

Comfort Living Care Ltd

Comfort Living Care Office

Inspection report

7 Upper Selsdon Road
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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:

Comfort Living Care Limited is a domiciliary care and supported living agency. It provides personal care to people living in their own houses and flats. At the time of our inspection it provided a service to four people. The Care Quality Commission (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:

The service was well led by the registered manager who was keen to employ innovative ways of working to develop the service. There were effective systems in place to monitor the quality of the service provided to people which ensured good governance.

People and their relatives told us they felt safe with the care and support they received from staff.

Comprehensive risk assessments and risk management strategies were in place as part of the assessment and support planning process. This meant risks to people and to staff were minimised.

People were protected from the risk of abuse. The service had safeguarding procedures in place that staff received training for and were understood.

People received their medicines safely and as prescribed.

There were robust recruitment practices in place and sufficient staff levels to meet people's needs.

Accidents, incidents and risks were appropriately recorded and included strategies to reduce the likelihood of events re-occurring in the future.

People's nutritional needs were met and where people required support with nutrition, care plans provided staff with guidance on people's support needs.

Services were delivered in line with the Mental Capacity Act 2005 and staff sought consent prior to providing care and offered people choices to encourage people to make their own decisions.

People were supported to have healthier lives. Staff assisted them to access health professionals when needed to ensure their health and well-being was monitored.

People told us they benefitted from caring relationships with the staff.

People were treated as individuals by staff committed to respecting people's individual preferences.

The provider had systems in place to ensure concerns and complaints were responded to in an appropriate way.

The service had systems in place to notify the appropriate authorities where concerns were identified. The culture of the service was positive, open and person centred.

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

Rating at last inspection:

This service was registered with us on the 7th May 2020 and this was the first inspection.

Why we inspected:

This inspection was prompted because the service had not received a comprehensive inspection since they registered with us in May 2020.

Follow up:

We will continue to monitor information we receive about the service using our monitoring systems and we will re-inspect when indicated.

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 findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our findings below.

Is the service well-led?

Good ●

The service was well led.

Details are in our findings below.

Comfort Living Care Office

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.

Inspection team

This inspection was completed by one inspector.

Service and service type

This service provides care and support to people living in a 'supported living' setting so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. The Care Quality Commission [CQC] does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Notice of inspection

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it is a small service and 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. We sought feedback from the local authority and professionals who work with the service. We used this information to plan our inspection. 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.

During the inspection

We visited the office of this service and the supported living accommodation where people lived. We spoke with three people, the registered manager and a member of the care staff. We inspected four care files and four staff files. We also reviewed a variety of records relating to the management of the service.

After the inspection

We spoke with three people's relatives on the telephone about their experience of the care provided. We also spoke with a community nurse on the telephone, a professional who regularly visits the service. We continued to seek clarification from the provider to validate evidence found.

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.

Assessing risk, safety monitoring and management; Preventing and controlling infection

- People's needs and risks were assessed and reviewed regularly. Risk management plans were drawn up together with people. Risk assessments contained information and guidance for staff to follow to reduce the risks identified such as with personal care and moving and handling.
- People and their relatives told us staff followed appropriate infection control procedures in order to help keep them safe. The registered manager confirmed that there were rigorous infection control procedures in place that staff followed.
- We were assured that the provider was accessing testing for staff.
- The registered manager carried out regular checks of infection control practices to ensure staff followed current guidance and had access to a regular supply of PPE.

Systems and processes to safeguard people from the risk of abuse

- People told us with confidence, they felt safe with staff. Relatives also told us staff were conscientious in maintaining people's safety, treating people with care and sensitivity. One person said, "The staff here really care about us and I feel totally safe with them."
- Appropriate safeguarding policies and procedures were in place to protect people from the potential risk of abuse. The registered manager and staff were able to describe their responsibilities in this respect.
- Staff received training for safeguarding adults that they told us helped keep them up to speed with current best practice and legislation.

Staffing and recruitment

- There were comprehensive recruitment checks carried out before staff started working. This helped to ensure people were supported by suitably skilled and experienced staff. These checks included references from previous employers, appropriate identity checks and Disclosure and Barring Service [DBS] checks.
- There were enough staff to support people safely and the registered manager also worked as a care worker when necessary.

Using medicines safely

- People received their medicines safely and as prescribed.
- The registered manager told us that only staff who had completed training in the safe administration of medicines were allowed to assist people with their medicines. Staff told us they had been trained in the safe administration of medicines which they had found useful. Training records supported this.
- The registered manager told us all staff received an annual competency check to help ensure they knew how to provide people with their medicines safely. We saw completed checks for staff with satisfactory

outcomes.

- Medicines administration records [MARs] were completed as required. There were no unexplained gaps in the records.

Learning lessons when things go wrong

- No accidents or incidents had occurred over the last year. The registered manager told us that there was a review system in place where discussions were held with staff so that lessons could be learnt to prevent similar incidents wherever possible.

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

- People's needs were assessed together with the people and their relatives and involved professionals. Assessments were outcome based. Outcomes were agreed with people and were supported by clear action plans and guidance for staff to follow in care and support plans. Staff told us they found people's care plans easy to follow and said they covered people's needs effectively.
- Equality and diversity were considered in the assessment of needs. For example, people's religious, cultural needs and lifestyle choices had been discussed and included in people's care plans. This ensured staff were aware of people's needs and were able to protect them from discrimination.

