

Complete Care 4 U Limited

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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

About the service

Complete Care 4 U Limited is a domiciliary care service providing personal care to people in their own houses and flats in the community. At the time of inspection, the service was providing personal care to 32 people. Not everyone who used the service received personal care. Care Quality Commission (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

We have made recommendations about the safe administration of medicines. People were kept safe from risk and harm and staff had a good understanding of safeguarding processes. Risk assessments were robust and relevant. Staff recruitment processes were robust and staffing levels ensured peoples' needs were met. The provider followed current infection prevention and control guidance.

People's needs were assessed, and staff were trained to provide support whilst promoting independence. People told us staff were polite and always asked before providing support. People were involved in decisions about their support needs.

People's support needs were assessed and reviewed on a regular basis. People had access to healthcare professionals. People and their relatives told us they were involved in the support planning process to ensure it met their needs.

The provider was open and honest in its approach to supporting people. The registered manager led by example and was in regular contact with people receiving support to ensure they received regular feedback on the quality of care provided.

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

Rating at last inspection and update

Complete Care 4 U Limited was registered with us on 12 August 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.

Recommendations

We have made recommendations about the safe management and recording of some medicines.

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 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.

Complete Care 4 U 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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by one 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 personal care to people living in their own houses and flats.

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 48 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 October 2022 and ended on 14 October 2022. We visited the location's office on 13 October 2022.

What we did before the inspection

We sought feedback from the local authority and professionals who worked with 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 used all this information to plan our inspection.

During the inspection

We spoke with the registered manager, two office staff, and three support staff. We spoke with two people receiving support and four relatives. We reviewed three people's support records. We reviewed records and audits relating to the management of the service. We asked the registered manager to send us documents before and after the on-site inspection. These were provided in a timely manner and this evidence was included as part of our inspection.

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.

Using medicines safely

- The provider ensured people's medicines were managed safely. However, handwritten MARs were not always signed by two members of staff to confirm dosage instructions had been transcribed accurately.
- When people were prescribed medicines on an 'as required' basis, protocols were not always in place to inform staff how and when to administer them.
- We determined no harm had occurred regarding these issues and the provider responded immediately to rectify the concerns we identified.

We recommended the provider consider current guidance on 'as required' medicines, and completion of prescribed medicines administration records, and take action to update their practice accordingly.

- People's medication records confirmed they received their medicines as required.
- The registered manager ensured staff received appropriate training in the management of medicines, and competency assessments were completed by managers.

Systems and processes to safeguard people from the risk of abuse

- The provider had systems and processes to protect people from the risk of abuse.
- The registered manager ensured staff received safeguarding training and knew how to recognise and respond to signs of abuse.
- Safeguarding incidents were recorded and investigated by managers, and outcomes were shared with staff to reduce future risk.

Assessing risk, safety monitoring and management

- The provider had systems in place to identify and reduce the risks involved in supporting people.
- The registered manager involved people, and where appropriate their relatives, in assessing risks to their support. Decisions about risks were recorded in people's support plans.
- Staff had completed the appropriate mandatory training to keep people safe.

Staffing and recruitment

- The provider ensured there were enough staff, with the right training and skills, to meet people's needs.
- The deployment of staff was well organised by the registered manager, ensuring staff had sufficient time to meet people's needs safely and without rushing.
- People told us they felt safe with the support they received. One person said, "Staff are really good. Managers go out their way to find the same staff for each visit and they are quite flexible, even if I need

something at the last minute. There is always someone at the end of the phone if I need extra support."

Preventing and controlling infection

- The provider used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them.
- The registered manager had plans in place to alert other agencies to concerns affecting people's health and wellbeing.
- The provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The provider ensured lessons were learned from investigations into incidents, and actions were put in place to stop similar incidents occurring.
- The registered manager investigated all accidents and incidents fully. Any safeguarding concerns were shared with the appropriate authorities.
- The registered manager shared the outcomes with staff to help prevent further incidents occurring.

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, and support was regularly reviewed by the registered manager. Appropriate referrals were made to external services to ensure people's needs were met.
- People's health and support needs were clearly recorded within their support files by staff.
- Relatives confirmed they were regularly involved, where appropriate, in assessments and reviews of people's needs. One relative told us, "I think there have been 3 reviews so far; when staff first started, a follow up after four weeks, and another after 3 months. It's quite regular. The registered manager makes sure staff are doing what they are supposed to do."

Staff support: induction, training, skills and experience

- The provider ensured staff received effective induction, training and supervision to ensure they were skilled and competent to carry out their roles.
- Staff said they felt confident in supporting people's needs. One staff member told us, as well as the mandatory training they received as part of their induction, they also received awareness training for any area of support they needed and could request additional support.
- Relatives told us they thought staff were well trained. One relative said, "My [relative] has a new piece of equipment to help with their support needs. The registered came out and assessed it and then made sure staff knew how to use it safely. I think it's very complicated, but staff have been brilliant."

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

- The provider ensured people's support files included information about their needs regarding nutrition. Where people were supported with meal preparation, their preferences were documented.
- Staff recorded when fluids were accessible between visits to encourage good hydration.
- The registered manager told us they worked closely with relatives and district nurses to support people's nutritional needs as part of their end of life care.

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

- The provider worked closely with a range of professionals and partner agencies, to ensure people received effective support.
- The registered manager coordinated support packages to ensure staff with the relevant skills were always available to support people.
- Oral health support needs were met by staff where this was identified as a need; this was recorded in

support plans.

