened too and able to approach the registered manager and other staff about any concerns they may have. They said there was an open and transparent culture at the service. The service provided was person centred and met the needs of the person they supported.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- It was clear from our discussions with staff that morale and motivation was high. We saw that staff were well supported via one to one supervisions. Regular spot checks of staff practice were undertaken by the registered manager that looked at how staff were working practically with the person as well as monitoring their performance.
- The registered manager told us all new staff were expected to work towards a vocational qualification as they believed in investing in staff to ensure a good quality service was being delivered.

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

- The registered manager told us that due to currently only supporting one person, they had not yet implemented their feedback questionnaires that were intended to check and audit the work undertaken at the service. They had templates that could be used for auditing and checking purposes but at the time of inspection they were just checking care records during care plan reviews.

Continuous learning and improving care

- We saw policies and procedures in place that covered all aspects of the work undertaken at the service and this provided good support and guidance to staff regarding processes and good practice related to their work.