

Home Comfort Healthcare Ltd

Home Comfort Healthcare

Inspection report

20B Corby Business Centre
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Website: www.homecomforthc.co.uk

Date of inspection visit:
19 December 2022
20 December 2022

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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

Home Comfort Healthcare is a domiciliary care agency that provides personal care 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 this inspection 1 person was receiving support with personal care.

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

There were systems and processes in place to safeguard people from potential harm. Staff completed training about safeguarding and knew how to report abuse. Risks to people were assessed and measures were put in place to reduce them.

There were safe infection control procedures in place including enough supplies of personal protective equipment (PPE) for staff. There were systems in place to ensure, if it was required, people received their medicines safely and as prescribed. The person using the service was supported by regular, consistent staff who knew them and their needs well.

There were systems in place to ensure lessons were learned when things went wrong, so that improvements could be made to the service and the quality of care provided.

Staff received an induction and ongoing training that enabled them to have the skills and knowledge to provide effective care and meet people's needs.

The person's needs and choices were fully assessed before they received a care package. Their care plan included information needed to support them safely. The person using the service was supported to eat and drink enough to meet their dietary needs.

The person was 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 this practice.

The provider involved the person and their relative in the care planning process and reviews of their care. There was a complaints procedure which was accessible to the person and their relative, so they knew how to make a complaint. There had not been any complaints received at the time of our inspection, but systems were in place to address and investigate complaints.

The service had governance systems in place to ensure the service and quality of care provided were continuously assessed and monitored. A range of audits were in place to monitor the quality and safety of service provision.

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

This service was registered with us on 01 December 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?

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.

Home Comfort Healthcare

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 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 short 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 19 December 2022 and ended on 20 December 2022. We visited the location's office on 19 December 2022.

What we did before the inspection

In planning our inspection, we reviewed information we had received about the service. This included any

notifications (events which happened in the service that the provider is required to tell us about) and any feedback about the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We used information gathered as part of monitoring activity that took place on 26 October 2022 to help plan the inspection and inform our judgements.

We used all this information to plan our inspection.

During the inspection

We spoke with the person using the service and received written feedback from 1 staff member employed. We had discussions with the registered manager and the nominated Individual. 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 the persons care records and risk assessments. We looked at a file in relation to recruitment for 1 staff member. A variety of records relating to the management of the service, including quality assurance information, staff training and policies and precures were reviewed.

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

- The person using the service was protected from the risk of potential harm. They told us, "I'm very safe. The carers know everything about me and they are very safety conscious. For example, they stay with me when I am eating and always make sure my drinks are not too hot."
- Systems and processes were in place to help identify and report abuse to help keep the person safe. For example, staff received training in safeguarding and knew how to report concerns.
- At the time of our inspection there had not been any safeguarding incidents, however there were systems in place to make safeguarding referrals to the relevant authorities and the registered manager understood their responsibility to report safeguarding concerns.

Assessing risk, safety monitoring and management

- Risks associated with the persons care, support and environment had been identified and assessed. Records provided guidance to staff on the measures needed to reduce potential risk.
- The registered manager told us that they worked regularly with the person using the service and risks were monitored at each care call. The persons care plan was reviewed regularly so any changes to their needs and risk management strategies could be implemented swiftly. The registered manager told us, "[Name of person] would tell us quickly if there were any changes needed to their care. They are very much involved."
- Staff informed the registered manager when they had concerns about the persons health, or their needs had changed. This enabled the registered manager to review the risks and identify the additional support needed.

Staffing and recruitment

- There were sufficient numbers of staff to keep the person safe and meet their needs. The registered manager, the nominated individual and 2 staff members provided care and support for the person using the service. This ensured consistency and ensured the staff understood the persons needs and preferences.
- The person using the service told us they felt staffing was sufficient to meet their needs. They commented, "The staff will go above and beyond. If my [family member] is late getting home because they are stuck in traffic the carers will stay longer and sit with me until [family member] gets home."
- The provider followed their recruitment procedures to ensure people were protected from staff that may not be fit to support them. Paperwork with employments checks was in place but was disorganised and difficult to locate. Disclosure and barring service (DBS) security checks and references were obtained before new staff started the probationary period. These checks help employers to make safer recruitment decisions and prevent unsuitable staff being employed.

Using medicines safely

- At the time of our inspection the provider was not supporting anyone with their medicines. However, there were systems in place and staff had received medication training if people required that support.

Preventing and controlling infection

- Systems were in place to protect people from the risk of infections because staff had been trained in infection prevention and control.
- The person using the service informed us that staff followed guidelines to reduce the risk from infection transmission. They said, "The carers always take great care and wear gloves and aprons and use hand sanitiser."
- Staff confirmed they had supplies of PPE and completed testing for COVID-19 when needed following the government guidelines. This meant the risks from infection transmission was reduced.

Learning lessons when things go wrong

- The provider had systems in place to monitor incidents and accidents so action could be taken to promote people's safety.
- The registered manager understood how to use the information as a learning opportunity to try and prevent reoccurrences. Staff told us the registered manager was open and shared learning from incidents with them, such as revised measures to reduce risks to 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.

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

- An assessment had been completed regarding the persons health and care needs and this was kept under review and updated to reflect any changes.
- Staff had access to the persons care plan and risk assessments, so they could understand how to meet the person's needs. This helped staff to provide effective and consistent care.

Staff support: induction, training, skills and experience

- Staff were provided with support and training to be able to meet the persons needs effectively. One staff member commented, 'I received an induction and the training that was given to me was very helpful and easy to understand. I also have a care certificate which is in accordance with the 15 care certificate standards.' Records showed staff received the training they needed to meet the person's needs.
- New staff completed an induction and were able to shadow the registered manager to understand and gain knowledge about the job role.
- The person using the service told us, "The carers give me excellent support and they are very competent."
- Staff said they could approach the registered manager for support and guidance at any time, including out of hours support if required.

