

Hill-Escott Moreton & Young Hands Care Agency

Inspection report

Unit D Platform 88
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Tel: 01989566186

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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 ●

Summary of findings

Overall summary

We undertook an announced inspection on 5 April 2016.

We gave the provider 48 hours' notice of our intention to undertake an inspection. This was because the organisation provides a domiciliary care service to people in their homes and or the family home; we needed to be sure that someone would be available at the office.

The provider registered this service with us to provide personal care and support for people with a range of varying needs including dementia, who live in their own homes. At the time of our inspection 57 people received support with personal care.

There was a registered manager for this service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered providers and registered managers are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Staff we spoke with recognised the different types of abuse. There were systems in place to guide staff in reporting any concerns. Staff were knowledgeable about how to manage people's individual risks, and were able to respond to peoples' needs. People always received support from staff they knew, and we confident with. People were supported to receive their medicines by staff that were trained and knew about the risks associated with them.

Staff had up to date knowledge and training to support people. Staff always ensured people gave their consent to the support they received. The management team regularly reviewed how people were supported to make decisions. There were no applications to the court of protection to deprive people of their liberty.

People were supported to eat and drink well, when identified as part of their care planning. Relatives told us they were involved in the support for their family member. People and their relatives told us staff would access health professionals as soon as they were needed. We saw there was effective communication with people, staff and health care professionals.

People told us staff were caring and treated them with dignity and respect. Staff really knew people well, and took people's preferences into account and respected them. The management team were adaptable to changes in peoples' needs and communicated changes to staff effectively.

People and their relatives knew how to raise complaints and the management team had arrangements in place to ensure people were listened to and appropriate action taken. Staff were involved in regular meetings, training and one to one's to share their views and concerns about the quality of the service.

People and staff said the management team were accessible and supportive to them.

People said they were well supported by the staff and the management team. The management team monitored the quality of the service in an inclusive way. The management team ensured there was an open culture for people using the service and staff. The management team had systems in place to identify improvements and action them in a timely way.

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

People benefitted from support received from regular staff that knew their needs and managed their identified risks. People were supported by staff that knew how to support them in a safe way. People were supported with their medicines to ensure they had them as prescribed.

Is the service effective?

Good ●

The service was effective

People were supported by staff who were knowledgeable about how to support people. People received support from staff that respected people's rights to make their own decisions, where possible. People were supported to access health care when they needed to.

Is the service caring?

Good ●

The service was caring

People benefitted from caring, knowledgeable staff who listened to them. Staff encouraged people to be as independent as possible. Staff respected peoples' dignity and spent time with people they supported.

Is the service responsive?

Good ●

The service was responsive

People were involved in their care and support, which was regularly reviewed. People and their relatives were confident that any concerns they raised would be responded to appropriately.

Is the service well-led?

Good ●

The service was well-led.

People, relatives and staff felt supported by the management team. The management team monitored the service to ensure people received quality care.

Hands Care Agency

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 was planned to check 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 was an announced inspection which took place on 5 April 2016 by one inspector. The provider was given 48 hours' notice because the organisation provides a domiciliary care service and we needed to be sure that someone would be available.

We looked at the information we held about the provider and this service, such as incidents, unexpected deaths or injuries to people receiving care, this also included any safeguarding matters. We refer to these as notifications and providers are required to notify the Care Quality Commission about these events.

We spoke with five people, and one relative. We spoke with seven staff and two managers and the training manager. We also spoke with community district nurse who had supported people using this service.

We looked at the care records for seven people including medicine records, three staff recruitment files, training records and other records relevant to the quality monitoring of the service.

Is the service safe?

Our findings

People we spoke with said they felt safe because they were supported by staff who knew them well. One person said about the staff, "I always know who is coming and when, it's a big relief." Another person told us, "I never have a carer I haven't been introduced to, it's brilliant." A relative said, "I know them all well, including the bosses, they always listen to us." Relatives told us staff supported their family member's well-being. For example, one relative told us that staff always noticed if their family member had sore skin, and would take the appropriate action straight away.

The management team explained their responsibilities to identify and report potential abuse under the local safeguarding procedures. All the staff we spoke with had a clear understanding of their responsibility to report any concerns and who they could report it to. They told us training on potential abuse and safeguarding concerns formed part of their induction and was regularly updated. One member of staff explained this was also discussed through other training so it was always a part of everything they did.

