

The Human Support Group Limited

The Human Support Group Limited - Heywood

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?

Good 

Is the service well-led?

Good 

Overall summary

The Human Support Group Limited – Heywood is also known as The Homecare Support Agency and is registered to provide care and support to adults living in their own homes. The service provides personal care mainly to elderly people living in Oldham and Rochdale.

We last inspected this service on 7 January 2014 and found the regulations we assessed were being met.

The provider was given 48 hours' notice of this inspection which took place on 26 January 2015.

The agency had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting

Summary of findings

the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. However, the registered manager had been seconded to another part of the company and a manager had been appointed to ensure the agency continued to operate according to current legislation.

Safeguarding procedures were robust and members of staff understood their role in safeguarding vulnerable people from harm.

We found that recruitment procedures were thorough so that people were protected from the employment of unsuitable staff.

Risks to people who used the service and members of staff were identified and managed safely.

Members of staff responsible for assisting people with their medicines had received training to ensure that medicines were handled safely.

People who used the service told us that they usually received their care from a team of care workers whom they knew. People said the care workers were reliable and mostly arrived on time.

Members of staff told us they were supported by management and received regular training to ensure they had the skills and knowledge to provide effective care for people who used the service.

Discussion with care workers confirmed that they understood the importance of promoting people's privacy and dignity. People who used the service told us they were treated with respect and the care workers were friendly.

We found that people who used the service usually received their care from a regular team of care workers. People's care records were kept up to date so that staff had up to date information about the help and support people required.

Although the people who used the service told us they were satisfied with the care provided they felt confident to make a complaint if necessary.

People who used the service told us that the office staff were polite and helpful. They also said that they would recommend the agency to other people.

Arrangements were in place for the manager and senior managers within the company to monitor all aspects of the service provided.

Summary of findings

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.

People who used the service told us they felt safe when they received care in their own homes from staff employed by The Human Support Group.

Members of staff knew the action they must take if they witnessed or suspected any abuse.

Any risks to people who used the service and members of staff were identified and managed safely.

Good



Is the service effective?

The service was effective.

Members of staff were supported to access training appropriate to their role including nationally recognised vocational qualifications.

People who used the service were involved in planning the care and support they needed.

Good



Is the service caring?

The service was caring.

Members of staff understood the importance of promoting people's privacy and dignity.

People who used the service told us that care workers were friendly and respectful.

Good



Is the service responsive?

The service was responsive.

People who used the service told us the care workers were reliable and stayed for the time allocated.

People's care plans were reviewed regularly to enable members of staff to provide care and support that was responsive to people's needs.

The complaints procedure was included in the service user guide. People who used the service said that they knew how to make a complaint and felt confident to do so if necessary.

Good



Is the service well-led?

The service was well led.

Members of staff told us the manager was approachable and supportive and they enjoyed working for the agency.

People who used the service told us they would recommend the agency to other people.

There were systems in place for assessing and monitoring the quality of the service provided.

Good



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Detailed findings

Background to this inspection

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

This inspection took place on 26 January 2015. The provider was given 48 hours' notice because we needed to ensure that the manager would be present during the inspection visit. During the inspection we spoke with the performance director, the manager, the quality monitoring officer and 2 care workers. We also spoke on the telephone with two people who used the service and the relatives of three people who used the service.

The inspection team consisted of one 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 a domiciliary care service.

The expert by experience telephoned six people who used the service and the relatives of 2 people who used the service.

Before our inspection visit we reviewed the information we held about the service. This included notifications the provider had made. We did not request any further information from the provider prior to this inspection. We contacted the local authority safeguarding team and the commissioners of the service to obtain their views about the service.

During our inspection we looked at the care records for six people who used the service including the medication administration records. We also looked at the training and supervision records for four members of staff, minutes of meetings and a variety of other records related to the management of the service.

Is the service safe?

Our findings

All the people who used the service and their representatives with whom we spoke told us the service was safe and visits were not missed. One person said, “I feel safe with the carers, they know me now.” Another person said, “There are sufficient staff and I have the same ones all the time and it helps me to keep my independence.” The relative of one person said, “My mother is safe when the carers come into our home.”

Discussion with the manager and the training records we looked at confirmed that all members of staff had received training in safeguarding vulnerable adults from harm. We discussed safeguarding with two care workers and found they had a good understanding of safeguarding procedures and were clear about the action they must take if abuse was suspected or witnessed.

Information we received from the local authority prior to this inspection stated they had no concerns about this service.

