

# Hilton Nursing Partners Limited

# Hilton Nursing Partners Limited

## **Inspection report**

Unit 6 Highpoint Business Village,

Henwood

Ashford

Kent

**TN248DH** 

Tel: 01233321110

Date of inspection visit:

30 June 2022

01 July 2022

04 July 2022

08 September 2022

Date of publication:

09 November 2022

#### Ratings

Overall rating for this service	Outstanding ☆
Is the service safe?	Good
Is the service well-led?	Outstanding 🌣

# Summary of findings

### Overall summary

#### About the service

Hilton Nursing Partners Limited provides personal care to people in their own homes. The service provides short term support to people who have been discharged from hospital, to support them to re-adjust to living at home. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of our inspection, the service was providing support to 114 people.

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

People and their relatives gave us positive feedback about the service. We found the service continued to be exceptionally well-led. Staff and the registered manager continued to implement new systems and processes to create innovative solutions to support people to be discharged from hospital more efficiently. The provider was part of a working group to create an ethical recruitment system to support effective recruitment of overseas staff.

Staff and the registered manager spoke with passion and pride about their roles. Staff had been supported to develop and grow within their roles which gave them purpose. People were at the heart of the service, and systems and processes were implemented to make their experience as positive as possible. Staff went over and above to support people to re-integrate into their communities.

There were systems and processes in place to protect people from the risk of abuse. When things went wrong, there were effective methods to learn and implement improvements. Risk assessments were comprehensive and contained enough information for staff to provide safe care. Staffing was assessed on a daily basis and packages of care to people were only supported when there were sufficient staff to meet people's needs.

People were supported to have maximum choice and control of their lives and staff supported support them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

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.

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

#### Rating at last inspection

The last rating for this service was outstanding (published 19 February 2018).

#### Why we inspected

We received concerns in relation to the management of incidents and training of staff. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has not changed based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Hilton Nursing Partners Limited on our website at www.cqc.org.uk.

#### 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?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Outstanding 🌣
Is the service well-led?  The service was exceptionally well-led.	Outstanding 🌣



# Hilton Nursing Partners Limited

**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 four inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. 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 five people who used the service and seven relatives about their experience of the care provided. We spoke with ten members of staff including the provider, registered manager, team leaders, field assessors, and care workers. We reviewed a range of records. This included twelve people's care records and multiple medication records. We looked at five 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.



# Is the service safe?

# **Our findings**

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

At our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People were protected from the risks associated with their care. Staff provided care and support in a way that was safe but did not place unnecessary restrictions on people's freedom.
- The staff promoted a positive risk-taking approach when care was provided. People were encouraged to do things for themselves and to make choices about their own care. Risks were explained to them and staff supported people where needed. Care plans and risk assessments supported this. A person told us, ""I do, they change my catheter, they know what they are doing, what can I say? I am one happy bunny."
- People's care records were thoroughly completed, addressed risks to people's safety and contained sufficient guidance for staff to support them in providing safe care. A relative told us, "They are so caring, look out for any signs, relative had a small pressure area when they came out of hospital, and they were on it straight away, got it done and dusted."
- Risks to the environment had been assessed and mitigated. For example, each person's home was risk assessed before support started and staff worked with the person to mitigate any risks identified.

Learning lessons when things go wrong

- There were systems in place to learn and improve when things went wrong. The registered manager investigated each incident and put plans in place to improve the service. This included sharing learning and training with staff for example, in relation to the handling of people's finances, reminding staff how to do this following the process which safeguarded them and the person.
- Staff and the registered manager had learnt lessons from previous failed discharges and put new processes in place to better support people. This included sourcing support for people from a wide range of organisations including befriending services, the church, charitable organisations, and any other support people needed.

Systems and processes to safeguard people from the risk of abuse

- There were effective systems in place to safeguard people from the risk of abuse.
- People and their relatives told us they felt safe with the support they received. Relatives told us, "Yes, I do think my relative is safe, they are so very caring," and, "Oh yes, 100% safe."
- Staff had training in safeguarding and understood their responsibilities to report any concerns. When concerns had been identified the registered manager worked with the local authority safeguarding team to implement improvements.

