

Compassionate Heart Ltd

Compassionate Heart

Inspection report

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08 March 2019

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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: This service is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to older adults.

People's experience of using this service:

- ☐ People were content with the service provided and said that the service was reliable and provided at a time of their choosing.
- ☐ People had their needs assessed, risk assessments were in place with care plans clearly documenting people's care requirements.
- ☐ Care was reviewed as necessary and people were asked for their feedback.
- ☐ Staff were recruited and given an induction, supervision and on-going training.
- ☐ People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.
- ☐ The registered manager had systems in place to manage and monitor the service.

Rating at last inspection: This is the first ratings inspection since the service registered on 12 February 2018.

Why we inspected: We inspected this service because it was the annual anniversary since registration and required a rating to be published.

Follow up: Going forward we will continue to monitor this service and plan to inspect in line with our inspection schedule for those services rated good.

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

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 Heart

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by one inspector.

Service and service type:

Compassionate Heart is a domiciliary care agency. It provides personal care to people living in their own homes. At the time of inspection one person was in receipt of a service. During the first year of operation the service had supported up to four people. Assessments had been carried out and additional senior staff employed as the service planned to be providing care to three people by the end of March 2019.

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 48 hours' notice of the inspection visit because it is small and the registered manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in. We visited the office location on 8 March 2019 to see the registered manager and training officer; and to review care records and policies and procedures. We then telephoned and spoke with the person that used the service and two members of care staff that worked at the service.

What we did:

We used information the provider sent us in the Provider Information Return. (PIR) This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We looked at information we held about the service including notifications they had made to us about important events.

We reviewed the care records of the people who used the service, policies and procedures, records relating to the management of the service, assessments of need, risk assessments, training records and the recruitment records of two care workers.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- ☐ Policies for safeguarding were in place and staff received training based upon these.
- ☐ Staff demonstrated a good awareness of safeguarding procedures and knew who to inform regarding an allegation of abuse.
- ☐ The registered manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised.

Assessing risk, safety monitoring and management

- ☐ Risks assessments had been reviewed and recorded regarding how to minimise the risks to people's well-being.
- ☐ People's needs and abilities had been assessed prior to them using the service.
- ☐ Risk assessments relating to the environment were in place.
- ☐ One person told us, "I feel safe with the staff."

Staffing and recruitment

- ☐ There was a policy and procedure in place for staff recruitment. One member of staff told us, "I completed an application form and all my references were checked."
- ☐ We were informed the staff always attended within the timeframe of 30 minutes either side of the allocated time to arrive and had never been late.

Using medicines safely

- ☐ The service did not currently support anyone with their medicines.
- ☐ There was a policy and procedure in place should this occur.
- ☐ The staff had been trained in safe medicines management.

Preventing and controlling infection

- ☐ Staff confirmed with us they had received training on how to prevent the spread of infection and food hygiene training.
- ☐ The service had a policy and procedure regarding the control of infection.
- ☐ Staff were supplied with gloves and aprons to guard people and themselves from potential infection.

Learning lessons when things go wrong

- ☐ The registered manager had developed a risk system to identify during inclement weather which people were the priority to visit should the service not be able to visit all people.

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

Good: ☐ 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

- ☐ Assessments of people's needs was recorded in their care plan, with the expected outcomes recorded and reviewed as required.
- ☐ The care plan included information about how people had been consulted to gather information about their choices of how they wished their care to be provided. One person told us, "I spoke with the manager at length and in detail about my care."

Staff support: induction, training, skills and experience

- ☐ Staff were competent and knowledgeable about the care they were required to deliver as they had received training and supervision.
- ☐ Staff were supported through induction that included shadow shifts with the registered manager. A member of staff told us, "The manager arranged our training and has worked alongside us when we are introduced to the person we are going to support."

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

- ☐ Assessments were in place to identify if people had a need for support with nutrition and drinking.
- ☐ Staff told us they would discuss any concerns with the registered manager and always checked that people had enough to eat and drink between visits.

Staff working with other agencies to provide consistent, effective, timely care

- ☐ The service staff were not currently working with any other agencies to provide care, but the registered manager informed us that they would seek advice as necessary.

Supporting people to live healthier lives, access healthcare services and support

- ☐ Staff supported people to make appointments as required with healthcare professionals to support the person with their needs.

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.
- ☐ We checked whether the service was working within the principles of the MCA and found that they had policies and procedures in place to guide them. Staff had training and understood about the MCA. People

currently using the service had capacity to make their own decisions.

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

Good: 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 were treated with respect. One person told us, "The staff treat me with understanding and respect."
- ☐ The registered manager informed us that when employing staff, they were looking for people with empathy and understanding. These characteristics of the staff were confirmed to us by the person using the service

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

- ☐ The person was asked for their views on their care. They told us, "The staff always ask if I am alright before they leave."
- ☐ We saw evidence of regular care reviews in people's care files.

Respecting and promoting people's privacy, dignity and independence

- ☐ People were supported to maintain their privacy and dignity.
- ☐ A member of staff told us, "We respect people's dignity and privacy and I think turning up on time is also very important to show we respect the person."
- ☐ People were supported to remain independent with their daily living skills. One person informed us how staff worked with them and encouraged them to meet their own needs.

Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- ☐ People's care plans were detailed and contained clear information about people's their specific needs and how the staff were to support them.
- ☐ Personal preferences were clearly recorded.
- ☐ Each person's plan was regularly reviewed and updated to reflect their changing needs. Records confirmed that people were involved with the review of their care plans.
- ☐ Staff confirmed that the care plans in place reflected the person's current needs and they recorded information in the plan each time they visited.
- ☐ People had given consent to the care that had been arranged and this had been recorded.

Improving care quality in response to complaints or concerns

- ☐ The service had a complaints policy and procedure which was explained to people when they commenced using the service and a copy was given in writing.
- ☐ The service had not received any complaints at the time of the inspection. One person told us, "I have no complains and very confident the manager would sort out any problems should they arise."

End of life care and support

- ☐ The service was not supporting anyone with end of life care at this time.

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

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The service systems ensured people received person-centred care which met their needs and reflected their preferences.
- Policies and procedures provided guidance around the duty of candour responsibility.

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

- □ Staff were clear about their roles within the organisation and there was an appropriate structure for the size of agency.
- □ A new member of staff had commenced during the week of our inspection in the role of the training manager.
- □ There were systems in place to monitor the service provided. This included spot checks of staff.
- □ Records showed that the service was evaluated and if it fell short then staff received appropriate feedback to improve their service provided.
- □ The service had an on-call system so that people using the service and staff could call upon the manager for support as needed.

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

- □ Care plans contained information about how to contact the manager and the manager considered audits and surveys to develop the service.
- □ Staff told us they well supported. One staff member said, "I enjoy working here the manager is helpful and supportive."

Continuous learning and improving care

- □ The registered manager was a member of a registered managers forum and support group.
- □ The manager carried out spot checks and supervision sessions with staff to determine how the staff were working and could there be any improvements.

Working in partnership with others

- The service worked in partnership and collaboration with other key organisations.