

Hands In Harmony Home Care Services Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Hands In Harmony Home Care Services Limited is a Domiciliary care service providing personal care to people in their own homes. At the time of our inspection there were 76 people using the service.

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.

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

People told us they were safely supported within the service. Systems and processes were in place to support people's safety. Recruitment procedures ensured that people were only supported by staff who were suitable to do so. There were sufficient staff to meet people's needs.

People received the support they required with their medicines. Staff worked consistently within the providers policy and procedure for infection prevention and control.

The management team ensure that checks and audits were in place and used effectively to drive improvements. Staff were supported through ongoing monitoring and good communication. Information was shared with staff to support in the delivery of good quality care.

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.

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 good (published 9 December 2017).

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?

Good 

The service was well-led.
Details are in our well-led findings below.

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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

This inspection was carried out by one inspector.

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 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 05 October 2023 and ended on 13 October. We visited the location's office on

05 October and made calls to people on 13 October.

What we did before the 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

During the inspection we spoke with 9 people who used the service, and one relative of a person who used the service. We also spoke with 7 staff members, and the registered manager. We looked at multiple records including care plans, risk assessments, training records and audits.

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. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People who used the service told us they felt safe when receiving support from staff. One person said, "Yes I'm in very safe hands." Another person said, "I have had a nightmare with a previous agency, but Hands in Harmony really know what they are doing." Another person said, "They make me feel comfortable and confident about myself."
- Staff we spoke with understood the signs of abuse and how to report them. Training had taken place in this area to ensure staff knew what to do.

Assessing risk, safety monitoring and management

- Risks had been appropriately assessed to make sure staff could work safely with people and manage the risks that were present in their lives. This included risks around the environment, medicines, mobility and infection control.

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 Mental Capacity Act (MCA).

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Staffing and recruitment

- Safe recruitment measures were in place. This included identity checks, employment references, and Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People told us there were enough staff working at the service, and that a consistent staff team arrived on time for their support. One person said, "They are on time, I get a phone call if they are going to be late for any reason." Call monitoring systems we looked at confirmed staff were consistent and timely in their care visits.

Using medicines safely

- People were happy with the support they received with the administration of medicines. Records we looked at confirmed that staff did this accurately and recorded the necessary information. Staff were trained in this area.

Preventing and controlling infection

- People told us staff used the appropriate personal protective equipment (PPE) and staff confirmed they were trained in infection control and had sufficient PPE stock.

Learning lessons when things go wrong

- Processes were in place for the reporting of any accidents or incidents and appropriate follow up action was taken.

- Staff meeting minutes showed that any issues and concerns were discussed.

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 Good. At this inspection the rating has remained 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

- People and relatives we spoke with told us the service was well run and provided good care. One relative told us, "I can't speak highly enough of them, the girls went the extra mile, the company did to, the communication book was always filled out in detail." One person said, "They have been flexible, I let the office know when I need the care, and they work around me."
- Staff told us the management team promoted a positive culture that was inclusive and achieved good outcomes for people.

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 understood information sharing requirements, and knew that when concerns had been identified, appropriate notifications should be sent to the CQC and the local authority as required by law.

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

- Managers and staff we spoke with were clear about their roles, and understood what was required of them. Office staff had defined roles and managed training and scheduling effectively for staff.
- Staff were confident in their roles. One staff member said, "I am 100% well supported and communicated with."
- The management team were knowledgeable about the skills of their staff team and the people they were supporting, and were clear about their own roles in managing the service in a way that met people's needs effectively.

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

- People felt well engaged with, and told us that communication from the staff and managers was good. One person said, "The office makes sure my care happens the way I want it to. They are very approachable, I'm very happy."
- People were encouraged to feedback both formally and informally. This included the use of questionnaire feedback forms. We saw the results were collated and were largely positive.
- Care plans outlined people's equality characteristics and staff understood people's needs and preferences

in this area.

Continuous learning and improving care

- Systems and processes were in place to ensure that all aspects of the service were monitored and checked to find any fault and make improvements. For example, audits took place on staff call timings and medicine administration.
- Staff we spoke with told us that regular spot checks and supervision took place to ensure standards were kept high, and feedback on their roles was provided.

Working in partnership with others

- The service worked in partnership with outside agencies and health and social care professionals when required, to ensure people's care needs were met.