#### Staffing and recruitment

• People were supported by sufficient numbers of staff. Staff competency and training was assessed and

updated regularly by the training department overseen by the registered manager.

- Staffing was assessed on a daily basis by team leaders and this was reported back to healthcare professionals to help assess how many people Hilton Nursing Partners could support.
- When new packages were agreed, full support was included to ensure people's needs were met, for example providing support with every aspect of the person's care. This was then reviewed and reduced as necessary but enabled managers to be sure each person's needs could be met.
- Relatives told us, "Definitely enough staff to cover our needs," and, "Yeah, I been quite happy with staffing," and, "Yes, enough staff."
- Staff continued to be recruited following safe recruitment processes. Before each staff started working, a Disclosure and Barring Service (DBS) was completed. These checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

#### Using medicines safely

- People received their medicines safely. Staff had received training in the safe administration of medicines and their competency had been assessed. Staff were also observed supporting people with their medicines during checks of their practice. These were completed regularly by senior care staff.
- Electronic Medicines records were maintained which demonstrated people received their medicines in line with their prescriptions. These records were regularly reviewed to ensure errors were highlighted before they impacted people's health and safety. If a medicine was not administered the system would alert staff, meaning action could be taken quickly to rectify the error, limiting any risk to people.
- When people were discharged from hospital staff immediately undertook a risk assessment for people's medicines to assess how much support they needed in managing their medicines. Staff worked closely with GP's and pharmacist to make sure people had the medicines they were prescribed.

#### Preventing and controlling infection

- People continued to be protected from the risk of infection. Staff had access to personal protective equipment (PPE) within the community to make it easily accessible for staff.
- Staff completed regular training in infection control. Senior staff were responsible for completing checks on staff to ensure they were wearing PPE appropriately.

# 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.

At our last inspection we rated this key question Outstanding. At this inspection the rating has remained outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- Exceptional efforts were made by staff to support people to achieve excellent outcomes. For example, when a person had become isolated from their community staff worked to re-integrate them supporting them to access groups they had become disconnected from. This reduced their risks of returning to being socially isolated and made the person feel happy once more.
- Staff were able to share countless examples of instances where they supported people to re-gain their confidence and independence whilst being able to stay at home. For example, during the holistic assessment process, staff assessed people's wider support networks which included considering any support from a friends and family, to ensure support networks were robust enough. For example, a partner was assessed as needing additional support to enable them to support their partner after discharge. Staff sought the appropriate support to enable both people to remain at home in line with their wishes.
- Staff provided additional support to people to develop their numeracy and literacy skills. This enabled people to gain further skills and confidence to become more independent with their finances and have increased control of their day to day lives.
- Staff and people felt that the way the service was led was exceptional and distinctive. It's vision and values were imaginative; people were at the heart of the service. Staff praised the quality of the leadership; leadership which led to positive outcomes for all. All staff we spoke with were passionate about their roles and improving outcomes for people.

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

- There were high levels of satisfaction across all staff. The management team had provided a working environment where staff were motivated by and proud of the service. All felt they could build a meaningful career with this provider. Staff were supported and encouraged to work through the structured promotion scheme. Many staff had followed this process and reported significantly high levels of job satisfaction. This led to low staff turnover, consistent care for people and high levels of satisfaction with the care provided for people. Staff told us, "Staff are encouraged to grow and develop. They are a very good company to work for. Everyone matters. We have a lot of staff working for a long time.
- There was a system in place to acknowledge and reward staff that had gone over and above. Last month staff had been identified for their personalised care they delivered by supporting a person to have a facial, manicure and to support them to wash and blow dry their hair. The person's relative had told us this meant a lot to them, as they prided themselves on their appearance.

