

Comfort Care Recruitment and Training Limited

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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

Comfort Care Recruitment and Training Ltd provides personal care support to people in their own home. At the time of our inspection one person was receiving support. 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

The person received care and support which met their needs. They were involved in decisions about their care and the development of their care and support plan. The person was 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 were knowledgeable about the level of support the person required and how to provide support to ensure the person's safety. Staff respected the person's privacy and dignity, and enabled them to be as independent as possible.

The person was supported by staff that had the knowledge and skills to undertake their duties. There were safe recruitment practices in place and staff completed a programme of regular training. Staff felt well supported by the registered manager.

The registered manager was aware of their requirements in line with their CQC registration. They had processes in place to monitor and improve the quality of service delivery, and regularly liaised with the person and staff to obtain their views and experiences of service delivery. The registered manager attended the local authority's provider forum to enable them to stay up to date with best practice guidance.

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

Rating at last inspection and

This service was registered with us on 26 February 2019 and this is the first inspection.

Why we inspected

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

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

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Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Inspection team

This inspection was undertaken by one inspector.

Service and service type

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

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

Notice of inspection

In line with our new approach we gave short period notice of this inspection and explained what was involved under the new methodology.

Inspection activity took place on 10 and 11 May 2022.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). 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 we held about the provider including statutory notifications received about key events that occurred at the service.

During the inspection

This performance review and assessment was carried out without a visit to the location's office. We used technology such as video calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation.

We spoke with the person receiving care, two care workers, and the registered manager. We reviewed records relating to the care provided, staffing and the management of the service.

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 of 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

- The person was protected from the risk of abuse. Whilst there had not been any safeguarding concerns raised, staff were aware of how to recognise signs of abuse and how to report any concerns should they arise.
- Staff had received training on safeguarding adults and were expected to complete regular refresher training to ensure their knowledge was up to date with current best practice.

Assessing risk, safety monitoring and management

- The person received safe care and support.
- Regular risk assessments were undertaken, and management plans were in place to minimise any risks to the person's health and welfare. These were regularly reviewed to ensure they reflected the person's current needs.

Staffing and recruitment

- Safe recruitment practices were in place to ensure the person was supported by suitable staff. This included obtaining references from previous employers, checking staff's identity and eligibility to work in the UK, and undertaking criminal records checks.
- There were sufficient staff to provide the person with the level of support they required. The person told us they had experienced a change in staff supporting them at the beginning, but now they were receiving consistent support from regular care workers.

Using medicines safely

- At the time of our inspection staff were not administering any medicines.

Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for staff.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- An incident reporting process was in place that enabled the provider to learn from incidents and accidents. Staff knew how to report and record any concerns.

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 person's needs were assessed in line with good practice guidance and took account of their needs and choices about how they wished to be supported.

Staff support: induction, training, skills and experience

- The person received support from staff that had the knowledge and skills to undertake their duties.
- A training programme was in place and staff were up to date with the provider's required training courses to ensure their knowledge and skills were up to date with best practice.
- Staff felt supported in their role. One care worker told us, "I get on with [the registered manager] very well. I speak with him nearly every day. If I have questions I can pop into the office or call him." Another care worker said in terms of the support they received from the registered manager, "I really can't ask for anymore."

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

- The person was supported at mealtimes to enable them to safely prepare and cook their meals. They told us, "We cook together. Which is nice, I like that. It gives me time to build more trust and a better relationship. [Their care worker] keeps an eye if I'm near hot things."

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

- The person using the service was able to manage their own healthcare needs and liaison with health professionals. However, staff were available to support the person to attend healthcare appointments should this be required.

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 MCA 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.

- Staff supported the person in line with the MCA and involved them in decisions about their care.

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

- The person told us they had built trusting relationships with the care worker supporting them. They told us, "The care workers are really nice. They're kind. I particularly like the one I have now. They listen to me. She's really good."
- Staff were respectful of the person's cultural and religious preferences. Their care records detailed any specific support they required in relation to their religion.

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

- The person was involved in their care and the level of support they received. Staff asked the person how they would like to be supported and respected their decisions.

Respecting and promoting people's privacy, dignity and independence

- Staff promoted the person's privacy and dignity when supporting them with their personal care.
- Staff also supported the person to maintain their independence.

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

- The person received care that met their individual needs. The person told us, "So far I'm pretty impressed with the service they supply...They help me with everything I need them to."
- Care plans provided detailed information about the person's needs and how they wished to be supported.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Staff were aware of how the person communicated and communicated with them in a way they understood.

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

- Staff supported the person to undertake activities that were of interest to them. This included supporting them to go shopping and visit family members.

Improving care quality in response to complaints or concerns

- A complaints process was in place. The person told us if they had needed to raise concerns these were dealt with quickly and effectively.

End of life care and support

- At the time of our inspection the service was not supporting anyone who required end of life support.

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; 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 was aware of their CQC registration requirements, including the requirement to submit statutory notifications about key events should they occur.
- The registered manager was aware of the duty of candour and the importance of being open and honest should mistakes be made.
- There were systems in place to review and improve the quality of service provision. This included regular communication and visits from the registered manager

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

- The person was involved in their care and worked with staff to achieve good outcomes. Their views were asked for and they were involved in the delivery of the service. The person said, "[The registered manager] does come occasionally and see how things are going."
- Staff told us they also felt listened to and felt they could express their views and opinions.

Continuous learning and improving care; Working in partnership with others

- The registered manager was committed to continuous learning and improvement. They attended the local authority's provider forum to stay up to date with best practice and share ideas with their peers.