

Comfort Call Limited

Comfort Call Guildford Grange

Inspection report

Guildford View
Norfolk Park
Sheffield
S2 2NZ

Tel: 01142737920

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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

We carried out this inspection on 21 June 2017. This inspection was announced, which meant the provider was given 48 hours' notice of our inspection visit. This was because the location provides a small domiciliary care service and we needed to be sure that someone would be available to meet with us.

Comfort Call provides personal care to people who live in self-contained flats within the extra care housing complex of Guildford Grange. Care and support is provided from 7am to 10pm, with an on call service available throughout the night for emergency support. At the time of this inspection there were 24 people living at Guildford Grange who were receiving a service from Comfort Call.

There was a manager at the service who was registered with the Care Quality Commission (CQC). A registered manager is a person who has registered with the CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People told us they felt happy and safe living at Guildford Grange and with the care and support they received from Comfort Call. Comments included, "The staff are so caring and polite, they cheer me up every day," "I am very lucky to be here as this is a fantastic place"

There were enough staff available to ensure people's needs were met. The service had robust recruitment procedures to make sure staff had the required skills and were of suitable character and background.

Staff were confident about how to protect people from harm and what they would do if they had any safeguarding concerns. They were confident any concerns would be taken seriously by management.

Medicines were stored safely and securely, and procedures were in place to ensure people received their medicines as prescribed.

People were supported by an enthusiastic and caring staff group. Staff were supported through training, regular supervisions and team meetings to help them carry out their roles effectively. There was an open and accessible management team.

People were supported to access a wide range of health and social care professionals to help maintain their health and wellbeing.

The registered manager and staff were aware of the requirements of the Mental Capacity Act 2005 (MCA) and what this meant in practice.

Positive and supportive relationships had been developed between staff and people living at Guildford

Grange. People were treated with dignity and respect.

There was a range of activities on offer to people living at Guildford Grange.

People received personalised care. Care records reflected people's current needs and preferences. Care records contained up to date risk assessments and these were reviewed regularly.

There was a complaints policy and procedure in place. People's comments and complaints were taken seriously, investigated, and responded to.

There were effective systems in place to monitor and improve the quality of the service provided.

The service had up to date policies and procedures which reflected current legislation and good practice guidance.

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.

People told us they felt safe.

Staffing levels were appropriate to meet the needs of people who used the service, and safe recruitment procedures were in place to make sure staff were of suitable character and background.

There were clear policies and procedures in place for staff to recognise and respond to any allegations of abuse. Staff had received training in this area and understood how to keep people safe.

We found systems were in place to make sure people received their medicines safely.

Is the service effective?

Good ●

The service was effective.

People were supported by staff who had the knowledge and skills necessary to carry out their roles to meet people's needs. Staff were suitably trained and received regular supervisions.

People were supported to maintain good health and to access health and social care services when required.

Staff understood the requirements of the Mental Capacity Act 2005 and what this meant in practice.

Is the service caring?

Good ●

The service was caring.

People told us all the staff were kind and caring.

Staff spoke passionately about the people they supported. They knew people's preferences and were keen to support people to be as independent as possible.

Staff knew what it meant to treat people with dignity and respect, and we saw people had their privacy and dignity respected by staff at all times throughout the inspection.

Is the service responsive?

Good ●

The service was responsive.

There was a range of activities available to people to join in if they wanted to.

People's care records were up to date and regularly reviewed. They reflected the person's current health and social care needs.

There was a comprehensive complaints policy and procedure. Comments on the service were encouraged and responded to.

Is the service well-led?

Good ●

The service was well-led.

People and staff told us the registered manager and the management team were approachable and supportive.

People, their relatives and staff were regularly asked for the views. We saw any concerns and suggestions were considered and acted upon.

The service had quality assurance systems in place and up to date policies and procedures which reflected current legislation and good practice guidance.

Comfort Call Guildford Grange

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 21 June 2017 and was announced. The provider was given 48 hours' notice because the location provides a small domiciliary care service and we needed to be sure that someone would be available to meet with us.

The inspection team was made up of one adult social care inspector and one 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.

Before the inspection, we asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to help with the planning for this inspection and to support our judgements.

