

# Chinese Association of Tower Hamlets Chinese HomeCare Specialists

## 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

Chinese Homecare Specialists is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to mainly older people, some living with dementia.

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.

At the time of the inspection the provider was supporting 16 people, with 9 of them receiving personal care.

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

People and their relatives were very positive about the kind, respectful and caring attitudes of the whole staff team. A relative said, "I would definitely recommend them. In my experience they are one of the best agencies and can't ask anything more from them."

Risks to people's safety and health conditions were reviewed and assessed, with guidance in place to help staff support them safely. Where people were more vulnerable, enhanced monitoring was in place.

People told us they felt safe and staff had a good understanding of their health conditions. A person said, "I do feel safe yes, as I trust them when they are in my home."

People were supported to have maximum choice and control of their life and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

People and their relatives were very positive about the management team, with specific praise for their communication and level of organisation. Feedback highlighted staff went above and beyond at times with the care they provided.

People were supported by a staff team who understood people's cultural needs and were very positive about their commitment to working for the organisation. Staff felt valued and appreciated, especially as the provider had a strong focus on their wellbeing.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection

The last rating for the service was good (published 27 September 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Chinese Homecare Specialists on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### 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.

# Chinese HomeCare Specialists

## **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 1 inspector, a regulatory coordinator and the support of a Cantonese interpreter. A Cantonese interpreter was required because the majority of people using the service could not communicate as effectively in English as it was not their first language.

#### Service and service type

Chinese Homecare Specialists is a domiciliary care agency. It provides personal care to people living in their own homes.

#### 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 provider 48 hours' notice because as they are a small service we needed to ensure they would be available to assist us with the inspection.

Inspection activity started on 29 November and ended on 12 December 2023. We visited the office location on 29 November 2023 to see the registered manager and nominated individual and to review a range of records related to the service.

We reviewed a range of further documents related to people's care and the management of the service that was sent to us by the management team between 30 November and 7 December 2023. We made calls to people who used the service, their relatives and care staff between 4 and 12 December 2023.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included any significant incidents that occurred at the service. We used the information the provider sent us in the provider information return (PIR), which was sent in on 11 September 2023. 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 reviewed information from a direct monitoring activity (DMA) that was carried out with the provider on 22 June 2023 to get an update on the service. This information helps support our inspections. We also contacted the local authority commissioning team. We used all of this information to plan our inspection.

#### During the inspection

We reviewed a range of records related to 6 people's care and support. This included people's care plans, risk assessments and medicines information. We reviewed 4 staff files in relation to recruitment, training and supervision. We reviewed records related to the management of the service, which included quality assurance records, minutes of staff meetings and a range of policies and procedures.

We spoke with 2 members of the management team. This was the registered manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We also spoke with 5 care workers, both over the telephone and via email.

We contacted 7 people and managed to speak with 2 people and 3 relatives.

We continued to seek clarification from the provider to validate evidence found after the inspection. We looked at further records related to people's care, a training matrix and further quality assurance records.

We provided formal feedback to the management team on 7 December 2023.

# 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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had appropriate safeguarding policies and procedures in place and staff had a good understanding of their safeguarding responsibilities. There had been no safeguarding investigations, which was confirmed by the local authority.
- Staff completed safeguarding training and told us they had refresher training along with regular reminders about their safeguarding responsibilities.
- Staff were confident the management team would respond appropriately if any concerns were raised. A staff member added, "Management are very passionate about protecting our clients. They are very responsive to any concerns and carry out regular checks."

Assessing risk, safety monitoring and management

- The provider had systems in place to ensure risks to people's health were assessed before the service started or if their health deteriorated. Risk assessments were completed with guidance in place for staff to follow to support people safely.
- Staff confirmed they received shadowing and detailed verbal handovers in people's homes before they started providing care. A staff member said, "This was very helpful. It gave me a good overview of my client's needs, how they feel and how I can keep them safe."
- People and their relatives told us staff were skilled and experienced in meeting their needs and keeping them safe. A relative also confirmed new staff completed shadowing and observation visits to ensure they knew how to use the hoist safely.
- The provider also completed internal environment assessments in people's homes during their initial assessments, which included any risks related to fire safety and how staff should respond in the event of an emergency.

Staffing and recruitment

- Safer recruitment procedures were followed to ensure staff were suitable to work with people who used the service. Disclosure and Barring Service (DBS) checks for staff were in place along with appropriate references and any documents related to their legal right to work in the UK. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were sufficient numbers of staff to support people and the provider had procedures in place to ensure calls were provided on time. Visits were monitored via an electronic call monitoring (ECM) system and daily management checks ensured there were no missed visits.
- Feedback was positive about timekeeping and staff stayed the full length of their visits. Relatives

confirmed they were updated if there were any changes and staff made up time if they had been running late.

- Due to the size of the service, staff told us they worked within their local area and did not have any travel issues with their rotas. A staff member added, "Absolutely no issues with this. I am given enough travel time to get to my calls, it is very manageable."