Members of staff told us the whistleblowing procedure for reporting poor practice was included in the staff handbook. They said they would not hesitate to report any concerns about the practise of their colleagues and were confident that any concerns would be acted on immediately. The manager confirmed that any information she received through the whistle blowing procedure would be investigated without delay.

We looked at the care plans of five people who used the service. These plans included risk assessments in order to

identify any risks to people who used the service and care workers such as moving and handling and the environment. This meant that appropriate action could be taken to ensure that identified risks were managed safely.

Policies and procedures for the management of medicines were in place. These provided members of staff with information about their role and responsibilities when helping people who used the service with their medicines. People were assisted with their medicines only if this was part of their care package. Members of staff responsible for administering or prompting people to take their medicines had received appropriate training in order to ensure this was carried out safely. We saw that the medicines administration records returned to the office after use included relevant details about the medicines and the time to be taken. Care workers had signed the medicines administration records to indicate that people had taken their medicines as prescribed.

We looked at the files of two members of staff appointed within the last year. These files included an application form with details of previous employment and training, an interview record, two written references and a criminal records check from the Disclosure and Barring Service. These checks helped to ensure that people who used the service were protected from the employment of unsuitable staff.

There were policies and procedures in place for the prevention and control of infection. Members of staff told us they had received training in infection control and were supplied with protective equipment such as gloves and aprons. One person said, “The staff are respectful and always wear aprons and gloves.”

Is the service effective?

Our findings

Discussion with people who used the service and their representatives confirmed that the care provided was effective. One person said, “The carers know what they are doing and my regular carer knows exactly what she is doing.” Another person said, “They [staff] seem to know what they are doing and seem to have enough training.” The relative of one person told us that care workers had enough training for the care they provided.

It was clear from the information contained in the five care plans we saw that people who used the service and their representatives had been involved in the care planning process. Where possible people who used the service had signed their care plan to indicate their agreement and consent to the care provided. One person said, “The carers are very good at asking for my consent before helping with personal care.”

Care workers were also responsible for preparing meals for people who used the service if this was included in the care package. One person told us that agency care workers helped her with meals and arrived on time.

One care worker explained that any equipment that was required in order to provide effective care for people who used the service was provided. Equipment required for such things as moving and handling procedures was supplied following an assessment by an occupational therapist.

Two care workers told us about the training they received. This included moving and handling, fire prevention,

safeguarding vulnerable adults, infection control, health and safety, food hygiene, first aid awareness, privacy and dignity, equality and diversity, dementia, management of medication and nationally recognised qualifications in health and social care. These two care workers told us that all members of staff received training annually in order to ensure they kept up to date with current practice.

The manager explained that new employees were required to complete a structured induction programme. This involved attending mandatory training before new staff had any contact with people who used the service. New employees then shadowed a more experienced care worker for 18 hours or until the new member of staff was competent to work alone.

The manager showed us records which clearly identified when members of staff had completed training and when further training was required.

We looked at the personnel files of five members of staff and found they contained records of the training they had completed. This confirmed that a rolling programme of training was in place in order to ensure that all members of staff were kept up to date with current practice.

There was a system in place to ensure that all members of staff were supported through regular supervision meetings with their line manager. Records confirmed that at these meetings work related issues and training were discussed. The two members of staff we asked both said they found these meetings helpful and gave them the opportunity to talk about anything relevant to their work with the agency.

Is the service caring?

Our findings

People who used the service told us the care workers were friendly and treated them with respect. One person said, “My carers are very caring and they are now friends as we have developed a relationship over time” Another person said, “Most of the staff are friendly you can always have a laugh and a joke with them” The relative of one person told us the service was brilliant and said, “They do everything they can and more besides.”

The care workers we spoke with understood the importance of promoting people’s privacy and dignity. All the people we asked told us that members of staff treated them with respect. One person said, “The carers are very friendly and treat me with dignity and respect when carrying out personal care, the regular team know my likes and dislikes.” Another person said, “The staff are lovely and always polite.” The relative of one person said, “The carers are very friendly and treat mother with dignity and respect in everything they do for her.”

A male care worker explained that he mostly provided care for male service users however; permission was always sought from ladies who used the service before he provided care to them.

Arrangements were in place to ensure that the care and support needs of people new to the service could be met. The manager explained that social services had determined the care to be provided before the referral to

The Human Support Group was made. Although care was usually provided within 48 hours risk assessments were carried out by a senior member of staff before care was provided. The care package and risk assessments were also reviewed within the first week in order to ensure that the person’s care and support needs were being met.

