

Comfort Support Services Ltd

Comfort Support Services

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 Support Services is a domiciliary care service providing personal care to people in their own houses and flats in the community. At the time of our inspection there were 6 people using the service. 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 inspection, the service was providing personal care to 6 people.

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

People felt safe, and staff knew what to do if they thought people were at risk. Staff recruitment processes were robust and staffing levels ensured peoples' needs were met. The provider followed current infection prevention and control guidance.

People's needs were assessed and reviewed regularly, and staff were trained to provide support whilst promoting independence. People told us staff were polite and always asked before providing support. People were involved in decisions about their support needs.

People had access to healthcare professionals. People and their relatives told us they were involved in the support planning process to ensure it met their needs.

Systems were in place to monitor quality and safety. The provider sought regular feedback from people to improve their support. The registered manager audited support records, including accidents and incidents, to assure themselves of quality. Lessons were learned when concerns were raised, and these outcomes were communicated to staff.

People were 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.

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 12 July 2022, 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.

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.

Comfort Support Services

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 an inspector and 1 Expert 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.

Service and service type

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

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 service 24 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 sought feedback from the local authority and professionals who work with the service. We used this information to plan our inspection.

During the inspection

We spoke with the registered manager and a company director. We received feedback from 4 support staff. We spoke with 2 people receiving support and 4 relatives. We reviewed 3 people's support records.

We looked at staff files in relation to recruitment, and a variety of records relating to the management of the service, including policies and procedures. We asked the registered manager to send us documents before and after the on-site inspection. These were provided in a timely manner and this evidence was included as part of our inspection.

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

- People were protected from abuse. The provider had policies and procedures for safeguarding and whistleblowing to protect people from the risk of abuse.
- Managers modelled an open and transparent culture which encouraged people to raise any safeguarding concerns.
- Staff were aware of the different types of abuse and had been trained in their responsibilities for safeguarding adults. Staff knew what actions to take if they witnessed or suspected abuse.

Assessing risk, safety monitoring and management

- The registered manager assessed individual risk and implemented controls to mitigate concerns.
- Risks associated with the provision of people's support had been assessed. Risk assessments were detailed, and person centred.
- Staff had completed the appropriate mandatory training to keep people safe.

Staffing and recruitment

- Managers ensured there were enough staff, with the right training and skills, to meet people's needs.
- The provider had effective recruitment processes. Recent records showed staff being recruited safely, with appropriate checks completed.
- At the time of the inspection an electronic system was being introduced to enable the registered manager to track late calls more effectively and to make alternative arrangements through consultation with people where appropriate. No calls had been missed and staff told us managers would help with support tasks when needed.

Using medicines safely

- The provider had processes in place to support people with prescribed medicines.
- The registered manager ensured staff received medicines training and had had processes in place to assess their competency to ensure they could give medicines safely.
- At the time of our inspection there were no people receiving support with their medicines.

Preventing and controlling infection

- The provider used effective infection, prevention, and control measures to keep people safe, and staff supported people to follow them.
- Managers had plans in place to alert other agencies to infection control concerns affecting people's health and wellbeing.

- The provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The provider had systems in place to support staff reporting and recording any accidents and incidents.
- Complaints, concerns, and incidents were recorded and followed up by the registered manager and staff.
- The registered manager ensured lessons were learned and practice changed if any trends were identified.

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; Staff working with other agencies to provide consistent, effective, timely care

- People's needs were assessed by the registered manager before support commenced.
- The registered manager maintained an overview of people's changing needs to make sure assessments and support plans were up to date.
- The provider worked closely with a range of professionals and partner agencies, to ensure people received effective support.
- Support records showed advice given by health professionals was acted upon, and staff were prompt in raising concerns or issues.

Staff support: induction, training, skills and experience

- The provider had systems in place to ensure staff received effective induction, training, and supervision, and were skilled and competent to carry out their roles.
- The registered manager ensured ongoing training was completed by all staff as required. Staff were supported with job progression and professional development.
- Staff told us they felt confident in supporting people's needs and received a comprehensive induction, including shadowing other staff before supporting people on their own.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support

- The registered manager recorded people's cultural and religious needs and ensured staff respected people's needs and wishes when supporting them at mealtimes.
- The provider ensured people's support plans included information about their needs regarding fluids and nutrition.
- Staff met oral health support needs where this was identified as a need; this was recorded in support plans.