#### Using medicines safely

- There were clear procedures in place to ensure people received their medicines safely. Records had information about people's medicines and the level of support needed, with clear guidance for staff to follow.
- Staff completed training and had their competency assessed before they started supporting people with their medicines. Furthermore, the provider ensured medicines records and information was also available in Chinese, to ensure staff had a full understanding and to minimise any possible errors.
- Staff completed accurate records, which included photos being uploaded onto the providers ECM system. This meant the management team had better oversight of people's medicines. There was further management oversight, which included spot checks and monthly medicines audits.
- People and their relatives were positive about how they were supported with their medicines. A relative told us their regular care worker was skilled in this area, as they had identified an error that had been made by the pharmacy before the medicine had been administered.

#### Preventing and controlling infection

- There were systems in place to ensure people were protected by the prevention of infection. Despite a change in government guidance, staff continued to follow a face mask wearing policy when they were in people's homes, which people and relatives confirmed.
- Staff completed infection and prevention (IPC) training and confirmed they had sufficient supplies of personal protective equipment (PPE).
- IPC responsibilities were discussed with staff during supervision and followed up on spot checks to ensure staff were following best practice.
- IPC responsibilities had also been discussed at a recent team meeting, which included the importance of IPC protocols in the build up to winter and an increase in COVID-19 and other respiratory infections.
- People and their relatives confirmed staff wore the appropriate PPE and had a good understanding of their responsibilities to help reduce the risk of infections. A relative added, "I feel they are well equipped in this area."

#### Learning lessons when things go wrong

- There were systems in place for the reporting of any accidents and incidents and staff were regularly reminded about important procedures to follow.
- We saw an example where learning was shared across the staff team in relation to medicines records. This had resulted in changes in how staff completed records.
- Staff confirmed this and were positive about the opportunities to learn from incidents across the service. A staff member added, "I didn't spot a change in medicines and was informed by my manager. We discussed this and I have become more vigilant in this area now."



# 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. The rating for this key question 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

- The management team and care staff were all committed to providing people with compassionate and person-centred care that was designed to meet their needs.
- Feedback confirmed people experienced positive outcomes from the care they received, which included advocacy support which promoted their independence and improved their health and wellbeing.
- A person said, "It is a very good service, everybody treats me so well. I can contact them anytime and they always check up on me."
- Relatives praised the support their family members received and the positive impact it had on their life. Comments included, "They bend over backwards to help us out" and "Everything is so well organised and gives us the assurances we need. They are so respectful and caring, we couldn't ask for anything better, it is absolutely brilliant."

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

- The management team had a good understanding of their responsibilities regarding notifiable incidents as part of their regulatory requirements.
- The management team had regular team meetings to discuss the service to ensure they had a good oversight of the delivery of people's care. This included a detailed overview of each person and any issues they were facing or concerns that had been raised by the care staff.
- Staff confirmed they received regular updates and reminders about their role to ensure they were following best practice. Comments included, "I get constant reminders, including updates with any changes in guidance. I feel the management team is doing more to protect us and the clients, which I really appreciate" and "They ensure we go beyond our normal duties to help our clients if needed."

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

- The management team had regular contact with people and their relatives to understand their experiences of the care they received. From reviewing analysis of their recent questionnaires, it was clear people were kept fully engaged and involved in the service and were very positive about the management of the service.
- People and their relatives told us one of the most important factors was they could communicate with staff in their first language. A relative added, "This really helps and has a big impact on my [family member]"

and being able to have conversations in their own language. It is like having a member of the family with us."

- Staff praised the level of support they received and told us the management team were understanding, compassionate and focused on their wellbeing. Comments included, "They really do care about us and work very hard to factor in our wellbeing. They do not harass us and treat us fairly and equally" and "They value us and are always there for us. I'm extremely happy and can't ask for more."
- Staff also highlighted how important it was for them to be able to support people from their local community and communicate with them in their own language. A staff member added, "Because of this and being able to communicate, it helps to build up a positive relationship. It is very meaningful and a rewarding job opportunity."

#### Continuous learning and improving care

- There were clear assurance processes in place to monitor the quality of care people received. This helped the management team identify any areas of learning and where improvements could be made.
- This included telephone monitoring, checks of ECM data and unannounced spot checks in people's homes. This helped the management team observe staff practice and ensure people received the correct level of care.
- Staff confirmed this was done on a regular basis and told us it supported them in their role. A care worker added, "They observe how I give medication, how I use the equipment and support my client. I also get feedback about this which is very good so I know if I need to make any improvements."
- There were also quality assurance audits in place, which included daily records, care plans and people's medicines records. This gave the management team further oversight and helped them identify any further learning opportunities. Furthermore, the provider also carried out an external audit earlier in the year to help them improve their service.

#### Working in partnership with others

- The management team worked closely with a range of health and social care professionals, when needed, to raise any concerns about people's health and wellbeing and ensure their needs were met.
- The provider was a charitable organisation and was involved in numerous projects within the local community. They hosted a weekly lunch club, had implemented a community support programme for older people in the Chinese community and had set up the Chinese Independent School of Tower Hamlets.
- The management team had also created strong links with other charitable organisations. This included the Alzheimer's Society and Dementia UK. This involved regular workshops and weekly surgeries with a Chinese speaking nurse to offer advice and support to people, their relatives, care staff along with people from the local community.
- Where required, people also received advocacy support to help them with their day to day lives, which included liaising with housing associations and when translation support was needed.

#### 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 were aware of their responsibilities to be open and honest with people if something went wrong with the care they received.
- Although there had been no incidents across the service, we signposted the registered manager to information on the CQC website about the duty of candour regulation as part of our formal feedback to help support their understanding.