

Komplex Care Limited

# Komplex Care Limited

## Inspection report

1 Hawksworth Road  
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Telford  
Shropshire  
TF2 9TU

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12 May 2021  
26 May 2021

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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

Komplex Care is a domiciliary care agency providing nursing and personal care to adults and children with a range of support needs in their own homes. At the time of the inspection they were supporting 22 people.

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

People told us they felt safe when being supported by staff. People's needs and risks were assessed, and staff knew how to manage them. People were supported to take their medicines as prescribed. Staff used the appropriate personal protective equipment (PPE) to ensure people were protected from risk of infection.

Staff had received training to ensure they had the skills and knowledge to meet people's needs. People were supported to meet their nutritional needs. People's care plans were updated regularly and reflective of their current needs.

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.

People told us staff were kind and caring. People were encouraged to remain as independent as possible and were given choices.

People and their relatives were involved in the planning and reviews of their care. People and relatives knew how to raise concerns. Where complaints had been raised, they had been responded to appropriately and action taken as a result.

The provider had quality assurance systems in place and in some cases, action had been taken as a result to improve the service. The registered manager had identified areas for improvement within the service and these were in the process of being actioned. Staff had regular supervisions and felt supported by their management team.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)  
This service was registered with us on 10/10/2019 and this is the first inspection

### Why we inspected

The inspection was prompted in part due to concerns received about skin integrity, training and care records. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe, effective, caring, responsive and well-led sections of this full report.

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

The service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service effective?**

The service was effective.

Details are in our effective findings below.

**Good** ●

### **Is the service caring?**

The service was caring.

Details are in our caring findings below.

**Good** ●

### **Is the service responsive?**

The service was responsive.

Details are in our responsive findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our well-Led findings below.

**Good** ●

# Komplex Care Limited

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

The inspection was carried out by an inspector and an 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 nursing personal care to people living in their own houses and flats.

The service had a manager registered with the Care Quality Commission. 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.

#### 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.

Inspection activity started on 12 May 2021 and ended on 26 May 2021. We visited the office location on 12 May 2021.

#### What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with two people who use the service and two relatives about their experience of the care provided. We spoke with seven staff members including the registered manager, the nurse manager and care workers.

We reviewed a range of records. This included three people's care records and multiple medicines records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service including audits and policies and procedures.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- People had risk assessments in place with clear guidance for staff on how to manage the risks. For example, where people were at risk of choking, the instructions were clear to staff on how to prepare their food, how to support them to eat and what position the person should be sat in to reduce the risk of harm.
- People told us they felt safe when being supported by staff. One person said, "Yes, I feel safe as carers are always available to help".

### Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff had a good understanding of how to safeguard people from abuse and how to raise concerns both within and external from the service.
- Records showed that appropriate action had been taken when safeguarding issues had arose.
- Lessons were learnt when things went wrong. For example, where medicines errors had been made, the registered manager had introduced an action for two people to have oversight of the medication administration records (MARs).

### Staffing and recruitment

- Safe recruitment checks were carried out to ensure that the service only employed people who were suitable to work with vulnerable adults and children.
- People and relatives told us staff were not late for calls and did not miss their calls. One person said, "I've had no missed calls, I have bank staff I can call upon".

### Using medicines safely

- People were supported to take their medicines as prescribed. Where people were able to, they were encouraged to take their medicines independently and risk assessments were in place where required.
- Staff had been trained to support people with their medicines and had competency checks regularly.

### Preventing and controlling infection

- Staff had received training in relation to infection, prevent and control, covid-19 and the use of personal protective equipment (PPE).
- People and relatives told us that staff wear the appropriate PPE for all care calls.
- Staff confirmed they had access to PPE when required.

# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs and choices were assessed by skilled staff. This information had been used to produce person centred care plans and risk assessments.
- People and their relatives had been involved in their assessments and reviews of their care.
- People were introduced to the carers before they started supporting them.

Staff support: induction, training, skills and experience

- People and relatives told us that staff had the skills and knowledge to meet people's needs. One relative said, "They are very very good, couldn't wish for better".
- People had regular carers, a nurse manager and an operations manager allocated to their package to ensure continuity of care.
- The majority of staff told us they felt supported by the management team and had received mandatory and person specific training. However, some staff said they felt they would like more training around some areas of care. We discussed this with the registered manager and the nurse manager, they told us that they offered as much training and shadowing as the carer would like before being signed off as competent by the nurse manager. Other staff we spoke with and records we viewed confirmed this.