People we spoke with told us were assessed by the management team and worked with them to arrange the support they needed. This included identified risks to their safety and welfare, for example preventing sore skin, and supporting people to mobilise safely. Staff gave examples of how they managed risks to people while maintaining people's independence as much as possible. For example, One staff member told us about how one person needed to have their belongings in the same place consistently so they could access them as they needed to. We saw there was clear guidance for staff within the care plan, and we spoke with the person and they confirmed that staff always left items so they could access them when they were on their own. Staff we spoke with said they read people's care plans so they were aware of what support the person needed. They also looked at their daily notes so they were aware of what support people received. One member of staff said, "I always catch up on what's been happening every time I go in." Staff were aware of how to manage people's risks and how they were reflected in the risk assessments for each person.

People told us consistently there were only a small team of staff who supported them. They said staff arrived when they were meant to and would let them know if there were any delays. One person told us, "I always know if they are running late, I am never left wondering." Staff and the management team said they had enough staff to meet the needs of people using the service. The management team said they regularly delivered the support for people using the service. This ensured that they really knew people well which improved the delivery of safe care. During our visit we saw the manager went out to support staff and people using the service as they were needed.

People told us they were always supported by staff they knew. The management team told us staff were always introduced to people before they provided care. A member of staff said, "We always meet the person before we support them." Staff told us they had regular calls and they provided continuity of care. All the staff we spoke with said it was important to the people they supported that familiar staff visited to support them.

We saw records of checks completed by the management team to ensure staff were suitable to support

people before they started work at the service. Staff told us they completed application forms and were interviewed to check their suitability before they were employed. The registered manager checked with staff members' previous employers and with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions. This information supported the registered manager to ensure suitable people were employed, so people using the service were not placed at risk through recruitment practices. Many of the staff had been with the service for a long time. We saw there were procedures in place to ensure staff had their DBS reviewed regularly.

Some people needed support with their medicines. The management team said this was discussed with people using the service and they were included in decisions about how they were supported. Most people using the service at the time of our visit managed their own medicines. One person we spoke with said that staff were very good at applying their creams when they were needed. Another person told us, "They are very hot on getting my creams right, really fantastic." We saw people's plans guided staff with how to support people with their medicines. Staff told us that these plans were updated when needed and they were aware of any changes. Staff said they had received training about administering medicines and completing the required documentation and their competencies were assessed. They told us they felt confident when administering medicines to people. The management team said they regularly reviewed people's medicine records to ensure that they were completed correctly when they completed people's reviews. We did not see up to date records of medicines held at the office so we were unable to check people's medicine records. The management team said they regularly went to people's homes and checked the records there. All the staff we spoke with said they would raise any concern about people's medicine records if they were not completed correctly.

The training manager explained that they were updating the medicine records they were using. Staff were in the process of being trained, and the records were being implemented as staff were being trained. The new records gave clearer guidance to staff and were in line with current pharmaceutical guidance. The training manager had undertaken to complete regular audits during the implementation to ensure the new records were completed correctly.

Is the service effective?

Our findings

People we spoke with were confident that staff knew how to support them. One person told us about staff, "They know what they are doing, they are all well trained." A relative said, "Can't fault them, they are very able."

Staff told us that they had received an induction before working independently with people. This included training, reading people's care plans, and shadowing with experienced staff. Staff said they were well supported and the management team would always come out and support them if they had any concerns. Staff we spoke with said they had received the training they needed to support people effectively. Staff told us they felt well supported and had regular supervisions that included observations during their work practice.

There was a designated member of staff who provided training for staff. One member of staff said that this was really useful because if they did not feel confident with any aspect of training they could discuss this with the trainer on a one to one basis. Another member of staff said that attending training in small groups of staff enabled best practice discussions to take place and increased their skills. The training manager said they were able to improve the training by relating the knowledge to the specific role for staff at the service. For example the training manager had linked Mental Capacity Act 2005 (MCA) training with the training they delivered around caring for people with a dementia illness. They told us this helped staff to understand the training in relation to their practice. Staff and the management team said this was really useful and relevant to their role.

The 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 when this is in their best interests and legally authorised under the MCA. We checked whether the service was working within the principles of the MCA. Any applications to deprive someone of their liberty for this service must be made through the court of protection.

