

Complex Care Professionals Limited

Complex Care Professionals

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Complex Care Professionals is a domiciliary care agency registered to provide personal care to people in their own homes. At the time of the inspection, there were 11 people using the service.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

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

The service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture.

Right support

There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. Staff were recruited safely, and relevant checks had been carried out. People were supported by staff who had been trained and were appropriately supervised. People's needs were assessed prior to the receipt of service.

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 practice.

Right Care

People were positive about the care and support they received. People were treated with dignity and respect, and their independence was encouraged. Staff understood how to protect people from poor care and abuse. People had personalised care plans which considered their needs and preferences.

Right Culture

The nominated individual and registered manager promoted a person-centred culture which was focused on meeting people's individual needs. The registered manager was focused on providing a quality service to people and was committed to the continuous improvement of the service. The registered manager and staff sought feedback and worked in partnership with others including health and social care professionals to ensure people received the support they needed.

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 11 May 2021 and this is the first inspection.

Why we inspected

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

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

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 

Complex Care Professionals

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 carried out by 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides nursing and 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 was a registered manager in post.

Notice of inspection

We gave the service short notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection. We also requested consent from people, their relatives and staff members to call them over the telephone.

Inspection activity started on 6 January 2023 and ended on 9 January 2023. We visited the location's office on both days.

What we did before the inspection

We reviewed information we had received about the service since it had been registered and asked the local

authority for feedback. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. This is information providers are required to send us annually with key information about the service, what it does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

With their consent, we spoke with 3 people using the service, 4 relatives and 3 members of staff over the telephone. We also spoke with the registered manager, the co-ordinator, the clinical lead and the nominated individual at the agency's office. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 4 people's care plans and associated records. We looked at 2 staff files in relation to recruitment. In addition, we looked at records relating to the management of the service including policies and procedures and staff training as well as audits and quality checks.

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse or avoidable harm. One person told us, "All the carers are very nice." Relatives spoken with did not have any concerns for their family member's safety.
- Staff had received training in safeguarding vulnerable adults and children and understood their responsibility to report any concerns. However, the staff were unsure about the reporting protocols outside the agency. The nominated individual updated the policies and procedures during the inspection and assured us all staff would be reminded of the relevant reporting procedures.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks associated with people's support with mobility and environment had been identified, assessed and managed.
- We noted not all risks had been assessed in relation to skin integrity and choking. The nominated individual immediately updated people's care plans to ensure appropriate risk assessment documentation was available for staff.
- The provider had a business continuity plan which described how people would continue to receive a service in the event of adverse circumstances.
- There had been no accidents or incidents, however, systems were in place to record and investigate any such events.
- Various methods had been established to ensure any lessons learned from observations of people's care, complaints, audits and people's feedback were communicated to the staff team.

Staffing and recruitment

- A sufficient number of staff were deployed to meet people's needs in a person-centred way. People told us they received care from the same team of staff. This meant there was a good level of consistency and staff were familiar with people's needs and preferences.
- Effective systems had been established to organise care visits, minimising the risk of late or missed calls. Staff told us they had enough time to support people effectively and to travel between visits.
- The provider had a recruitment and selection procedure. We noted there was a minor shortfall in one staff member's recruitment records. The registered manager agreed to address this issue. All other regulatory checks had been completed.

Preventing and controlling infection

- The provider had developed systems to help prevent and control the spread of infection. 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.
- Staff had access to PPE and people confirmed staff used the equipment when providing personal care.

Using medicines safely

- Medicines were managed safely. The provider's systems and processes were designed to ensure people had the level of support they needed to manage and take their medicines safely.
- Staff had access to best practice guidance and appropriate policies and procedures. They were trained to administer medicines and checks were carried out on their practice.
- Staff maintained electronic records following the administration of medicines. The records were checked at least once a month.

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 were assessed prior to receipt of a service.
- Information gathered during the assessment process helped to form care plans, with involvement from other relevant people to ensure people's needs were identified and met.
- People's needs were regularly reviewed to ensure they continued to receive the correct level of support.

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

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

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The registered manager and staff had completed appropriate training and applied the principles of the MCA. Staff understood the need to ask people for consent before carrying out care and people using the service confirmed this approach.
- Whilst people or a representative had consented to their care, we noted there was inconsistent information in one person's records. This issue was addressed during the inspection.

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

- The registered manager and staff made sure people received appropriate support to meet their healthcare needs. People's physical and mental healthcare conditions were documented within their care plan.
- The registered manager and staff worked closely with other social care and healthcare professionals as well as other organisations to ensure people received a coordinated service. Appropriate information was shared when people moved between services. In this way, people's needs were known, and care was provided consistently.

