

Midshires Care Limited

Helping Hands Blackpool

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 ●

Summary of findings

Overall summary

About the service

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats. At the time of the inspection the agency supported 14 people.

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 we spoke with commented positively about the agency. For example, one person said, "They are the best, always on time and with a smile." Staff were recruited safely and were deployed to suit specific needs of people. Staff demonstrated a good understanding about safeguarding people from the risk of abuse and training was provided. Staff managed medicines according to national guidelines. Support for people was planned to ensure the persons needs and wishes were considered. Risks were assessed in the individual homes and person centred to ensure people were protected and could be supported safely. Staff were provided with personal protective equipment to protect people and themselves from the spread of infection. Only appropriately trained staff managed people's medication needs.

People received support with their healthcare and nutritional needs. They 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. Staff training was ongoing and comments from staff were positive about access and continued access to courses. Staff we spoke with confirmed this.

Staff were kind, considerate and caring towards people. Staff and the registered manager asked people for their views about their care and respected the decisions they made. The service protected people's privacy and dignity and promoted their independence.

The service had a complaints procedure which was made available to people they supported. People we spoke with told us they knew how to make a complaint if they had any concerns.

The management team had auditing systems to maintain ongoing oversight of the service and make improvements where necessary. Quality assurance processes ensured people were able to give their views of the service and improvements made when they were identified.

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

Rating at last inspection

The service was registered with us on 23/03/2021 and this is the first inspection.

Why we inspected

This was a planned first inspection based on their registration.

We looked at infection prevention and control measures under the Safe key question. We look at this in all inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Follow Up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Details are in our safe findings below

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below

Good ●

Helping Hands Blackpool

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 Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The 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.

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

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.

What we did before the inspection

We reviewed information we had received about the service since their registration. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they

plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke with four people who used the service about their experience of the care provided. In addition, we spoke with three members of staff, the registered manager and area manager. We looked at a range of records. This included two people's care records, two staff recruitment files, training records, medication records and audits of the service.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at their quality assurance systems.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and their human rights were respected and upheld. Effective safeguarding systems were in place and staff spoken with had a good understanding of what to do to ensure people were safe in their own homes.
- People told us they received safe care and had no concerns about their safety. One person said, "We feel safe with the agency and are glad they come to look after us to keep us safe."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager had identified and managed risks to people's safety. People's care records included guidance for staff about how to support people safely in their own environment.
- The registered manager reviewed risk assessments if people's support needs changed to ensure they gave staff accurate and up to date information. This was confirmed through documentation we looked at.
- The registered manager reviewed incidents to ensure risks were reassessed to prevent reoccurrence where possible and update any actions that were identified. Regular audits were completed, and lessons learned were shared with staff to improve the service.

Staffing and recruitment

- The registered manager ensured appropriate staffing arrangements were in place to meet the assessed needs of the people in a person-centred and timely way. A staff member said, "The office is very good, and we know the rotas are organised so well."
- Effective recruitment procedures were in place. This ensured people would be supported by staff with appropriate experience and character and checks were thorough. Staff confirmed this when we spoke with them.

Using medicines safely

- The registered manager had good systems and procedures to manage medication safely for people. They trained staff and regularly checked medication administration was safe and act on any discrepancies through their auditing systems which we looked at.
- Care plans clearly set out when and how to support people with their medicines. Staff training documents highlighted only trained staff administered medicines for people and staff confirmed this.

Preventing and controlling infection

- We were assured that the provider was preventing visitors to their office from catching and spreading infections.

- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the office premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The registered manager and senior staff carried out a thorough assessment of people's needs before agreeing to provide their support and care. People and their families were included in developing their needs assessments. This was confirmed from talking with people. One relative said, "We were involved from the start to make sure the care suited us as well as the agency."
- The management team continued referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported staff to ensure people received effective and appropriate care which met their needs.
- Peoples rights were protected. Policies and the initial care assessment supported the principles of equality and diversity.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and carried out their roles efficiently. Staff spoken with explained training was provided and they were supported to attend courses relevant to their roles.
- Staff told us they felt supported by the registered manager and received one to one supervision on a regular basis. Records looked at and staff spoken with confirmed this.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- Care plans detailed where people may need support to monitor health needs and where they require support to attend any healthcare appointments and what risks they entailed.
- People's diverse needs were detailed in their assessment and support plans and met in practice. This included support required in relation to their culture, religion, lifestyle choices and diet preferences.
- People's needs for nutrition and fluids had been considered. Records documented their likes and dislikes and identified any associated risks with eating and drinking.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- We spoke to staff about their understanding of the MCA and were assured by their knowledge.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity. Respecting and promoting people's privacy, dignity and independence

- People were treated with respect, compassion, patience and kindness. People were complimentary about the attitude and kindness of staff. One person told us, "These are the best people around nothing is too much for them, a true lifeline for me." Another said, "They are wonderful so patient and kind."
- Staff and people using the service had developed good relationships. Staff knew about people's preferences and how best to support them and enable people to be as independent as possible. A relative said, "They are so kind and also encourage [relative] to do things themselves which is so good."
- Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs.

Supporting people to express their views and be involved in making decisions about their care

- The service supported people to make choices in their daily lives. Staff said they had time to talk with and listen to people.
- Where a person may struggle to express their views in words, staff had detailed understanding and know-how of the indicators that alerted them to signs of agitation and unhappiness or other emotions. Training was provided for staff to enhance their communication skills in order to provide a better service.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences. Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People received personalised care, which met their current and changing needs. Records were written in a person-centred way with the involvement of the person and their carers. Care records were regularly reviewed and showed changes were inputted where necessary.
- Information about people's social hobbies and interests was written in care records. Staff told us where possible they match staff to people who might have similar interests. This helped develop relationships and stimulate people who received a service. For example, one person said, "We have the same carers and that has definitely improved the health of my [relative]." A staff member said, "They do try and match clients to staff if possible, which is good for people."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Records had a communication needs assessment and detailed where people had communication needs and what staff should do to ensure the person understood them.

Improving care quality in response to complaints or concerns

- The service had a complaints policy and process. People told us they had received this and would be confident to make any issues or concerns known to the office.
- People were encouraged to discuss any concerns during meetings and during day to day discussions.
- The registered manager assured us complaints would be taken seriously in accordance with their policy. We looked at records of complaints and found they had not received any.

End of life care and support

- Where appropriate end of life plans would be put in place and staff would have appropriate training.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- There was a positive culture throughout the service which focussed on providing people with high standards of support and care.
- Staff told us they felt supported and valued by the management team. One staff said, "We are a small team and looked after extremely well by the manager."
- The registered manager had the skills and knowledge to lead the service effectively, they were well respected by the staff team. The leadership was 'hands on,' and supported staff to provide a quality service. A staff member said, "We are so well supported by [registered manager]."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; 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 management team had auditing systems to maintain ongoing oversight and continued development of the service. Completed audits had highlighted areas for improvement and action plans had been devised to ensure improvement would be made.
- The registered manager understood their responsibilities to keep CQC informed of events which may affect people and the care delivery. They were open and honest about what achievements had been accomplished. In addition, what had not worked so well and where improvements might be needed.
- Duty of candour was understood, and it was clear in the way if any complaints were made, they would be listened to and their concerns and worries would be investigated.

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

- Systems and processes were developed to ensure people and relatives were fully engaged. For example, People were encouraged to be involved in the development of the service and feedback was sought from people who used the agency. This was confirmed from people we spoke with.
- The registered manager had an 'open door' policy, so people could contact them directly to discuss any concerns in confidence. People confirmed this when we spoke with them.

Working in partnership with others

- The manager and staff worked closely with health and social care agencies to share good practice and

enhance care delivery. This was confirmed by discussions with the staff, relatives and management team.