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.

- The provider and processes in place to ensure the service worked within the legal requirements of the MCA. Assessments of people's needs included an assessment of people's capacity to choose and make decisions.
- Managers supported people to make their own decisions and choices. Capacity assessments had been carried out when required.
- Staff demonstrated an awareness of supporting people to make decisions and understood the principles of the MCA.

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 provider ensured people's equality and diversity needs were met through policies to help ensure people were treated fairly.
- The provider had close links with the local community and supported people to access services culturally and spiritually important to them.
- Staff received equality training and were able to support people's religious and cultural beliefs.
- Relatives told us staff were caring and respectful. One relative said, "This service is just what [my relative] needs; we are both very happy we have finally found the care company that treats both of us as people and not just a visit that they have to do 3 times a day."

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

- The provider ensured people were fully involved in decisions about their support and treatment.
- People said they were asked regularly if they wanted to make any changes to their support plans, and where they did, we saw the plans were changed accordingly.
- Where appropriate, the service supported people to access advocacy services. Advocates provide independent support to people who, for whatever reason, may find it difficult to express their views.

Respecting and promoting people's privacy, dignity and independence

- Staff promoted people's independence and ensured privacy was maintained.
- Staff understood the importance of respecting people's privacy and supporting them to be as independent as possible in their own home
- The provider ensured people's needs and aspirations were understood by recording them in their support plans; they checked staff were meeting them by carrying out regular observations and speaking with people.

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 provider ensured people had clear support plans in place detailing their needs and preferences in a personalised, responsive way.
- People's support plans described their support needs, were reviewed regularly with the registered manager, and were person-centred, containing people's likes, dislikes and preferences.
- Staff had a good understanding of people's needs and told us the registered manager kept them informed of any changes to people's support.

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.

- The provider enabled people to access information in different languages, easy read versions and in large print if needed.
- Records showed people's support plans included information about communication needs and how these were being met.
- The registered manager ensured staff were recruited who could meet the support needs of people whose first language was not English.

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

- The registered manager assessed and recorded people's social needs, wishes and aspirations and supported people to attain those goals.
- Staff spent time getting to know people's background and history to enable them to support participation in activities meaningful to them.
- Staff had an understanding of people as individuals and how their needs and emotional wellbeing should be met.

Improving care quality in response to complaints or concerns

- The provider had processes in place to allow people to raise concerns and complaints easily.
- Managers ensured complaints were tracked and analysed to ensure lessons were learned, and

improvements were made to people's quality of support. For example, changes were made to monitoring processes following incidents.

- People and their relatives told us they knew how to make a complaint and felt confident any issues raised would be dealt with appropriately by managers.

End of life care and support

- Processes were in place to support people with end-of-life decisions.
- Staff knew how to support people and how to access the appropriate health professionals to ensure end of life needs were met.
- At the time of our inspection there were no people receiving support who were at the end of their life.

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.

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 registered manager led by example and demonstrated an open and transparent approach.
- The provider recruited staff who were passionate about promoting a person centred, inclusive service to reflect the cultural and religious needs of the people receiving support.
- The registered manager was aware of their role in supporting people's rights and in maintaining equality standards.

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; Continuous learning and improving care

- The registered manager had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- The registered manager fully understood their responsibilities around duty of candour. This was underpinned by the open and honest culture and by appropriate policies and procedures.
- The provider had robust processes in place for receiving feedback and suggestions on how to improve the quality of support.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Working in partnership with others

- The provider had effective governance processes and auditing systems in place to keep people safe, protect people's rights and provide good quality support.
- Staff had the skills, knowledge, and experience to perform their roles; they demonstrated a clear understanding of people's needs and were supported by the registered manager to ensure they were competent in meeting people's needs.
- Staff were clear about their roles and responsibilities, and knew how to contact managers for support, and when to raise concerns.
- The registered manager ensured people were included in the local community by working closely with local organisations to support people's social and cultural needs.