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

- People were supported to eat and drink in line with their needs and preferences.
- The registered manager explained food and fluid intake was monitored as necessary if people were at risk of poor nutrition and hydration.

Staff support: induction, training, skills and experience

- Staff were provided with appropriate support and training. People and their relatives told us the staff were competent and well trained. One relative said, "The staff are very good and deal with challenges well."
- New staff were supported through an induction programme, which included the provider's ongoing mandatory training. Staff training was monitored, to ensure staff completed their training in a timely way.
- Staff were provided with one to one supervision and an annual appraisal. This facilitated discussions around work performance, training needs and areas of good practice.

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

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

- People's rights were promoted, and person-centred care was delivered. People and their relatives expressed satisfaction with the care provided and made complimentary comments about the staff team. One relative told us, "The staff are lovely, very warm and also very considerate. They always crouch down to [family member] so they can listen to what [family member] wants."
- The registered manager promoted and encouraged inclusion. Staff had received training on equality and diversity issues and had access to a set of policies and procedures.
- Staff understood their role in providing people with compassionate care and support. They were knowledgeable and respectful about people's individual needs, backgrounds and personalities.

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

- People were given the opportunity to express their views about their care on an ongoing basis. This ensured they were involved wherever possible in decisions about their care and support.
- People told us the staff understood their individual needs and preferences and accommodated these when delivering their care.
- People were provided with appropriate information about the service. The information included details about what people could expect from the service.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected.
- Staff had access to policies and procedures and training about caring for people in a dignified way. This helped to make sure staff understood how they should respect people's privacy and dignity in a care setting.
- Staff understood their responsibilities for keeping people's personal information confidential. The nominated individual agreed to investigate ways staff could access the electronic care plans without using their personal mobile telephones.

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 received person centred care and support specific to their needs and preferences. People told us they were happy with their care and staff responded to any requests made for assistance.
- People's care plans were personalised to reflect their care needs. The plans identified people's specific support needs and preferences, including a list of outcomes and tasks. We found inconsistent information in one person's plan. The nominated individual addressed this issue during the inspection.
- Staff understood people's needs and it was evident people were supported to make choices and decisions, wherever possible. Staff documented the care people had received, in a respectful way.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The nominated individual and registered manager understood the Accessible Information Standard.
- People's communication needs were identified and recorded in their care plans. Information was available in a variety of formats and in a way people could understand.

Improving care quality in response to complaints or concerns

- People had access to a complaints' procedure. The procedure was clear in explaining how a complaint could be made and reassured people their concerns would be dealt with.
- The registered manager had ensured complaints had been investigated and resolved.

End of life care and support

- People were provided with appropriate end of life care. Staff worked closely with the person, family and other health and social care professionals to ensure the person's dignity and comfort.
- Some staff had completed specialist end of life training at a local hospice. During the inspection, the nominated individual arranged for all staff to complete end of life training.
- We noted the registered manager had received compliments from relatives regarding the provision of end of life care. One relative had written, "The staff were very caring and had hearts of gold. They treated [family member] with respect, nothing was too much trouble to ensure he was comfortable."

Is the service well-led?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care. Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people.

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

- The service was well managed. There were effective auditing systems to maintain ongoing oversight and continued development.
- The registered manager and staff had a clear understanding of their roles and contributions to service delivery.
- Staff told us they felt well supported and the registered manager was approachable and accessible.
- The registered manager made use of various communication systems with staff, to ensure continuous learning and improvements took place. Staff told us they were comfortable in raising any issues or concerns and confirmed the registered manager was open to feedback.

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 registered manager understood and acted on the duty of candour responsibilities.
- Good relationships had been developed between the registered manager, staff and people who used the service.

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

- The registered manager and staff promoted the provision of person-centred care to achieve the best outcomes for people.
- People and relatives spoken with were positive about the service. One relative told us, "The staff are patient, calm and considerate. They use their initiative and there are good at personal touches."
- Staff spoken with demonstrated their understanding of the values of the service and that people should be at the centre of their care.
- Organisational policies and procedures set out what was expected of staff when supporting people. Staff had access to these, and they were familiar with the key policies.

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

- Staff involved and engaged people in the service and considered their equality characteristics.

- Good communication was promoted, and feedback encouraged from staff. Staff told us they had regular contact with the registered manager. Following a discrepancy found in one person's care records, the registered manager agreed to remind all staff of the importance of reporting any additional needs.
- All people were asked for feedback on their experience of using the service on a monthly basis. Whilst action was taken to address any issues, the registered manager agreed they would collate results in order to identify any patterns or trends.
- The nominated individual, registered manager and staff worked in partnership with external agencies to learn and share knowledge which promoted the continued development of the service.