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were supported to meet their nutritional needs safely.
- People told us they had access to healthcare services when required.
- We saw that when people required support from the GP, district nurse, dietician and other professionals, the appropriate referrals and contact had been made to ensure people's needs were met safely.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an



application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff had received training around the MCA and had a good understanding of what this meant for people.
- Staff gained consent before supporting people. People were supported in line with the MCA.
- We looked at one person's records who had restrictions in place via the Court of Protection. This was clearly documented in their care plan and staff were aware of the restrictions that were in place and what this meant for them.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People and relatives told us they got on well with staff and they were kind and caring.
- People had regular staff supporting them. One person told us, "Yes I have consistently the same staff coming to me. This is essential to maintain continuity of care and prevents constant training of new staff."
- Staff explained that they were able to build good relationships with people and knew them well.
- People's equality, diversity and religious needs were respected and met by staff.
- We saw compliments from people who use the service, their relatives and professionals had been recorded and shared with staff. These compliments were expressing their gratitude towards specific staff and commenting on their caring nature.

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

- People told us that they were supported and encouraged to make their own choices.
- People and their relatives were involved in their care as far as possible. This included being involved in the advertising of the job for the staff member and deciding which carers they felt were appropriate to support them. One person told us, "As a client I stated what my care needs are and was able to interview prospective carers prior to them being selected to work with me."

Respecting and promoting people's privacy, dignity and independence

- People told us their privacy and dignity was respected by staff at all times and staff were able to give examples of how they did this.
- Staff understood the important of encouraging people's independence and care records were written in a way that promoted this.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

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

- People's care records we looked at were personalised and included their likes, dislikes, preferences and personal history. We saw they focused on people's strengths, highlighting what the person could do themselves, as well as what the person required support with.
- People and their relatives were involved in regular reviews of their care and their care records reflected their current needs.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service assessed and identified people's communication needs and ensured staff had the information they needed to communicate effectively with people. For example, for people who could not verbally communicate, their care plan gave guidance on how to communicate with them including noises to be aware of and facial expressions.

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

- Where relevant people were supported to access the community and follow their interests and hobbies. For example, one person was supported to attend their appointments and go shopping.

Improving care quality in response to complaints or concerns

- People and relatives told us they knew how to complain and felt comfortable doing so where necessary. A relative told us, "I call the office regularly and they always asking if everything is ok"
- We reviewed the provider's complaints records and found that complaints were appropriately recorded and responded to in a timely manner

End of life care and support

- Where people were happy to, their preferences and wishes in relation to end of life care had been discussed and care plans put in place to ensure these were met.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager had audits in place for areas including; medicines, accidents and incidents and care plans. There was evidence that these had often been used to drive improvement within the service. For example, where medicine audits had been completed and identified errors, a system for two staff members to oversee the medication administration charts (MARs) had been introduced.
- However, it was not always clear if action had been taken and trends identified for all audits completed. The registered manager had an action plan for the service which included actions to address this issue.
- Registered providers are required to notify the Care Quality Commission (CQC) of certain incidents and events that happen whilst providing its service. We saw that notifications had been submitted in line with this legal responsibility.

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

- The registered manager told us they had sent out surveys to staff and people using the service. However, only some of the people and relatives we spoke to had received one.
- The registered manager explained that due to very few responses an analysis of the feedback and action taken had not been completed but they were currently working to address this issue.
- Despite some people and relatives not receiving a survey, they told us they felt listened to and able to call the office with concerns at any time.

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

- The registered manager promoted an honest and open culture among staff.
- Staff told us they felt supported by their management team and could call the office anytime for advice or support.
- Staff received regular supervision and spot checks to ensure they were confident in their role and had the opportunity to raise concerns.
- People and relatives spoke positively about the registered manager and the management team that was allocated to their care package. One person told us, "Overall, yes I would recommend them [the service]. They are an excellent agency that provide generally a great service. My previous experiences [of other agencies] has not been positive but this company has good management and is a breath of fresh air."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider and registered manager understood their responsibility regarding the duty of candour and ensured the service was open and transparent.

Working in partnership with others

- The service worked well with other agencies and professionals. People told us they had access to healthcare professionals when required.
- Professionals we spoke with said they were kept informed and updated at all times and found that the service was always professional to work with. One professional told us, "They have been open and honest regarding all aspects of the package and have kept me updated and well informed."
- Another professional we spoke with stated, "They will give realistic time scales and recruit to the packages and involve the family in the decision making and choice of staff. They communicate very well and in a timely manner."