Prior to the inspection we reviewed the information we held about the service, which included correspondence we had received and any notifications submitted to us by the service. A notification must be sent to the Care Quality Commission every time a significant incident has taken place. For example, where a person who uses the service has a serious injury.

Before our inspection we contacted staff at Healthwatch and they had no concerns recorded. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We also contacted members of Sheffield council contracts and

commissioning service. They told us they had no concerns about this service.

During the inspection we spoke with 20 people who lived at Guildford Grange. We met with the registered manager. We spoke with five members of care staff. We spent time looking through written records, which included four people's care records, four staff files and other records relating to the management of the service.

Is the service safe?

Our findings

Every-one we spoke with living at Guildford Grange told us there were enough staff to keep them safe. People told us care staff arrived at the time they expected them. No one had any experience of calls being missed, although one person shared a concern about their early morning shower time being changed recently to a later time in the morning. We talked to the registered manager about this who told us it was a popular time for people requiring support with personal care in the morning and she would talk with the person concerned.

Comments from people living at Guildford Grange included, "I am very satisfied with the time that they come to look after me," "There are is never a problem with the time that people come to help me," "I always know the carers that come to me," "They have never missed a call," "My carers are never late," "They will always call and apologise if they ever get behind with the work, it can't be helped," and "They [Care worker] once phoned to say that they were waiting for an ambulance, would I be alright for a while?"

The amount of care a person needed to support them to live at home was assessed by the local authority for 23 people living at Guildford Grange. Another person was assessed directly by the provider for the amount of support they required. We asked the registered manager how they ensured there were enough staff hours available to meet people's needs. They told us they had additional 'well-being' hours each week that they could use in emergency situations. The registered manager explained if a person's need for support changed unexpectedly, for example following a fall, they would immediately increase the amount of support the person received and notify the local authority. The local authority would then undertake a review retrospectively.

The registered manager told us they also reviewed staffing levels dependent on whether people were in hospital or away from home from another reason. One care worker was employed to sleep over every night from 10pm to 7am. Usually they continued to work until 10.30am to support people with getting up and personal care. If this wasn't required the night time care worker would finish before 10.30am. In addition one care worker was employed from 7am to 1pm, and a further two care workers were employed from 7am to 3pm. Two care workers then worked from 3pm to 10pm. People told us, "There are enough staff to look after me and I need two people to support me," and "They never rush if I need them a little bit longer, they are happy to help and this makes me feel better."

Care workers told us, "I think there are enough staff to care for the service users" and "We have a very reliable call system that times all the responses, although I think we answer them pretty quickly." Everyone living at Guildford Grange had pull cords to summon help in an emergency in each room in their flat, in addition to either a pendant or bracelet alarm they could wear at all times about their person. The registered manager told us a call centre initially answered calls made during the night and contacted the night care worker where necessary. During the day calls went straight through to the care staff on site. Comfort Call care staff were responsible for responding to emergency calls made from all the flats and throughout the building. One person told us, "I feel really safe; they will always come if I use my pendant."

This meant there were enough staff to meet people's care and support needs, and to keep people safe.

We saw the service had an up to date safeguarding policy and procedure. Staff told us they had received training in safeguarding vulnerable adults from abuse. Comments from staff included, "I have had extensive training in adult protection and now safeguarding" and "I have had a range of training around adult protection." The training records we looked at confirmed this. We asked care staff if they understood what it meant to protect people from abuse. Staff we spoke with were able to tell us what abuse was and how they would recognise it. For example, if someone had unexplained bruising. Staff told us they were confident any safeguarding concerns they raised would be taken seriously by management.

We saw the service had an up to date whistleblowing policy and procedure. Whistleblowing is one way in which a worker can report concerns, by telling their manager or someone they trust. Staff we spoke with had an understanding of their responsibilities in keeping people safe. Comments from care workers included, "I feel really confident about protecting people and I know we have a whistleblowing procedure," "I have just done my safeguarding training and I would not hesitate to tell [name of registered manager] if I was worried about anything, she even encourages this" and "The safest thing about working here is that the manager's door is always open."