Staff support: induction, training, skills and experience

- Staff we spoke with were competent, knowledgeable and skilled. They described a range of training, which they had completed. Staff told us the training they received helped them improve the quality of the care they provided.
- Staff talked about the induction they received before being able to work independently. A member of staff told us, "Yes, I had a good induction and part of that included shadowing more experienced staff." Training records confirmed staff had completed the service's induction programme.
- Training records showed staff completed a wide range of training, including training in specific health conditions where required.
- Staff told us they felt supported by the registered manager, received supervision and feedback about their performance. Records confirmed this.

Supporting people to eat and drink enough to maintain a balanced diet

- Where required, staff supported people with meals and drinks. Care plans contained information about people's preferences and support arrangements for their meals.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- Staff told us they were well informed about people's healthcare needs and how best to meet them. The registered manager said they carry out the initial assessments of people's healthcare needs. Care and support plans detail the expected outcomes which have been agreed with people.
- Staff worked closely with health professionals to ensure people's needs and wishes were met.

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

The Mental Capacity Act 2005 (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. 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 checked whether the service was working within the principles of the MCA

- The registered manager followed the MCA process during the initial assessment to ensure people were able to make decisions about their health and welfare. Where there was a lack of capacity or fluctuating capacity, there were appropriate representatives in place that could legally make decisions for someone if this was needed.
- Staff understood their responsibilities in relation to the MCA and they received annual training in this.

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

- People and their relatives said staff were kind, sensitive to their needs and looked after them well. They said staff were well informed, trained in the necessary work areas to support them effectively.
- One relative said, "They really are very good. We are very happy with the way they care for [family member]".
- Staff received training in equality and diversity and understood people's needs.

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

- Staff provided care in line with people's preferences, including how they liked to receive their personal care and their food and drink. Staff told us, "We always ask people if they need anything else or if they have any particular preferences when providing support to people."
- The registered manager told us they spoke with people and their relatives to find out their views on the quality of their care and if any changes were required, they were made.

Respecting and promoting people's privacy, dignity and independence

- People told us staff supported them to maintain their independence as far as possible. They said staff provided personal care support sensitively and always asked people how they would like to receive their support.
- A relative told us, "Staff are respectful and they go out of their way to support [family member's name]".
- Our discussions with staff showed they understood how to maintain people's confidentiality. Staff received training to understand their responsibilities in relation to this.

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.

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; Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People and their relatives said they were involved in the initial assessment and care planning and in any care plan reviews when they took place.
- Staff knew people's individual needs and preferences well as they worked closely with them and understood their risk assessments and care plans.
- Care plans were personalised, detailing health needs, backgrounds and people who were important to them. Care plans were kept up to date so they remained reliable for staff to follow.
- People and their relatives all complimented the provider in being very responsive to their needs.

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.

- Staff had a good understanding of the AIS and people's communication needs were assessed and documented within their care plans. Staff were knowledgeable on how different people expressed themselves. Staff told us they took time to listen and engage with people.
- People's communication needs were regularly reviewed and information on individual's communication preferences and useful communication strategies for staff were documented.

Improving care quality in response to complaints or concerns

- The provider had an appropriate policy and procedure in place that set out the steps someone would need to take if they had a complaint. This included an appropriate timescale within which people might expect a response to their concerns.
- Staff were aware of how to assist people if they had a concern or a complaint to make. Any feedback received was used to develop and improve the services.
- People and their relatives told us they would talk with staff or the registered manager if they had any complaints.

End of life care and support

- At the time of our inspection no one was receiving end of life care. However, the registered manager told us they would work closely with the person, their relatives, the local hospice and others involved in their care.

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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager showed they understood their role and responsibilities, as did the staff. The registered manager kept themselves up to date by attending regular courses on key topics.
- The registered manager was aware of their responsibility to submit notifications to CQC of notifiable events.
- The provider had a robust auditing system to check all aspects of service delivery, from ensuring the quality of care was a good standard, checking the daily logs, other documentation and staff training.
- Staff were well supported with good training and one to one supervision.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics; working in partnership with others

- The service had a positive culture. Staff told us the registered manager was always available to provide support when needed, they said they were consistent and led by example.
- People's voice was noted throughout care plans which detailed the persons view on each topic of their care.
- The provider worked positively with external professionals to achieve positive outcomes for people. Feedback we received was positive.

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 provider was able to describe appropriately their responsibility with regards to their duty of candour.
- There were no incidents or accidents since the provider registered. Staff were confident in their responsibilities within the reporting process.
- Staff were aware of the whistleblowing policy and felt supported.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility.

- People and their relatives spoke positively about the service they received. They said staff were committed to providing good, high quality care. Comments we received reflected this. "I am happy with the care I get, I don't have any complaints," and "The staff really care for us," "The staff are very supportive and caring." People said they felt listened too and were able to discuss any concerns they may have. They said there was an open and transparent culture at the service that met the needs of the people they supported.

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

- People told us they were fully involved in making key decisions about their care. They said any special requests or needs were taken seriously and where appropriate integrated into their care plans.
- People said staff communicated very well with them but also said they were able to contribute suggestions as how the service could be improved. They told us they felt listened to.
- Staff told us they regularly spoke with people to ensure they were happy with the service they received.
- Relatives told us their family members received good support from staff who were happy and committed to their work. They said there was an open and friendly culture. One staff member told us, "It's a good service, well managed and the staff team is supportive." Staff told us the registered manager dealt effectively with any concerns when they were raised.