

The Upper Hand Care Limited

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Inspection report

7 Mitcham Lane
London
SW16 6LG

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Tel: 07479929390
Website: www.theupperhandcare.co.uk

Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

The Upper Hand Care Limited is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. It provides a service to older people. At the time of this review, the service was providing personal care for 5 people.

Background to this report

At our previous comprehensive inspection at The Upper Hand Care Limited on 21 March 2019, we identified concerns relating to the key question, Well Led. We found there were a number of systemic issues due to a lack of management oversight and record keeping. Although there was no impact for people who used the service, there were risks which could impact the quality of care provided. This included medicines records, supervision of staff, training quality, staff competency and induction.

These were a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) 2014, for which we issued a requirement notice. The key question well-led was rated Requires Improvement and the overall location rating was Requires Improvement.

The full report of that inspection can be found by selecting the 'all reports' link for The Upper Hand Care Limited on our website at www.cqc.org.uk.

Why we carried out this review

We carried out a review on 27 May 2022 to follow-up on the requirement notice and assess whether the provider has addressed the improvements required at our previous inspection.

We did this using a 'desk-based' review process because evidence to demonstrate that the requirement notice had been met could be obtained and assessed remotely without needing an inspection site visit to the location. This was not an inspection: the scope of this review did not include a visit to the service or an assessment of the outcomes for people using the service.

What we found

Details of the findings from this remote assessment can be found under the Well-Led section of this report

This review assessed that The Upper Hand Care Limited has taken action to meet the requirement notice issued after the last inspection. They are therefore no longer in breach of Regulation 17 Health and Social Care Act 2008 (Regulated Activities).

Rating at last inspection and update

Following the last inspection, this location was rated requires improvement. Although only the well-led key question was rated requires improvement, if there is a breach of a regulation a location cannot be rated higher than requires improvement overall.

Evidence reviewed remotely provided assurance that improvements had been made to address the issues that resulted in the Well-Led key question being rated Requires Improvement. The rating for Well Led has therefore been updated to Good.

As the breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) 2014 has now been assessed as met and no longer limits the overall rating, this has been updated to Good.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

Good ●

The service was well led

The Upper Hand Care Limited

Detailed findings

Background to this inspection

The Review

We carried out this review under section 46 of the Health and Social Care Act 2008, which permits us to conduct a review of how a provider carries on a regulated activity. We can carry out a review under s46 without needing to do an inspection (site visit) but we must assess the performance of the provider and publish a report of our assessment. Any rating adjustment made following the review must reflect the outcome of our assessment. The outcome of our assessment will be reflected in any resulting change to a key question and/or overall rating for the location., which must also refer to our ratings.

How we carried out this desk-based assessment:

The review was carried out by one inspector. No notice of the review was given to the provider, but the review included a discussion with the registered manager.

The well-led key question was reviewed to ensure that appropriate action had been taken by the provider to meet the fundamental standards of health and social care.

For this desk-based assessment of evidence we:

- Reviewed the action plan submitted by the provider following the previous inspection to show us what they would do to improve and by when
- Spoke with the registered manager
- Reviewed the notifications the provider had submitted to the CQC as required by regulation
- Reviewed the records of a Direct Monitoring Approach (DMA) call with the registered manager in February 2022
- Reviewed all other information held about the service including a Provider Information Return submitted by the provider in April 2022

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes. The provider's conditions of registration require this service to have a manager who is registered with the Care Quality Commission. Both the registered provider and the registered manager are legally responsible for how the service is run and for the quality and safety of the care provided. At the time of this review the service had a registered manager.

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; managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care.

At the last inspection this key question was rated as Requires Improvement. because of a failure to ensure effective oversight and governance of the service. At this review this key question has improved to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.,

Our last inspection found there were systemic and widespread failings of the provider's oversight and management of the service. The provider had failed to maintain effective oversight of the service and ensure they maintained accurate and complete records. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) 2014. At this review the provider was able to demonstrate that improvements had been made and they were no longer in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) 2014.

- Since the last inspection a care coordinator and a supervisor had been employed to help manage the service alongside the registered manager. Systems had been introduced to monitor and assess quality and safety. Policies and procedures linked together with audit and governance systems to help develop and improve the care provision. There was an ongoing improvement and action plan for the service.
- Systems for reviewing people's experience of the service were in place. This included an annual survey, telephone monitoring and unannounced spot checks of staff. In addition the registered provider ensured staff could meet regularly, enabling them to discuss their work and ensure opportunities for communication and learning.
- The registered manager spoke about the importance of ensuring people received the care they needed from staff who were well training and competent. Induction for new staff members and ongoing training was taking place. Where needed, specialist training had been sought for staff, for example for tracheotomy, epilepsy and end of life palliative care. There was a training needs analysis to identify any gaps in knowledge.
- Quality assurance audits included where learning was needed to better support people's care needs. Medication audits showed where issues where identified and what action was taken as a result for learning and mitigating further risks.
- The registered manager told us there had been some difficulties recruiting and retaining staff, but this had improved over recent months as they were able to provide more hours as they increased care provision.
- The registered manager told us they value and promote the importance of working in partnership with other professionals. This included social workers, general practitioners and a Clinical Commissioning Group (CCG).
- The registered provider has submitted information which demonstrated how they minimise risks to people associated with COVID-19. This includes ensuring provision of Personal Protective Equipment (PPE)

and ensuring staff follow best practice guidance for infection control.

- Information submitted showed positive feedback describing how people using the service were treated with kindness, respect and compassion by the leadership team and staff. The registered manager spoke of the importance of having a valued staff team and how they try to promote a positive approach and culture within the service.
- The review identified the registered manager had oversight of the service and was aware of its importance to sustain this as the service started to grow.