CQC was made aware of six safeguarding concerns that had been raised with the local authority safeguarding team in the previous 12 months. Two of these were regarding the same issue. We saw all records of any safeguarding concerns were held centrally on a safeguarding file along with updates on any investigations or actions undertaken. We saw the same process was in place to record any incidents or accidents. This meant procedures were being followed to keep people safe.

We checked four staff personnel files to see if the process of recruiting staff was safe. The files related to a mixture of long standing members of staff and staff who had been employed in the last 12 months. Each file contained acceptable references to confirm suitability in previous relevant employment, proof of identity, including a photograph and a Disclosure and Barring Service (DBS) check. A DBS check provides information about any criminal convictions a person may have. This helped to ensure people employed were of good character. This confirmed recruitment procedures in the service helped to keep people safe.

We checked to see whether medicines were stored securely and dispensed safely.

Every person we spoke with was happy with the support they received with their medicines. Comments included, "They are really accurate when they give me my medicines, they keep a record of it," "I always get my tablets on time" and "I always get the right medicines, I keep an eye on them"

The registered manager told us support with medicines for people living at Guildford Grange ranged from accepting delivery from the pharmacist and taking the medicines to the person's flat through to giving the person their medicines as prescribed throughout the day. People's medicines were stored in their own kitchens in a locked cabinet. They were kept in their original packaging and bottles, rather than dispensed into a monitored dosage system. There was a system in place for the registered manager to sign for the receipt of medicines delivered by the person's local pharmacy. The registered manager told us they checked the medicines when they were delivered to ensure they matched people's prescription.

Everyone who received a service from Comfort Call had a communication book in their flat and this contained a section to be completed by staff for everyone who received support with their medicines. The section included a Medication Administration Record (MAR). The information on the packaging and bottles regarding the dosage and frequency of each medicine was transcribed by staff onto the MAR. The service

had an up to date and comprehensive medicines policy and procedure. Care workers were expected to sign and record the time on every occasion the person was supported to take their medicines, or record a reason why it had been declined. There was space at the end for the MAR to be audited. Staff we spoke with told us they received training in supporting people with their medicines. One care worker told us, "I am involved in administering medication I am fully trained in relation to this." We saw MARs were regularly audited by senior carers and not just when the communication book was full and returned to the office to be archived, usually between one and two months later. We looked at four people's MARs and all were completed correctly and all had been audited weekly.

Some people living at Guildford Grange were prescribed controlled medicines. Strict legal controls are needed for these medicines. This is because they may cause serious problems like dependence and harm if they are not used properly. Sometimes people use these medicines illegally for reasons that are not medical, and so extra safety measures are needed to make sure they are prescribed, supplied, used and stored safely and legally. Controlled medicines include some strong painkillers, for example morphine. The National Institute for Health and Care excellence (NICE) guidelines recommend two members of staff should sign to confirm the controlled medicine has been given to the person. This is an extra step to ensure the person receives their medicine as prescribed, and care workers have a witness if any controlled medicines were to go missing. We saw two care workers had signed every time someone was supported to take these types of medicines.

This meant people's medicines were managed safely and people were supported as required to take their medicines as prescribed.

All the care records we looked at included risk assessments for all areas of people's health and well-being. They contained a detailed assessment of each risk, such as risk of falls. This included information regarding the likelihood and severity of each risk along with what could be done to reduce the risk, for example 'give reassurance, and advise to take their time.' We saw people's assessments were regularly reviewed and updated as required. This meant the information available to staff on how best to support a person accurately reflected their current level of need.

Is the service effective?

Our findings

People living at Guildford Grange told us they thought the staff were well trained. Comments included, "The staff really seem to know what they are doing," "They do the job very well, very professional and efficient" and "They know just what I need doing, they do all sorts of little extras for me."

The service had an up to date training and development policy. This included reference to an induction for all new care staff and the need for new staff to demonstrate they met the requirements of the care certificate within 12 weeks of commencing their employment with Comfort Call. The Care Certificate is a set of standards that social care and health workers follow in their daily working life. These are the minimum standards that should be covered as part of induction training of new care workers.