• People were able to feedback on the service through questionnaires in their welcome packs. This feedback was collated by staff and reviewed by the registered manager on a regular basis. Feedback was wholly positive, and where people had suggested areas for improvements these had been implemented. For example, following feedback staff went to the hospital and spoke with people prior to discharge to make them fully aware of the service and what support they would receive.

#### Continuous learning and improving care

- Staff and the registered manager worked to develop innovative ways to support their stakeholders with new pathways to accelerate successful discharge for people who had a stroke. Staff developed a network of person centred support, this enabled people who had a stroke to return home quickly in a safe supported manner. Feedback on this service included, 'The Hilton carers are an integral part of this pathway and its success would not have been possible without their hard work, dedication and responsiveness.' This pathway has achieved excellent outcomes for people, and high levels of patient satisfaction. A person told us, "If it was not for Hilton staff, I would still be stuck in hospital."
- Exceptional systems continued to be in place to proactively improve the service, and how staff worked with external stakeholders. For example, the registered manager proactively identified areas which were causing delays or failed discharges and fed this back to their stakeholders to improve the discharge experience for people. The registered manager looked at patterns and trends which caused failed discharges and implemented a system to reduce the risk of these re-occurring. This enabled people to return home with a package of care that met their needs, in a safer and more efficient way. This helped to accelerate people's recovery.
- There was a strong emphasis on continuous improvement. The registered manager and staff proactively worked with the local authority to relieve hospital pressures and support relatives who may not have been able to care for their loved ones. During the COVID-19 pandemic staff took over a hotel to support people with Covid. They organised care and meals for people. This was to relieve hospital pressures and support relatives who may not have been able to care for their loved ones.
- People had sent feedback in the way of thank you cards to staff with positive feedback. These included; 'to the angels (carers) who helped my [loved one] at a difficult time. I cannot express my thanks enough for the angels who helped my [loved one] and myself they were so gentle and caring. [Loved one] could not have asked for more, they were very special people. Thank you so much for sending them to us,' and 'You had been visiting daily to get him up and his wife found it so helpful. Thank you for your help and care.'

#### Working in partnership with others

- The provider was working with external agencies to develop systems to promote ethical recruitment of overseas staff. This included developing a system to support staff to come to the UK and successfully settle into communities. This work was being fed back to the government to inform and support improvements and develop systems for other organisations to access.
- Staff and the registered manager had excellent working relationships with other healthcare professionals and organisations. Staff held daily calls to update other organisations on capacity and support people to be discharged from hospital in a safe and effective way.
- Feedback from healthcare professionals included; "We find that Hilton are professional, person centred, and work collaboratively with both the LA and NHS," and "They are always person centred and are committed to ensuring people are safe in their own homes."

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

• It was clear throughout the inspection that the registered manager, provider and staff were passionate about delivering good quality care. There continued to be clear processes in place to ensure each staff

member understood and fulfilled their roles. Managers completed regular checks with staff to ensure the service continued to develop and improve. This was demonstrated by the difference staff had made to people's lives.

- Staff understood their role and what was expected of them. They were happy in their work, were motivated and had confidence in the way the service was managed. All the staff we spoke with described being proud of where they worked.
- The staff team were very passionate about ensuring the people they supported received the highest quality care. Each staff member knew their responsibilities and there were clear lines of accountability across the service. Staff identified people who needed support and advocated on their behalf to make sure their lives improved.
- Since our last inspection, the service and individual staff members had been recognised through external and internal awards for their achievements in delivering high quality care. One staff member was successful in receiving a care recognition award and was invited to Downing Street to meet the Prime Minister. Staff had also received awards like 'The Best Newcomer Award and 'Rising Star' awards.
- All staff described an open and fair culture at the service. They told us they felt free to raise concerns should they have had any, and that the directors had an 'open-door' policy.

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 registered manager and provider understood their responsibilities in relation to duty of candour. This is a set of legal requirements that services must follow when things go wrong with care and treatment. They understood when to inform CQC and local authority of important events. Notifications had been submitted in a timely manner.