The manager explained that people who paid for their own care were visited by a senior member of staff to discuss the help and support they needed. This ensured that detailed information was obtained about each person’s individual needs in order to determine whether these could be met by care workers from the agency. People were also asked about their individual preferences so that care workers knew how best to meet people’s needs.

People who used the service were supplied with a copy of the service user guide which provided them with detailed information about the care and services offered by the agency. This meant that people using the service and their relatives knew what to expect from the agency and who to contact for further information if necessary.

We looked at the care plans of five people who used the service. These plans contained information about people’s care and support needs and their individual likes and dislikes. There were also clear directions for staff to follow to ensure people’s needs were met. This enabled staff to provide care which was person centred and promoted people’s dignity and independence.

Is the service responsive?

Our findings

People who used the service explained that they usually received their care from a regular team of care workers. This meant that people were cared for by staff who knew their individual needs and preferences. The relative of one person told us that they didn't mind having different care workers because they were all polite and completed the required care and support tasks. One person said, "We have a rota of carers who come every week."

All the people we asked told us the care workers were reliable and had never missed a visit. One person said, "Someone from the office always rings if the carers are going to be late." Another person said, "I know all the staff and they turn up on time if they are late they are usually held up by the weather or at the previous call." People who used the service also told us that the care workers stayed for the allocated length of time. One person said, "The carers are not always on time but they stay the correct amount of time and always ask about my personal care needs."

Care workers were required to complete a record of the care and support provided at each visit. These records were kept with the care plan in the person's own home in order to ensure all staff had the information they needed about the care provided and any recurring difficulties. A duplicate copy of each person's care plan was also stored securely at the office.

We saw that care plans were reviewed every six months or when the needs of the person changed. This meant that care workers had up to date information about the help and support people required. All the people we asked told us they been involved in reviews of their care plan within the last year. One person said, "Someone from the office calls every so often to review my care plan." Another person said, "My care plan was reviewed just before Christmas." A family member explained that they were present when their relative's care plan had been reviewed.

People who used the service and their relatives were encouraged to express their views about the agency by completing a survey following a review of their care plan. Comments people had written on their surveys included: 'The carers are friendly', 'My carer is always on time and very helpful' and 'The care assistants who attend my mother are excellent'.

A copy of the complaints procedure was included in the service user guide. All the people we asked told us they knew how to make a complaint and felt confident to do so if necessary. One person said, "Not once have I to complain about the service" Another person said, "I would call the office if I had any complaint with the service." The relative of one person told us that last year they had phoned the office to complain about the timekeeping of care workers and the issue had been satisfactorily resolved.

Is the service well-led?

Our findings

The members of staff we asked told us they had a good relationship with the manager. A senior care worker said, “I can talk to her about anything.” Another care worker said, “The manager is fantastic, she does a good job, listens to what you say and takes on board what you need.”

Three people who used the service told us they would recommend the agency to other people. One person said, “The management seem to lead the staff well.” Another person said, “If there are any problems I ring the office and someone always rings me back, the office staff are very polite.”

Arrangements were in place for all aspects of the service to be regularly monitored. An audit team of senior staff from within the company visited the agency every six months to check that appropriate management procedures were in place. This audit included, staff recruitment procedures, training, safeguarding, the arrangements in place to ensure that sufficient numbers of staff were employed, staff supervisions and staff meetings. We were shown the most recent audit completed in January 2015. This audit confirmed that management procedures were thorough.

The manager, senior care workers and care co-ordinators were responsible for monitoring the performance of care workers by carrying out spot checks. These checks involved

visiting people who used the service to check that care workers arrived on time, were wearing their uniform and followed correct procedures. Records of these checks were seen in the files of three care workers. A telephone monitoring system was also used to check that care workers stayed at a person’s home for the allocated length of time.

The manager explained that staff meetings were routinely held every four months. At these meetings any care and management issues were discussed. However, staff meetings were also arranged when issues arose which required further discussion.

Information received from the local authority commissioning team prior to this inspection confirmed that there were no concerns about how the agency was being managed.

The manager had been in post since December and expressed her intention to register with the Care Quality Commission within the next few weeks.

Senior managers from within the company were also providing the new manager with any support and advice she needed in order to ensure the agency was well-led.

The performance director told us that ISO accreditation had been achieved for the quality audit and management systems in place throughout the company.