All of the staff files we looked at contained a written record of an induction taking place. Everyone had a health and safety building induction with a representative of the landlord. In addition staff employed within the last three years had completed an 'introduction to caring learner workbook' and completed an, 'observational shadow training and competency assessment and development pack.' These were all signed and dated by a manager when successfully concluded. Staff we spoke with told us the induction process had prepared them for the role of a care worker. Comments included, "We all undergo a week's training off-site and full induction," "I was instantly made welcome and made to feel part of the team" and "I think the training is really good, it prepares you for the job and helps you to improve your future prospects."

Comfort Call provides mandatory training for all care staff to complete at the start of their employment and there is a refresher session in each area to complete every 12 months thereafter. The registered manager and care staff told us training was held at a centrally located Comfort Call office. This included some class room style teaching for more practical areas of care and support. For example, learning safe moving and handling techniques. Other subjects were covered by reading through a workbook in a particular area, for example record keeping and food safety. The care worker had to successfully complete a written test at the end of the workbook to confirm their understanding of the subject.

We looked at the training matrix which showed the training staff were expected to complete every 12 months. The registered manager told us this information was stored electronically and the system automatically reminded them when training was due for every member of staff. The registered manager told staff to select a suitable date when the training was available and they booked them onto it. Staff told us they undertook mandatory training every year and found this useful. One care worker told us they would also like some more in depth training in key areas relevant to the job. For example, how best to support people living with dementia. We spoke with the registered manager about this and they told us they did try and secure more specialist training whenever possible. They gave us examples of a specialist nurse delivering training on supporting a person living with Parkinson's disease, and a person of Muslim religion living at Guildford Grange talking with care staff about what this meant in terms of providing appropriate support.

The service's training and development policy stated staff would be provided with supervision at three

monthly intervals, which would give them a formal opportunity to talk with their line manager. Supervisions are meetings between a manager and staff member to discuss any areas for improvement, concerns or training requirements. The registered manager told us they also undertook reactive supervisions in a particular area, for example medicines management. These took place if a member of staff specifically requested it or if there was an issue with their practice in a particular area. As well as regular supervision, team meetings and observations of care worker's practice the policy stated staff should have a yearly appraisal. Appraisals are meetings between a manager and staff member to discuss the next year's goals and objectives and to identify what well and not so well in the past 12 months. All the staff files we looked had written records of supervisions and appraisals taking place in line with the service's own policy. Staff told us they felt supported to undertake their jobs safely and effectively. One care worker told us, "I have regular, good quality supervision."

Some people living at Guildford Grange had been assessed as needing support to eat and drink. This could involve care worker's preparing meals for people, physically supporting them to eat or drink, and monitoring people's fluid and food intake to ensure they maintained a healthy weight. Everyone we spoke with who needed this type of support told us they were satisfied with the care they received and it reflected their needs and preferences as described in their care plan. Comments included, "I have a list of things I like to eat, and the staff work with that," "They always leave me a nice meal" and "They made a plan with me about the food I like, they do very well for me."

There was also a café open to people every weekday lunch time to purchase food and drinks. We were told Sunday lunch was also served once a month. The café was run by a private company.

The care records we looked at showed people had access to a wide range of health and social professionals. People told us all the staff monitored their health needs and they assisted them to access the appropriate health and social care support, as and when required. One person told us, "They get straight on to the district nurse if they are concerned about me." Following on from our last inspection in April 2015 we saw the registered manager had implemented a 'rolling record' to track visits from professionals. For example, we saw it was recorded for one person that their GP had been called out, it was recorded when the GP had visited and what their advice had been. When any recommended actions had been completed the rolling record was then filed on the person's care record. This meant all staff were aware of the outcomes of visits by any health and social care professionals.

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.

For people living in their own home, this would be authorised via an application to the Court of Protection. We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty were being met. We did not observe any restrictions or restraints in place at Guildford Grange. The service had an update to policy and procedure on gaining consent when a person needed bedrails or a lap belt to reduce the risk of falling.

We saw staff had received training about the MCA. Care staff we spoke with understood the importance of the MCA in protecting people and the importance of involving people in making decisions. People told us their care workers ensured they agreed to any support offered before it was undertaken. One person told us, "Before they do anything personal for me they always ask permission."

Is the service caring?