People told us staff asked as they went along if they were in agreement with their support. One person said, "They (staff) always wait for agreement from me." Staff we spoke with explained about people's right to consent to their care. They had an understanding of the MCA, and had received relevant training about this. Staff told us they always ensured people agreed to their care before they supported them. Staff were aware of who needed support with decision making and who would be included in any best interest decisions for people. The management team had an understanding of the MCA and were aware of their responsibility to ensure decisions were made within this legislation. For example, we saw where one person was unable to make some decisions about their care a best interest decision had been reached involving their family and relevant professionals.

The registered provider had not made any applications to the Court of Protection for approval to restrict the freedom of people who used the service. They were aware of this legislation and were happy to seek advice if they needed to.

Some people we spoke had help with shopping, cooking and meal preparation as part of their care needs. One person explained that they made their choices about what they ate and staff helped them get it ready. Another person said that staff always left them a drink where they could access it so they could drink enough to keep them well. Staff we spoke with knew what level of support each person needed.

People told us they received support with their all aspects of their health care when they needed it. One person said, "They (staff) arranged for someone to come in and help me with my balance, they are all so helpful." Staff had involved other health agencies as they were needed in response to the person's needs. For example, one member of staff told us they often liaised with the community nurses to ensure people's sore skin was treated. Staff we spoke with said they had regular contact with the doctors and community nurses. We saw each person had their health care needs documented, and staff could describe how they met those needs. We spoke with a member of the community nursing team, they said staff were really proactive and would contact straight away if they had any concerns.

Is the service caring?

Our findings

People and their relatives said staff were kind and caring. One person said about the staff, "Very good in every way." Another person told us, "I am very happy, they (staff) are all so wonderful and caring." A further person said about staff, "They are all fantastic, nothing is too much trouble." One relative told us, "We know them all really well, and they know us."

People said they were happy with the support they received. People told us they received support from regular staff who knew them and their needs well. The management team told us they always checked to see if the people were happy with the support from their staff team. They said each person had a small team who supported them so they always had support from someone they knew. This reassured people that staff knew their needs and were familiar to them. One person told us, if staff were not as good as expected the management team took quick action and the situation was addressed. The management team would provide the support for people when needed as they knew all the people really well. They understood that people needed to build relationships with staff.

People said staff supported them to make their own decisions about their daily lives. One person told us, "They take the stress out of everything." Another person said, "They are all so helpful, they will do whatever I ask." Relatives we spoke with said they were involved with their family members care planning and they were listened to. Staff we spoke with said they spent time with people to support them to make their own choices. One member of staff told us they would explain one person's options so they could make an informed choice in their own time.

People said staff supported them with dignity and respect. One person told us, "They (staff) are not invasive; they will do what I struggle with but help me to do what I can manage." They went on to say how much they valued their independence and confirmed staff respected how they felt. Another person explained how staff always encouraged them to be as independent as possible, and how that increased their feeling of self-worth. One member of staff explained their ethos of how they supported people. They said that they would encourage people they supported to help them to do small household tasks, such as washing up or making the bed. They went on to say how they could see the benefit to people when they could do this, how it supported people's dignity. Staff we spoke with had a good awareness of people's human rights. They explained how they treat people as individuals and value their independence as much as possible. One member of staff said they supported people to have as much choice as possible with everything they do. One member of staff said, "We don't want to invade, they (people who use the service) are still in control, we like to involve not take over." Another member of staff explained how important it was to them to help people stay in their own home for as long as possible, "It's where they really want to be."

Is the service responsive?

Our findings

People we spoke with said they were involved in decisions about their care. One person said, "I was involved with my care plan, they talked it through with me and we agreed what I needed." Another person told us, "They always ask me what I want doing, and we agree a plan." A further person said the management team regularly contacted them to check that everything was satisfactory. They said "They call or pop in for a chat." Relatives told us they had been involved in sharing information about their family member from the beginning of the service. People we spoke with said staff understood their needs and provided the support they needed.

