

Compassionate Healthcare Limited

Compassionate Healthcare Limited aka Scope House

Inspection report

Unit F13
Scope House, Weston Road
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19 August 2022

06 September 2022

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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

Compassionate Healthcare aka Scope House is a domiciliary care service providing personal care to people in their own homes. At the time of the inspection 16 people were receiving personal care and support to remain as independent as possible. 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

People were positive about the care and support provided. There was a positive culture throughout the service which focused on providing person-centred care. People told us their privacy and dignity was respected and they were supported to be as independent as possible.

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. We have made a recommendation in relation to systems in place to assess mental capacity, to ensure there is a consistent approach, fully in line with The Mental Capacity Act 2005 (MCA).

Staff were trained in safeguarding and knew how to recognise signs of abuse and the action they needed to take to report any concerns. There were enough staff to support people safely. People received their medication safely and as prescribed.

People's individual risks around their health and wellbeing were assessed and managed. Care plans were in place, however, aspects of record keeping would benefit from further person-centred information being included and being kept fully up to date.

Staff undertook training which supported them in their roles. People felt able to raise concerns and had information about how to make a complaint if necessary.

The service was well-led. The management team had a clear strategy for developing the service. They focused staff training and good communication to help provide quality care. Staff were well supported, and effective systems were in place to monitor the quality of the service. The provider sought people's feedback to help develop the service.

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 10 July 2017 and this is the first inspection.

Why we inspected

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

report from our last comprehensive inspection, by selecting the 'all reports' link for Compassionate Healthcare Limited aka Scope House on our website at www.cqc.org.uk.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service 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.

Compassionate Healthcare Limited aka Scope House

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

The 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 houses and flats.

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 were two registered managers in post, who shared the management responsibilities.

Notice of inspection

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.

Inspection activity started on 18 August 2022 and ended on 6 September 2022. We visited the location's

office on 18 August and 6 September 2022.

What we did before the inspection

We reviewed information we had received about the service since their registration with the Care Quality Commission and sought feedback from the local authority. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used information gathered as part of monitoring activity to help plan the inspection and inform our judgements. We used all this information to plan our inspection.

During the inspection

We spoke with both registered managers and three care staff. We also spoke with three people who used the service and three relatives. We reviewed a range of records, including three people's care records and various medicines records. A variety of records relating to the management of the service, including policies and quality of the service, were reviewed.

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

- Staff were trained in safeguarding and knew how to recognise signs of abuse and the action they needed to take to report any concerns.
- Staff were encouraged and supported by the registered managers to feel safe in raising any concerns or issues.
- The management team were aware of their responsibility to report safeguarding concerns to the local authority and where required had done so. However, the management team would benefit from further guidance around local procedures in relation to lower level concerns and when to notify CQC.

Assessing risk, safety monitoring and management

- People's individual risks around their health and wellbeing were assessed and managed. Any environmental risks and the safe use of equipment were also assessed.
- The provider ensured staff were given information about how to support people safely prior to delivering care. However, some records had not been updated to reflect changes to people's circumstances. The registered managers agreed to address this straight away.
- The provider used an electronic system for scheduling and monitoring care visits. However, network problems sometimes impacted on staff's ability to log in and out. The provider was considering options to address this. They continued to monitor calls and took action to ensure people received their care as planned.
- There was a business continuity plan in place to ensure people's care would continue in the event of an emergency.

Staffing and recruitment

- There were enough staff to support people safely.
- The provider was recruiting staff so they could provide care to more people in future. They had used effective strategies such as the government's sponsorship scheme to help recruit staff.
- People told us staff were occasionally late but usually arrived as planned. Staff felt they had enough time to support people without having to rush.
- The provider followed appropriate procedures when recruiting staff to ensure they were suitable to work with vulnerable people.

Using medicines safely

- People received their medication safely and as prescribed.
- The provider assessed risks relating to medicines management and put guidance in place for staff to

reduce any risks.

- Staff had received training and competency checked before they were able to administer people's medicines.

Preventing and controlling infection

- Safe infection control measures were in place. The provider had an up to date infection prevention and control policy.
- Staff received training in infection control and the safe use of personal protective equipment (PPE), to reduce the risk of infections including COVID-19.
- PPE boxes had been placed in people's homes and were refilled to ensure supplies were always available for staff. People told us care staff always wore PPE.
- The provider undertook audits and spot checks to ensure staff followed correct procedures.

Learning lessons when things go wrong

- Where accidents and incidents had occurred, these were regularly reviewed to help identify any trends and consider action to reduce the risk of reoccurrence.
- The management team were open to learn lessons where required, and shared any learning throughout the service.

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.

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

- People made their own decisions where possible and their consent was sought before care was provided. People had signed consent forms within their care plans. However, where family representatives had signed, records needed to be clearer about the basis on which they had signed. For example, whether they had legal authority to do so or were being consulted with in the person's best interests.
- Staff had undertaken training in the MCA, including bespoke training with the local authority and understood the principles. A member of staff told us, "Clients have the right to refuse."
- Where necessary mental capacity assessments and best interest decisions were carried out and recorded. However, some assessments were unclear about the decision being assessed and various forms were in use.