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

- The person was supported to eat and drink enough to meet their dietary needs and this was done in a safe way. They told us, "I need help with my meals and the carers take great care to make sure my food is how I need it."
- Staff training records showed they had completed food hygiene training so knew how to handle food safely.
- We saw the persons nutritional and hydration needs had been assessed and guidance put in place for staff to follow.

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

- The person using the service was supported to access healthcare services and felt that staff understood their healthcare needs. They told us, "Since I started to receive support from this company it has made such a difference to my health. They know me so well they that they can tell straight away if I'm not alright or having a bad day."
- The registered manager informed us that staff had attended hospital appointments with the person and their family member. They had also supported them to visit the dentist and the opticians. Staff told us they

would contact the persons GP if they felt it was necessary.

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.

- The person using the service told us the staff always asked for their consent and permission before they completed any tasks.
- The registered manager was aware of the process to follow to make formal decisions in people's best interests, should this ever be necessary.

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 person using the service was treated with dignity, kindness and respect. They told us, "The carers are more like my family coming to visit. On the days they don't come I miss them. They give me such good emotional support which has really helped me."
- The person using the service told about one staff member who cancelled a health appointment to stay with them when another staff member could not attend the care call.
- The registered manager and nominated individual were keen to provide a good service. They both regularly provided care to the person using the service and they demonstrated an understanding of the persons care needs and the importance of respecting diversity.
- The persons care plans described their individual daily routines and staff described the persons preferences in different areas of their care.

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

- The person using the service confirmed they were involved in making decisions about their care and these were reviewed to ensure they remained up to date. They told us, "I have so much contact with them. They are always there for me and always answer the phone no matter what time it is. In the beginning they took time to sit and listen to me and they still do that."
- The registered manager informed us that care plans and risk assessments were updated when changes were needed. These were given to the person using the service to read and to make any amendments.
- The registered manager said they would support anyone who wanted to use the service of an advocate. An independent advocate helps people have a stronger voice and to have as much control as possible over their own lives.

Respecting and promoting people's privacy, dignity and independence

- The person using the service was encouraged to maintain their independence and do as much as they could for themselves. They told us, "Since I started using this company, I feel a little more confident. The carers encourage me to do a little bit or they say, "Come on we will do it together." They don't just tell me to sit there while they do it."
- The person using the service told us that staff treated them with respect and always made sure their care was carried out in private.
- A confidentiality policy was in place. The registered manager team understood their responsibility and ensured all records were stored securely. Staff had a good understanding about confidentiality and confirmed they would never share any information except those that needed to know.

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 person using the service told us the registered manager was responsive when things needed to be changed. They commented, "I like to go out to various places and we use taxis quite a bit. So, the manager is trying to recruit a carer with a car so we can go further afield. As soon as I mentioned it, they arranged a zoom meeting with all the staff and myself to discuss it."
- A needs assessment was completed in detail and used to develop a plan of care. This had been reviewed regularly and when the persons care needs changed.
- The care and support plan we looked at was reflective of the persons current needs but lacked some person-centred information. For example, the persons preferences around personal care; although staff were able to describe the persons particular preferences in this area.

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 persons communication needs were assessed, and details of any needs were recorded. The person using the service did not have any specific communication needs; however, the registered manager said they would consider each person individually and would provide any support they needed.

Improving care quality in response to complaints or concerns

- There was a complaints procedure and policy in place that had been provided to the person using the service and their relative, so they knew how to make a complaint. They told us they knew how to complain if needed and felt comfortable any issues would be quickly rectified.
- The registered manager told us that there had been no formal complaints about the service and records confirmed this. There were processes in place to ensure that all complaints, both formal and informal, verbal and written would be dealt with appropriately.

End of life care and support

- At the time of the inspection, nobody was receiving end of life care. However, the registered manager told us that they could support someone at the end of their life with support from other health professionals and with specific training for 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.

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; Working in partnership with others

- The service had a positive ethos and the person using the service expressed their satisfaction with the care provided. They commented, "If I had to sum up this company in one word it would be compassionate. The day I found this agency was the day my life changed for the better."
- A staff member informed us that they felt well supported and the management were approachable and contactable.
- The registered manager and the nominated individual were passionate about delivering good quality care for people in their homes. They demonstrated an in-depth knowledge of the person they were supporting and had a clear understanding of the key principles and focus of the service.
- The registered manager and staff team worked with other professionals when required to ensure the service developed and people remained safe.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 had a system of checks in place to monitor the quality of the service. This included regular checks of records and spot checks of staff when supporting people.
- Effective communication systems were in place to ensure staff were kept up to date with any changes to people's care and support systems to staff. One staff member commented, 'Communication is excellent.'
- Systems in place to manage staff performance were effective. There was a supervision, appraisal and training programme in place.
- The registered manager understood their responsibilities to notify CQC and other relevant authorities of any incidents which took place that affected people who used the service.
- The registered manager had systems in place to ensure compliance with duty of candour. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment.

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

- The person using the service and their relative were involved in the improvement of the service where possible. We saw satisfaction surveys that were sent out and these demonstrated positive feedback in all areas.

- The person and their relative had regular contact with the registered manager and the nominated individual and felt able to raise concerns and give compliments. The person using the service had left positive feedback on the providers web site. They told us, "I'm glad you called me so I can share my feedback with you. I want people to know how good and how compassionate this company is."
- Staff were positive about the service and the management and felt their views were listened to. They had numerous opportunities where they could share their views and opinions.
- The provider's policies and procedures were kept up to date to ensure the service delivery would not be interrupted by unforeseen events.
- We found there were systems in place so that lessons were learnt when things went wrong.