Our findings

Everyone we spoke with told us all the staff were kind and caring. The discussions we had with people about all the care staff, senior care workers and registered manager were overwhelmingly positive. Comments included, "Everything has been spot-on since the day I moved in," "They [staff] are willing to go just that bit further," "I can have a real laugh with the staff, they are so friendly," "It is the their kindness and helpfulness that helped me settle in," "They are a fantastic team, they have got to know me so well" and "They are kindness itself, nothing is too much trouble"

It was clear from our conversations with staff they knew everyone's likes and dislikes, and were committed to making sure everyone was as happy and safe as they could be. People told us "They [staff] have got to know me so well, they know what makes me tick," "I can be really difficult at times and they seem to understand that" and "The staff understand that sometimes my mood is low and they are very good with me."

Throughout our inspection It was good to see people enjoying positive relationships with the staff team as a whole, including the registered manager and senior carer. We saw people and staff chatting and laughing together. Overall this produced a happy and relaxed atmosphere.

Everyone acknowledged that they were treated with dignity and respect. Every time a member of staff took us to person's flat to introduce us we saw they always knocked on doors before opening them and called out to ensure it was alright to enter. People confirmed this always happened. One person told us, "Everyone rings the bell on my flat door before coming in." One care worker told us, "It is essential that we support people's dignity, it's what it's all about. It means allsorts; closing the door of the bathroom, knocking on doors, using peoples preferred names, getting permission, [giving people] choices."

People told us the staff encouraged them to be as independent as possible. One person said, "They have made me more independent." Care staff told us how they tried to support people to be as independent as possible while ensuring the person's care and support needs were met. They were able to describe different approaches they might use depending on the person they were with and how that person was feeling at the time. For example, one care worker gave an example of guiding and encouraging people to do as much as they can for themselves rather than staff rushing in and taking over. Another care worker told us how they got to know people's relatives and would ask them for their views on how best to support the person.

Staff we spoke with were enthusiastic about their jobs and showed compassion for the people they supported, people's relatives, and their colleagues. Comments included, "I love working here, we all work here for the same reason [which is] to improve lives," "We are all willing to pull together for the sake of the service users," "I love this job, it is very satisfying" and "I certainly wouldn't be in this job if I did not care, it can be very difficult at times but always rewarding."

Is the service responsive?

Our findings

There was an activities timetable on display in the communal lounge area which showed a wide range of activities were on offer. This included bowling, dominoes and pool. There was a trip out to Lincoln Show arranged for the day after our inspection. People told us they were looking forward to it. The registered manager told us some of the weekly well-being hours were used to fund an activities coordinator for everyone living at Guildford Grange. Comments included, "There is a huge notice board that keeps you informed of everything that's happening in the service" and "I take part in anything that's going, they help me keep busy."

Not everyone we spoke with was interested in joining in with activities. However, throughout our inspection we frequently saw members of staff taking time to sit and chat with people, not just those taking part in activities. We saw people enjoying a sociable 'knit and natter' session. A green grocer set up stalls in the large communal entrance area and we saw people buying fresh vegetables and fruit. The registered manager told us this happened each week. People living at Guildford Grange also ran their own 'in kind' shop with support from local businesses.

Every person living at Guildford Grange who received a service from Comfort Call had a care record held in the managers' office as well as copy on the person's file in their own home. Each record contained a pre-service assessment completed by the local authority, where the person was known to them. This gave information to staff about the level of support a person need prior to moving in. In addition to this the registered manager or senior carer undertook an assessment of the person's health and social care needs with them after they moved in. We saw these assessments also included the person's relatives where appropriate. People told us, "[Name of registered manager] and my family put a plan together for me" and "The staff do all the paperwork with me to make sure they know what I need doing."

We saw people's care records contained personal information, including their life story. This gave care workers good information on people likes and dislikes and enabled them to provide person centred care. Care records contained written evidence of regular individual service reviews taking place. We saw these reviews involved people's relatives where appropriate. One person told us, "My care needs changed when I came out of hospital and they [staff] have been so understanding."

