

Connected Health Limited

Connected Health Plus

Inspection report

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Date of inspection visit:
11 March 2021
12 March 2021

Date of publication:
21 April 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Connected Health Plus is a domiciliary care agency providing personal care to people living in their own homes. At the time of this inspection the service was supporting 82 people with personal care. 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 and their relatives told us staff usually came at the agreed times and were able to spend time chatting with people. Comments included, "They [the staff] are all regular they come four times-a-day and are on time. If they are delayed, they let us know" and "Within the half hour they [the staff] have time to talk to you and discuss everyday things." Records we reviewed showed people usually received their calls at the times they had requested and agreed. The provider had effective processes in place to investigate and resolve occasions when call times had differed from the planned times. Staff rotas did not always allow enough time for travel between calls. Therefore, we have made a recommendation about the provider's approach to staff rotas.

Records we reviewed showed people had received their medicines safely and as prescribed. One relative said, "Staff give [Relative's] medication, they encourage [Relative] to take it and wait by [Relative's] side." The provider had systems and checks in place to ensure the safety and quality of medicines administration was maintained, such as regular audits and staff competency checks.

People and their relatives said the staff wore the required personal protective equipment (PPE) when they were providing support. One person said, "They all wear PPE at all times. It always looks fresh and clean." Staff had received training on infection prevention and control practice, including specific training and guidance relating to COVID-19 and the use of PPE. Staff were knowledgeable good infection prevention and control practice and their competency using PPE was observed and checked regularly.

People and their relatives told us they felt safe with staff. Comments included, "I feel safe when they are here, they do all the jobs that I can't do. They sort everything out for me" and "I know [Relative] is safe in their hands and I feel safe". Staff had received safeguarding training and understood their role in recognising and reporting safeguarding concerns. There were systems in place at the service to appropriately manage safeguarding concerns.

There was an enthusiastic, positive and caring culture amongst staff at the service. Staff had good knowledge about the people they supported and told us they enjoyed working at the service. One person supported by the service said, "They [the staff] are providing a good service, they are the same people on a regular basis. They always ask before they do anything. They know the routine and how you like it done."

People and their relatives were able to give feedback about their care in a variety of ways. Examples included ongoing satisfaction surveys and during spot checks monitoring staff performance. The provider supported staff wellbeing and recognised their contribution in various ways. For example, they ran a scheme called 'Thank you Fridays' which involved senior managers making telephone calls to staff each Friday to thank them for their contribution and any specific good practice that week.

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

Rating at last inspection

The last rating for this service was good (published 25 February 2020).

Why we inspected

We received concerns in relation to late and missed calls, the management of medicines and staff infection prevention and control practice. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained good. This is based on the findings at this inspection. We found no evidence during this inspection that people were at risk of harm from the concerns raised. Please see the safe section of this full report.

Follow up

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Connected Health Plus

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

This inspection was carried out by one inspector. An Expert by Experience also assisted by carrying out telephone calls to gather feedback from people living at the service and relatives. 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

Connected Health Plus is a domiciliary care agency. It provides personal care to people living in their own homes.

The service did not have a manager registered with the Care Quality Commission (CQC). However, a manager had been in post for several months and was in the process of registering with CQC. This means the provider is 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 we needed to be sure that relevant senior managers would be in the office to support the inspection.

Inspection activity started on 11 March 2021 and ended on 12 March 2021. We visited the office location on 11 March 2021.

What we did before the inspection

We checked the information that we held about the service. This included statutory notifications sent to us by the provider about incidents and events that had occurred at the service. A notification is information

about important events which the service is required to send us by law. We also gathered feedback about the service from the relevant local authorities. We used all of this information to plan our inspection.

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 four people supported by the service and seven relatives about their experience of the care provided. We spoke with 13 members of staff including the operations director, senior managers, area managers and carers.

We reviewed a range of records. This included five people's care records and medication records. We looked at five staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- People and their relatives told us staff usually came at the agreed times. Comments included, "They [the staff] are all regular they come four times-a-day and are on time. If they are delayed, they let us know", "They [the staff] are very punctual" and "We are getting the package we asked for. They have all been brilliant."
- Staff told us they were able to complete their calls as planned, offer people assistance with any other tasks and spend some time chatting with people. One person commented, "Within the half hour they [the staff] have time to talk to you and discuss everyday things."
- The provider had a call monitoring system in place ensuring people's calls were being delivered as planned. This data was monitored by senior managers throughout the day to ensure people were receiving the care they needed.
- Records we reviewed showed people usually received their calls at the times they had requested and agreed. The provider had effective processes in place to investigate and resolve occasions when call times had differed from the planned times.
- Staff rotas did not always allow enough time for travel between calls. We discussed this with the operations director and manager highlighting this created a risk staff would not be able to complete people's calls within the planned times. Work to appropriately amend staff rotas was started immediately during the inspection.

