

HICA

HICA Homecare - Chorley

Inspection report

2nd Floor, The Lodge
Buckshaw Retirement Village
Chorley
Lancashire
PR7 7EP

Date of inspection visit:
11 November 2020

Date of publication:
26 November 2020

Tel: 01772678700

Website: www.hica-uk.com

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

HICA Homecare Chorley is a domiciliary care agency registered to provide personal care for people in their own homes. The agency provides care and support services as the preferred provider for the Buckshaw Retirement Village in Chorley and Heyswood in St Helens. At the time of inspection 87 people were in receipt of a regulated activity.

Not everyone using HICA Homecare receives a regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

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

People received safe care and were protected from avoidable harm by staff who had received training in safeguarding.

Care records included detailed information which helped staff support people to manage the risks. People we spoke with and their relatives highlighted how well protected they felt during the current pandemic. People told us staff used personal protective equipment at all times.

People were supported to take their medicines as prescribed. Some improvements in training and the management oversight of medicine records had led to improved practice. All medicine errors had been investigated and responded to fully which helped avoid the risk of recurrence.

The management team provided effective leadership and oversight of the service. Regular auditing of care records and spot checks on care practice helped to ensure people received good quality care which achieved good outcomes.

People living in the service and their relatives had been consulted with regularly to ensure their views were recognised and responded to. One example had been trying to ensure more consistent staffing to minimise the number of different staff visiting.

During the recent pandemic, more frequent consultations had taken place on a smaller scale. People had been supported to have visitors following government policy in relation to 'support bubbles'.

Staff felt committed to supporting people and felt valued by the management team.

The registered manager continued to work in close partnership with other agencies. Alternate ways of meeting and consulting with health professionals had been established.

Rating at the last inspection

The last rating for this service was Good (published 13 February 2018)

Why we inspected

We received concerns in relation to the management of medicines, complaints and governance. As a result, we undertook a focused inspection to review the key questions of Safe and Well Led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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?

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.

HICA Homecare - Chorley

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.

The inspection team

This inspection was completed by one inspector and telephone calls to tenants and relatives were completed by two Experts 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.

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

Notice of inspection

We gave a short period of notice of the inspection to ensure it was safe for us to visit during the current Covid 19 pandemic.

Inspection activity started on 11 November 2020, we visited the office location on this date and completed our inspection the same day.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with 19 people who were supported by the service and their relatives. We spoke with seven members of staff including; the registered manager, care staff and area manager. We reviewed a range of records which included; the care records for three people, medicine records, risk assessments in relation to the Covid 19 pandemic, recruitment records for three staff. We also reviewed a range of records relating to the management of the service including policies and procedures and governance records.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had clear policies and procedures to protect people from abuse and avoidable harm. Records we looked at showed safeguarding incidents had been reported and investigated thoroughly.
- The provider ensured staff received training to support their understanding. Staff we spoke with were knowledgeable about how to recognise signs of abuse and how to report it. Comments included, "We had training about safeguarding, the trainer gave a lot of detail." and "I would report any concerns to the manager and record it, I would take it higher if needed."
- People we spoke with and their relatives felt safe. Comments included; "Yes (name) is safe, they help them get dressed and seem to know them really well. (name) has an alarm and (staff) respond to it really well." and "(name) is very safe, staff ring the bell and shout hello, they are kept very safe."

Assessing risk, safety monitoring and management

- The provider supported people to manage the risks in their daily lives. Risk assessments and management plans were detailed and had been reviewed and updated regularly to reflect changes.
- Care records we looked at contained specific risk assessments which included; moving and handling, medicine administration and personal care.
- Staff we spoke with felt confident the risk management plans provided them with enough information to support someone to remain safe. Comments included, "Risk assessments are good, they tell us how people prefer help and the safest way to do it." and "The risk assessments are full of information and you can get an update when needed."

Staffing and recruitment

- The provider followed robust recruitment procedures to help ensure staff were employed safely. Recruitment files we looked at showed all necessary pre-employment checks had been completed prior to the person starting work.
- Staff we spoke with felt there were enough staff on duty to support people safely. Some staff felt it could be very busy when there was any short notice staff absence. The registered manager tried to arrange cover in a timely way.

Using medicines safely

- Medicines were managed safely. The registered manager addressed any errors in relation to medicine records and administration. Staff training needs had been identified and addressed. We were assured this was effective as there had been no repeat errors by individual staff.
- Staff who supported people with their medicines felt confident they had received training and understood

their role. Staff also told us their medicines practice was regularly checked, and had support from seniors.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- 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 premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The registered manager recorded all incidents and accidents fully. Records we looked at evidenced how each event had been reported and investigated. Lessons learned were shared in regular management meetings.

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- The provider and registered manager were committed to supporting people to achieve positive outcomes.
- People we spoke with told us. "I am in touch with the registered manager regularly, I have no complaints." and "The management are very good they respond fully, there is good communication."
- Staff told us they were committed to their roles and really enjoyed working for the service.

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

- The registered manager was clear about the standards of care they expected and ensured staff understood this. Staff we spoke with praised the approach of the registered manager.
- The provider and registered manager had effective audits and governance in place which helped them have oversight of care practice and care records. Regular audits were completed and any necessary actions had been identified.
- People supported by the service and their relatives were happy with the quality of care. One person's relatives told us "We are really happy, the staff respond, sometimes carers may need a little reminder but they always act on things."

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 their responsibility in relation to the duty of candour and ensured they informed people and agencies of any relevant incidents.
- All relevant notifications had been made to CQC in a timely way.
- The majority of people and relatives we spoke with said they were kept informed of anything such as changes in a person's needs or care. One relative felt they could have been updated sooner but still felt satisfied with the service.

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

- The provider and registered manager actively engaged with people using the service and their relatives. In addition to the annual survey, the registered manager visited five people living in the service each month to seek their views.

- The registered manager held regular staff meetings, staff told us they were able to contribute and found them useful. Minutes were communicated via email to those staff unable to attend.

Continuous learning and improving care, Working in partnership with others

- The registered manager had accessed the local authority training portal for additional training in safeguarding and moving and handling.
- The provider facilitated opportunities for management teams to meet regularly to share and learn from each other. Learning from incidents and examples of good practice which had been cascaded to the team.
- The provider and registered manager continued to work with partner organisations and agencies. This included; within their own organisation, local authorities and health staff.