We recommend the provider reviews systems in place to assess mental capacity, to ensure a consistent approach which is fully in line with the MCA.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Staff undertook a baseline assessment and relevant risk assessments to ensure people's needs could be met and were delivered in line with standards.
- People's care was planned and delivered in accordance with best practice and current guidance. For example, the provider liaised with and followed the guidance of healthcare professionals.

Staff support: induction, training, skills and experience

- Staff undertook training which supported them in their roles.
- Before starting work at the service new employees completed an induction. Staff new to care were required to complete the Care Certificate.
- Staff were encouraged to develop their skills, including undertaking nationally recognised qualifications.

- Staff received regular supervisions with spot checks to check they carried out their responsibilities well. Specific individual support was being provided to staff where needed.
- Staff felt well supported by the provider. Communication within the service was good and staff were kept up to date with changes. A staff member told us, "[Manager] always goes to extra lengths about how we approach new clients."

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

- Staff supported people to eat and drink enough to maintain a balanced diet, where required.
- Care plans included information about people's nutritional needs and their preferences around food and drink.

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

- Where people had specific health needs, these were recorded to ensure staff knew how best to support them.
- People's care plans included information about their oral health needs.
- Staff referred to and liaised with other services involved in supporting people, to ensure their needs were met. For example, referring to the district nurses and occupational therapists.

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

- Overall, people and their relatives were positive about the support they received. Comments included, "I can't praise them [the staff] enough" ; " I've found them excellent, I'd be lost without them" and " There are different carers, I know them all, they are all very nice."
- People were supported by staff who were kind and caring in their approach. However, feedback indicated that communication from certain staff could occasionally be better. Managers had already identified this and were mentoring staff with appropriate communication styles.
- Staff received training in relation to equality and diversity. Staff approach and understanding in this area was considered as part of the interview process.

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

- People and their relatives were involved in decisions about their care. A relative told us, "[Manager] came and met the family and discussed what we wanted and said she would fit someone [staff] to meet [name's] needs."
- People were aware of their care plans and told us staff discussed their wishes before providing care.
- People were supported by the provider to actively express their views, through various means such as reviews and questionnaires.

Respecting and promoting people's privacy, dignity and independence.

- People were treated with dignity and their privacy was respected. People told us "They [staff] have got a lot of respect" and "I don't have male carers, for my own dignity."
- Staff received training and had a good understanding of the importance of treating people with dignity and respect, providing examples of how they did this in practice.
- Managers undertook audits and observations, to ensure staff supported people in an appropriate manner.
- The service promoted people's independence. Care plans included guidance for staff to encourage people to remain as independent as possible.

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

- Overall, people were positive about the support they received and told us their wishes and preferences were met. We saw examples of positive outcomes for people.
- People had personalised care plans, which in the main reflected their needs, but some would benefit from further individualised information. However, staff understood and were able to describe people's individual needs well.
- Care plans included information to enable staff to support people's religious and/or cultural beliefs and needs.
- The management team undertook regular reviews with people to ensure their needs were being met. Where required actions had been taken to address any issues raised.

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.

- People's communication needs had been assessed and care plans included guidance for staff to support people effectively.
- Information could be provided in accessible formats, such as large print, for people where required.

Improving care quality in response to complaints or concerns

- People felt able to raise concerns and had information about how to make a complaint if necessary.
- Feedback confirmed managers were accessible and responsive to any issues raised. One person told us, "The manager rings to see how I am and the owner. There's a number to ring and I would be able to speak with them with any concerns. Everything is fine."
- There was a complaints procedure in place and records showed that concerns were taken seriously, responded to, and robust actions taken to make any necessary improvements.

End of life care and support

- People's end of life care needs were considered within their care plans. Staff had received training in providing end of life care.
- Where required staff liaised with health professionals to support people at the end of 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-centered care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care and How the provider understands and acts on the duty of candour, which is their legal responsibility to be open; honest with people when something goes wrong

- A new registered manager had been promoted from within the service, they were working alongside the previous registered manager as part of their induction. They were keen to learn, improve the service where necessary, and were passionate about providing a quality service.
- The provider had effective auditing systems to maintain ongoing oversight and continued development. They had implemented new staff roles and strategies to manage the growth of the service.
- The management team understood their responsibilities in relation to the duty of candour. They worked in an open and transparent way.
- The provider was aware of the legal requirement to notify CQC about certain events. The registered manager had submitted notifications, apart from in two cases due to a misunderstanding. However, other appropriate action had been taken and clarification was provided during the inspection.

Promoting a positive culture that is person-centered, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive culture throughout the service which focused on providing people with high standards of support and care. The registered managers were focused on staff training, support and good communication.
- The registered managers had a good understanding of protecting and respecting people's human rights and promoted the importance of supporting people's different and diverse needs.
- Staff were positive about the support from the management team. Staff told us, "I feel comfortable with the way I'm treated, and feel well supported" and "There's always support - whenever you call [manager] they always pick up."
- The registered managers communicated well and there were regular meetings to provide updates and information. Staff told us they were able to share their views and make suggestions.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider sought feedback from people and staff and used it to develop the service. A carer told us, "They [people using the service] have a questionnaire about what they think and what they think we should improve."

- The service worked in partnership with others including health and social care professionals to ensure people received the support they needed.