- Support records showed any advice given was acted upon and staff were prompt in raising any concerns or issues.

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 training in the MCA and had a good understanding of the principles of the legislation.
- The provider enabled people and where appropriate their relatives, to be involved in decisions about their support and detailed capacity assessments and best interest decisions were recorded as well as consent.

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

- The provider made equality and diversity policies available to help ensure people were treated fairly, regardless of their age, sex, race, disability or religious belief.
- Staff working in the service were confident with difference. Equality and diversity training had been provided and competencies assessed by the registered manager.
- People we spoke to felt staff respected them as individuals. One person said, "Staff know me very well; we chat, and we have similar interests. Staff always have time to sit down and talk. They know my background and respect my culture and preferences."

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

- The provider ensured people were fully involved in decisions about their support and treatment.
- People said they were asked regularly by managers if they wanted to make any changes to their support plans, and the plans were changed accordingly.
- Relatives told us people, and where appropriate their relatives, were involved in planning their support. One relative said, "We have sat and discussed [my relative's] needs to make sure they are being met; we have quite regular meetings and I know the registered manager rings to speak to my [relative] to see if there are any issues; they do follow up on it."

Respecting and promoting people's privacy, dignity and independence

- The registered manager supported staff to promote people's independence and to ensure privacy was maintained.
- The provider ensured support plans described what people could do for themselves, and staff prompted this to ensure independence was maintained.
- Relatives said staff supported people's dignity and independence. One relative told us, "Staff are always polite; they talk to [my relative] about their interests and have a laugh with them. The registered manager asked what [my relatives] interest were and shared them with staff." Another said, "Staff are getting to know [my relative]. They support them to do as much as possible for themselves."

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

- The registered manager ensured people's support plans described their support needs, were reviewed regularly, and were person-centred, containing people's likes, dislikes and preferences.
- The provider empowered staff to have a good understanding of people's needs and kept them informed of any changes to people's support.
- People said staff supported them to live as independently as possible. One person said, "Staff are fantastic; I always know who is coming and they know me really well. I have the best team I've ever come across."
- Relatives told us support plans looked at their needs as well as the people receiving support. One relative said, "The level of support is really good; they are very empathetic. Staff always arrive on time; I can trust them, and I have been able to go back to work."

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 registered manager ensured people had their communication needs assessed as part of their initial assessment; these needs were regularly reviewed.
- The provider enabled people to access information in different languages, easy read versions and in large print if needed.
- The registered manager ensured staff were recruited who could meet the support needs of people whose first language was not English.
- People told us staff were able to communicate with them using their preferred communication method. One person said, "There is always someone available who can communicate with me in my first language."

Improving care quality in response to complaints or concerns

- The provider had processes in place to allow people to raise concerns and complaints easily.
- The registered manager dealt with concerns promptly and shared lessons learned with staff to improve the quality of support.
- People said they felt confident their concerns were listened to and acted upon. One person said, "I get regular phone calls from managers to make sure I am happy with everything, if there are any changes, or just

to catch up. Communication is really good."

End of life care and support

- Processes were in place to support people with end of life decisions.
- Staff knew how to support people and how to access the appropriate health professionals to ensure end of life needs were met.
- The registered manager told us several people they supported were short-term end of life care, working closely with District Nurses to enable people to remain at home with their relatives where this was their wish.

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

- The provider empowered staff to be open and person-centred and ensured people's individual needs and wishes were met to enable them to live independently at home.
- The registered manager led by example and demonstrated an open and transparent approach; managers were passionate about promoting a person centred, inclusive and empowering staff culture.
- Regular surveys were completed by people who used the service, and where appropriate their relatives. These showed positive feedback and one relative's comments were, "Thank you for treating [my relative] with the utmost care, consideration and respect at all times during their last days."
- Relatives said staff were chosen for their compatibility with people receiving support and took the time to learn people's needs and wishes. One relative told us, "Staff have got to know [my relative] really well. Managers always try to make sure they send the same staff. They have been good; very empathetic. They take their time and are flexible and know [my relatives] background and culture."

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; Continuous learning and improving care

- The provider fully understood their responsibilities around duty of candour. This was underpinned by the open and honest culture and by appropriate policies and procedures.
- Notifications were sent to relevant authorities in a timely manner and the registered manager responded promptly to any follow-up questions.
- The provider had a series of audits in place to monitor support and highlight areas for improvement. Any improvements were actioned promptly to improve outcomes for people receiving support.
- Relatives told us staff were not afraid to ask questions to ensure they were delivering person-centred support. One relative said, "Staff are very polite; they know [my relative] very well but will always check when things have changed; they are absolutely marvellous and take not from opportunities to learn."

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

- The registered manager and staff understood the requirements of their roles, there were clear lines of accountability, and staff felt supported by the management team.
- The provider had quality and assurance systems in place to allow the registered manager to effectively monitor the quality of support provided to people.

- Health professionals told us staff knew how to achieve positive outcomes for people. On health professional said, "Staff are very accommodating and helpful in supporting safe, timely hospital discharges, with excellent communication; I would recommend the service to others."

Working in partnership with others

- The provider worked in partnership with other agencies to ensure people received support to meet their needs.
- Staff worked closely with other health care professionals. People's support records showed involvement and guidance from other agencies, for example, the district nursing teams.
- Health Professionals told us the registered manager was responsive to people's needs. One health professional said, "There is good communication throughout the service, and this extends to working with others. The [registered] manager is quick to respond and staff complete assessments in a timely manner. The feedback from people receiving support is always good."