Staff we spoke with could describe how they met people's needs and told us people's needs were clearly documented in their care plans. They explained that they knew people really well and were given the information they needed to support people. One member of staff told us how they met a member of the management team at the beginning of people receiving a service. The management team would talk through the care a person needed with them and the person, and their relatives where possible and they would agree the support together. We looked at care records and could see people's likes and dislikes were recorded for staff to be aware of. People we spoke with confirmed that their individual needs were met. Where more complex needs were identified, staff were aware of how to support the person. Staff we spoke with said they could contact the management team and they would come out straight away and support them if they needed them to.

Staff told us that communication was very important and they were always kept up to date with any changes in the support people needed. Staff also told us that plans were updated quickly if there were any changes. The management team said communication was important to them, for staff and people using the service. People told us they could contact the management team at any time and they would listen and support them. Relatives we spoke with said that staff would take action if they had any concerns and they were reassured by this.

People we spoke with said they were supported by the same staff who always spent the correct amount of time with them. People told us they received support that was flexible to their needs. One person said, "I sometimes need extra time and they always sort it for me." Staff told us they were able to contact the management team if someone needed different arrangements and they would listen and take action straight away. For example, one staff member explained how one person sometimes needed additional visits when they were unwell. We saw these visits had been put in place and the person had the support they needed.

People we spoke with told us they had regular reviews of the care they received. People felt able to say if anything around the support they received needed changing or could be improved. One person said, "It works on every level, I am very satisfied." All the people we spoke with told us nothing needed improving.

One person said they were asked to share their views about their experience of the service and the quality of their care through satisfaction questionnaires. The management team explained that 40 questionnaires

were sent out to a randomly selected list of people using the service. We saw the results of these questionnaires were positive. For example 100% of the questionnaires returned showed that people felt confident and secure and staff understood their individual needs. We saw where there were any concerns raised the management team had followed up with a review to discuss the concern.

The people we spoke with said they felt comfortable to raise any concerns, and knew who to speak to. One person said, "I would be happy to complain if I needed to, the managers are all really approachable." People explained they were confident to discuss any concerns about all aspects of their care provision with the management team. Relatives said they were confident to speak to the management team if they had any concerns. One relative explained that they knew the management team really well because they visited them so regularly. There were clear arrangements in place for recording complaints and any actions taken. There had been no complaints recorded over the last twelve months at the time of our inspection.

Is the service well-led?

Our findings

People we spoke with said the service was well managed. One person said, "They are well managed and organised." Another person told us about the management team, "They work well together and we have good communication." One relative said, "The bosses do a good job."

The management team knew all of the people who used the service and their relatives well. They were able to tell us about each individual and what their needs were. They all regularly supported people with their care needs. The management team said this helped them ensure that people received safe, high quality support with their health and wellbeing. They told us the service worked as a big team, like an extended family. One of the management team explained that the little extra's made all the difference. For example, spending time listening to the person and remembering all the details such as what was happening with their family helped people feel well supported and respected. We heard conversations throughout our inspection which showed how well the management team knew people who used the service.

The management team completed regular checks to ensure the quality of care. For example we saw care plans and risk assessments were regularly reviewed. The management team had identified where improvements were necessary, ensured these improvements were completed in a timely way. For example, we saw medicine records were in the process of being updated to improve how medicines were managed. We saw there was on-going monitoring in place to ensure the new system worked.

Staff told us they always reported accidents and incidents. The management team investigated the accidents to ensure any actions that were needed were made. The management team explained how they would review through discussion with people who used the service and staff to resolve any on-going actions.

Staff said they were supported by the management team. One member of staff said about the management team, "They are all very approachable, and they will come straight out if we need them to." Staff told us they had regular meetings to discuss how they supported people. Another member of staff told us, "We are a close team and always know what's happening." Staff also said they attended training with the training manager and they appreciated the opportunity for practice discussions this afforded. A further member of staff said, "We come away from training with a clear understanding of what we need to do." Staff told us they had regular supervision meetings and they were able to share information and ideas, they said they felt well supported and listened to. For example, staff had discussed concerns about the length of one person's visit, we saw the management team had actioned the concerns appropriately. Staff told us how any compliments were always passed on so they felt valued and appreciated.

Staff said the management team were really supportive. One member of staff explained how the management team had adapted their work schedule to meet their needs so they could balance their responsibilities. They told us that the management team were very, "Involved" with people using the service which helped them understand if staff had any concerns. Staff felt this was really good and all the staff we spoke with said they were well supported.