We recommend the provider reviews and improves its approach to staff rotas ensuring staff are given sufficient time to travel between their calls.

- Staff were safely recruited. Appropriate checks were carried out to ensure new staff were suitable to work with vulnerable adults.

Using medicines safely

- Medicines were safely administered and recorded by staff who had the required knowledge and skills. One relative said, "Staff give [Relative's] medication, they encourage [Relative] to take it and wait by [Relative's] side."
- Records reviewed showed people had received their medicines safely and as prescribed.
- The provider had systems and checks in place to ensure the safety and quality of medicines administration was maintained, such as regular audits and staff competency checks.

Preventing and controlling infection

- People and their relatives said the staff wore the required PPE when they were providing support. One person said, "They all wear PPE at all times. It always looks fresh and clean."

- Staff had received training on infection prevention and control practice, including specific training and guidance relating to COVID-19 and the use of PPE.
- Staff were knowledgeable good infection prevention and control practice and their competency using PPE was observed and checked regularly.
- Staff were provided with sufficient supplies of PPE and this was monitored to ensure it was being used as expected.
- Staff were supported to access COVID-19 testing and senior staff had made considerable efforts to encourage all staff to get vaccinated.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse. People and their relatives told us they felt safe with staff. Comments included, "I feel safe when they are here, they do all the jobs that I can't do. They sort everything out for me", "I know [Relative] is safe in their hands and I feel safe" and "It [support from the service] makes us both feel safe and looked after."
- Staff had received safeguarding training and understood their role in recognising and reporting safeguarding concerns.
- Information and guidance about how to raise safeguarding concerns was regularly shared with staff and there were systems in place to appropriately manage any concerns raised.

Assessing risk, safety monitoring and management

- Risks associated with people's care were effectively assessed, monitored and managed. People had personalised risk assessments which were reviewed regularly and gave staff the information needed to manage the risks associated with their care.
- Staff told us they felt confident with the information in people's care plans. Staff also said senior staff were responsive when people's needs changed and they ensured care plans were updated promptly when required.

Learning lessons when things go wrong

- The provider had systems in place to effectively record and respond to any accidents and incidents that occurred.
- Senior managers maintained regular oversight of this information to ensure staff had taken appropriate action and lessons were learned and steps taken to prevent recurrence, when necessary.
- Relevant policies and procedures were in place to help guide staff.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; and how the provider understands and acts on their duty of candour responsibility

- There was an enthusiastic, positive and caring culture amongst staff at the service.
- Staff had good knowledge about the people they supported and told us they enjoyed working at the service. One person supported by the service said, "They [the staff] are providing a good service, they are the same people on a regular basis. They always ask before they do anything. They know the routine and how you like it done."
- There was a team of senior managers at the service who were knowledgeable, experienced and provided clear levels of accountability.
- Senior managers at the service understood their responsibilities regarding the duty of candour and promoted openness and transparency within the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Ratings from the last CQC inspection were clearly displayed as required.
- CQC had been notified of all significant events which had occurred, in line with the registered provider's legal obligations.
- There was a range of regularly reviewed policies and procedures in place to help guide staff.

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

- People and their relatives were able to access information online about what care staff had provided. They also told us staff based at the office were responsive and provided information and updates when needed.
- People and their relatives were able to give feedback about their care in a variety of ways. Examples included ongoing satisfaction surveys and during spot checks monitoring staff performance.
- Senior staff regularly engaged with staff providing ad hoc and scheduled support, information and guidance. Staff were encouraged to share their ideas to improve the service and they told us they felt well-supported in their roles.
- The provider supported staff wellbeing and recognised their contribution in various ways. For example, they ran a scheme called 'Thank you Fridays' which involved senior managers making telephone calls to staff each Friday to thank them for their contribution and any specific good practice that week.

Working in partnership with others

- Staff obtained advice from, and made referrals to, other health and social care professionals when necessary to ensure people's health and wellbeing was maintained.
- Local authorities reported there had been times since our last inspection when staff at the service were slow responding to requests for information and sometimes difficult to get in touch with. However, this had improved in the few month prior to this inspection and the service had responded positively to increased oversight and monitoring from the relevant local authorities.

Continuous learning and improving care

- The provider had systems in place to monitor, assess and improve the quality and safety of service being provided.
- The provider had recruited a quality manager to support with ongoing quality monitoring and to help develop the service's quality assurance processes.
- Records showed appropriate action and improvements were made when needed and staff were committed to continuously improving the service.