People were clear about who they needed to talk to if they had any problems or difficulties. The registered manager told us they had an 'open door' policy which meant people living at Guildford Grange and their relatives were welcome to approach the registered manager at any time. Comments included, "[name of registered manager] is always asking me if I need to share any concerns, she is always available," "The staff team definitely listen to us, they respond in a really positive way," "They are more than happy to encourage us to speak out if there are any problems," "I have every confidence in the managers and the staff, they follow-up any concerns I raise" and "[Name of registered manager] responds immediately if I ever raise a concern, I have never had to complain, it never comes to that."

We saw the service had an up to date complaints and compliments policy and procedure. This gave people

details of who to complain to and who to contact if they weren't satisfied with the initial response. This information was included as part of people care records in their own home and was on display on the notice board outside the registered manager's office.

The registered manager kept a record of all complaints they received. This included any action taken to resolve the complaint and whether the person was satisfied with the response they received.

Is the service well-led?

Our findings

The registered manager had been in post since 2011. People living at Guildford Grange told us the service was very well run and were satisfied with the service they received. Everyone we spoke with knew who the registered manager was and spoke highly of her and other members of the team. Comments included, "All the managers and staff are approachable, there is nothing that [Name of registered manager] will not do for you," "[Name of registered manager] does her best to get to know us all, [Name of registered manager] is always popping in to see how things are," "[Name of registered manager] helps me out as much as she possibly can," "I cannot speak highly enough of the managers, I know they have my best interests at heart " and "It is lovely here, lovely, lovely, lovely."

All the staff we spoke with told us they had every confidence in the way the service was managed. Comments included, "The [registered] manager helps us all work to our strengths," "The [registered] manager works alongside us, she leads by good example," "All the managers are approachable and supportive," "The managers work hard to help us work together for the benefit of the people that use this place" and "The [registered] manager is so good, she can be very strict about standards, but she will help you whenever she can, I could go to her about anything."

We asked if the people who received a service from Comfort Call and the staff employed by them were asked for their views on the service provided and were they able to make any suggestions for improvement. The registered manager told us she attended a monthly meeting for everyone living at Guildford Grange with the representative from the housing landlord, People for Places. In addition there were weekly meetings to discuss activities on offer, which everyone was welcome to attend. People we spoke with confirmed this. They told us, "We have regular meetings where they ask us how everything is" and "[Name of registered manager] attends lots of meetings; she makes sure everything is alright."

The provider sent out a yearly questionnaire from head office to everyone who received a service from Comfort Call and to every member of staff. These had just been sent out for 2017. We saw the results from the previous questionnaire in May 2016. 40% of people in receipt of a service from Comfort Call at Guildford Grange had responded. The questionnaire asked people how satisfied they were with the care they received and the responses were overwhelmingly positive.

The registered manager told us she they met with all staff for a team meeting every three months. The meetings followed a corporate agenda set by head office. This included any changes to policies and procedures and any updates to national guidance and legislation. There was time after this to discuss more local issues. We saw minutes were kept for every meeting and they confirmed team meetings were held every three months as per the service's own training and development policy. Staff who couldn't attend were expected to read the minutes and then sign them to confirm this. Staff told us, "We have regular staff meetings and I know that everyone is comfortable to speak out about things" and "We have regular staff meetings, which I appreciate."

We looked at the arrangements in place for quality assurance and governance. Quality assurance and

governance processes are systems that help providers to assess the safety and quality of their services, ensuring they provide people with a good service and meet appropriate quality standards and legal obligations. As well the medicines and file audits the registered manager completed a monthly 'branch return' audit with the regional manager. This covered all areas of service provision and if any actions were identified we saw progress was recorded and followed up each month until the issue was resolved. We saw evidence of quality assurance visits being regularly undertaken on people's care records.

We reviewed the service's policy and procedure file, which was available to staff in the office downstairs. The file contained policies and procedures covering all areas of service provision relating to both people in receipt of a service from Comfort Call and the staff that worked for them. The registered manager told us some of the paper versions of the policies and procedures needed replacing with a copy of the most recent electronic version. We saw the electronic version of the policies and procedures were up to date and regularly reviewed. This meant they reflected current legislation and good practice guidance.

The registered manager was aware of their obligations for submitting notifications in line with the Health and Social Care Act 2008. The registered manager confirmed that all notifications required to be forwarded to CQC had been submitted. Evidence gathered prior to the inspection confirmed that a number of notifications had been received.