

Comfort Call Limited

Comfort Call Durham

Inspection report

4 Fern Court

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Peterlee

County Durham

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Website: www.comfortcall.co.uk

Date of inspection visit:

17 March 2023

23 March 2023

30 March 2023

14 April 2023

20 April 2023

Date of publication:

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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

Comfort Call Durham is a domiciliary care agency providing personal care and support to people living in their own homes. 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. At the time of inspection 161 people were receiving personal care.

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

People and relatives were happy with the service and the care people received. They were complimentary about staff calling them "caring", "gold standard" and "outstanding." Comments included, "I can't really think of anything (that requires improvement). I am very satisfied and content with the staff" and, "I have such confidence in (the provider and staff) that it gives me complete peace of mind. The carers really lift [family member's] spirits."

There were systems in place to keep people safe. Staff safeguarded people from abuse. Risks to people's health, safety and well-being were managed. There were enough staff to meet people's needs and safe recruitment processes were followed. Medicines were safely administered and managed. The provider learned from previous accidents and incidents to reduce future risks. The provider and staff protected people from the risk or spread of infection.

The service was well managed. The provider, registered manager and staff promoted a positive culture in the service. People and relatives were complimentary about staff and the care people received. The provider had an effective quality assurance process in place which included regular audits and spot checks. People, relatives and staff were regularly consulted about the quality of the service through regular communication, surveys, meetings and reviews.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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 11 October 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service. As a result, we decided to undertake a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection. We found no evidence during this inspection that people were at risk of harm. Please see the Safe and Wellled sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Comfort Call Durham 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 well-led?	Good •
Is the service well-led? The service was well-led.	Good



Comfort Call Durham

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.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

The inspection was carried out by 1 inspector and 2 Experts 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 personal care to people living in their own homes.

Registered manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was to request information about the service, people and relatives and to make sure the provider or registered manager would be available to support the inspection.

Inspection activity started on 17 March 2023 and ended on 20 April 2023, which included reviewing evidence sent electronically and speaking with people, relatives and staff.

What we did before the inspection

We reviewed the information we held about the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We sought feedback from the local authority contracts monitoring and safeguarding adults' teams and reviewed the information they provided. We used all of this information to plan our inspection.

During the inspection

We spoke with 14 people and 18 relatives about their experience of the care provided. We spoke with the regional manager, the registered manager and a care co-ordinator. We sent surveys to 20 staff members and received 3 responses.

We reviewed a range of records including 3 people's care records and medicines records. We looked at recruitment records for 2 members of staff. A variety of records relating to the management of the service, including policies and procedures, were also reviewed.



Is the service safe?

Our findings

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

At our last inspection we rated this key question good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff protected people from harm. People and their relatives felt the service was safe. Comments included, "I am perfectly safe with them; they are very professional" and, "Yes, all the [care staff] are fine. There are no issues with safety. They all seem well trained."
- Staff received regular safeguarding training and knew about the safeguarding and whistle blowing procedures. One staff member said, "I would be very confident in using the whistle-blowing procedure as I would always strive to do whatever necessary to ensure the safety of a service user."
- Safeguarding concerns were reported to the local authority in a timely way and were appropriately actioned.

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

- Senior staff assessed and managed risks to people's health, safety and well-being.
- Individual and environmental risk assessments were put in place and reviewed regularly, to support people to remain safe.
- Accidents and incidents were appropriately recorded and analysed to identify any trends or themes.
- Lessons learnt were shared with staff via the electronic system which allowed for instant messaging.

Staffing and recruitment

- There were enough staff deployed to meet people's needs. The service was divided into different areas and staff were allocated to those.
- People told us they usually received support from a consistent team of staff. Comments included, "Yes, I always get the same ones (care staff). I am really happy with them" and, "I do have the same ones (care staff) and any new ones are always introduced to me."
- People and relatives fed back that carers were mainly on time, although sometimes late calls could occur. Comments included, "Yes (staff are on time). It is a great comfort to me that I know I can rely on them to be here on time" and, "Generally they are on time but the odd occasion when something has happened, and they are going to be late, the carer will call me."
- Staff were recruited in a safe way. The provider had effective recruitment and selection procedures in place which included all appropriate checks.

Using medicines safely

- Staff administered and managed people's medicines safely. A system was in place to help ensure medicines were managed safely. People and relatives told us there had been no issues with medicines management.
- Medicines were administered by trained and competent staff.

• Regular medicine checks and audits were carried out to identify any errors and take appropriate action.

Preventing and controlling infection

- Staff protected people from the risk of infection. Staff followed appropriate infection control measures such as regular hand washing and wearing appropriate PPE when supporting people. People and relatives told us that staff always wore PPE appropriately during calls.
- The provider had systems in place to check that staff followed infection prevention and control guidance.



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 good. At this inspection this key question has remained 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

- People were at the centre of the service and staff supported them to improve their well-being and achieve positive outcomes.
- The service was well-managed. People and relatives were happy with the service provided. Comments included, "Everything is well done and good. They are exactly what we need" and, "The service is excellent. They (staff) are like a family to me."
- Staff enjoyed working for the service and were passionate about their roles. On staff member said, "The good things about working for Comfort Call are the great staff that I work with, we work together, helping each other out whenever necessary. I love the service users we have. The best part of my job is seeing them happy and well cared for. If I can leave them laughing or with a smile on their face, I know I have done my job properly."

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 acted on the duty of candour. They conducted themselves in an open and honest way throughout the inspection.
- The registered manager submitted statutory notifications, in a timely way, for significant events, such as safeguarding concerns.

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

- The registered manager and staff were clear about their roles and understood their responsibilities.
- Quality systems were in place to monitor service delivery and identify improvements.

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

- Feedback from key stakeholders was used to improve the service. People and staff were asked to share their views of the service via surveys and regular communication.
- People, relatives and staff felt the management team were approachable and listened to them. Comments included, "[Registered manager] is very approachable, always says she will help and is always very nice on the phone" and, "I have spoken to her many times to give notice to cancel a visit. She is always very nice."
- The provider, registered manager and staff worked in partnership with other health professionals such as

GPs, speech and language therapists and the local authority to achieve positive outcomes for people.	