

## Connect Care Services Ltd Connect Care Services Ltd

### **Inspection report**

38 Woodford Road Bramhall Stockport SK7 1PA Date of inspection visit: 21 March 2023

Good

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#### Ratings

### Overall rating for this service

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

Connect Care Services Limited is a homecare agency providing personal care to older people and people with physical disabilities. At the time of our inspection there were 7 people receiving a regulated activity from the service. Not everyone who used the service received personal care. The 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

People felt safe, staff were suitably recruited, and there were enough staff to meet people's needs. People's needs and risk were assessed, and action was taken to mitigate risk. People were safely supported with medicines where they needed this support. The provider and registered manager were committed to learning lessons to improve care.

People told us staff were well trained, and staff told us they felt well supported. People's needs were assessed, and care delivered in line with people's preferences. Where people required support to eat and drink, clear information and guidance was available for staff. The service worked closely with other health care professionals as needed. 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 this practice.

People said staff were kind and caring and were very happy with the support they received. People felt involved in their care, and dignity and independence were promoted.

People's care was delivered in a person-centred way. The registered manager knew how to support people with accessible information and respond to complaints and concerns.

People and relatives told us the registered manager and staff were very responsive and they felt involved in the service. The registered manager and staff team worked well together, there were clear roles and people talked about the culture of the service being very positive.

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 03 March 2022 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.	



# Connect Care Services Ltd

### **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 completed 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 24 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 21 March 2023 and ended on 24 March 2023. We visited the location's office/service on 21 March 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback

from the local authority and professionals who work with 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 all this information to plan our inspection.

#### During the inspection

We spoke with 3 people who used the service and contacted 4 relatives about their experience of the care provided. We spoke with 4 members of staff including the registered manager, nominated individual and members of the staff team. 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 records. We looked at 3 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures 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

• People and relatives felt the service was run very safely. One person said, "I couldn't be happier. The carers are great. I feel very safe with them." A relative told us, "I feel that the care my [family member] receives is safe and have not needed to raise any concerns. The registered manager is very approachable and listens to me and goes out of their way to help and support my [family member]."

Assessing risk, safety monitoring and management

• People's needs, and risk were assessed. This included people's physical needs and any environmental issues. Action was in place to mitigate risk where possible.

#### Staffing and recruitment

- Suitable recruitment processes were being followed. This included checks of prospective staff's character with references from previous employers, and checks with the disclosure and barring service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer.
- There were enough staff to meet people's needs. People told us they were supported by a consistent group of care staff who knew them and their needs well. One person told us, "Staff are great, they take time to listen to me. I never feel rushed."

#### Using medicines safely

- Where people received support with their medicines care plans contained detail on how staff should provide this support and encourage people to remain independent. Accurate records where people were supported to take their medicines were maintained and the registered manager had good oversight of this.
- The service supported suitable arrangements to be put in place to ensure medicines were safely stored. This included making arrangements for secure storage, if people needed this.

#### Preventing and controlling infection

- People told us that staff took appropriate steps to support them in this area. This included wearing appropriate personal protective equipment and ensuring people's homes were left clean and tidy.
- Staff completed training and the provider had suitable policies in this area. The registered manager completed spot checks to ensure staff were undertaking their role in accordance with policies and procedures. One person told us, "The staff are professional in every way. Always very smart and clean in their uniform."

Learning lessons when things go wrong

• The provider and registered manager took their responsibilities to ensure people received good quality care seriously and lessons were learnt if something went wrong. Opportunities to learn lessons and identify areas for improvement were sought. Best practice information and guidance was used to develop the service.

### 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 fully assessed, and care plans developed in line with people's needs, risk and choices. People were very happy with how they were being cared for and felt involved in the decision making.

Staff support: induction, training, skills and experience

- Staff spoke positively about the induction they had received and training available. Staff were able to access training electronically and some training was provided face to face. People and relatives told us staff knew what they were doing and one relative commented, "The staff have the necessary knowledge and skills to provide care."
- Staff received regular support through supervisions and told us they felt well supported.

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

• People were supported to eat and drink enough where they needed this type of support. Care plans contained details to guide staff on how people should be supported with their food and drink needs. An assessment identified where people may have needs or risk in this area. Feedback from people was positive with one-person telling us, "They will make me a cup of tea and get me anything I need or fancy to eat."

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

- The provider and registered manager had developed good relationship with health care services locally and would support people to access any services they may need, including physiotherapy and doctors' appointments.
- People felt confident that staff would recognise if they were becoming unwell and help them to access any services or support they might need. One person told us, "They definitely know if I need help and get this for me. They know me pretty well now." A relative told us, "Staff have contacted other professionals in relation to my [family member's] needs. I receive a detailed message after each visit which details any changes in my [family members] 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 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.

• People's capacity to make decisions was considered, and the provider involved relevant people in any decisions which needed to be made.

• People told us staff asked consent before delivering any support or care.

### 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

• People spoke very positively about how they were treated and supported. One person commented, "They [staff] are excellent. They are so kind and caring; they can't do enough for me." Another person told us, "I am so happy with this service. They will stay for a chat if I want, we can sometimes lose track of time."

• Relatives felt their family members were well treated. One relative commented, "The staff are very kind and caring. My [family member] enjoys their visits and they take the time to have conversations with them as well as attend to their needs."

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

- People all told us they felt able to express their wishes and staff were very respectful of their decisions. One person commented, "They always involve me. They ask me what I want to eat and how I want it prepared. I can't fault them."
- The registered manager ensured that people's care was regularly reviewed and people could make any changes they wished to the care they received. One person told us, "I know if anything needed changing, they would do it."

Respecting and promoting people's privacy, dignity and independence

- People spoke very positively about how they were respected and told us they were treated with dignity by staff. One person said, "They are excellent, very thoughtful. They always let me know when they have arrived and check what I need before they start."
- Care records focused on people's strengths and contained detailed guidance for staff on how to promote people to remain as independent as they could. People told us they were supported in line with these care plans.

### 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 personalised care in line with their needs and preferences. People's care plans were detailed and contained information about the support they needed at each call, information about their likes, dislikes and a brief life history.
- People and relatives' feedback was positive about how the service provided personalised care. One person told us, "They are great. They follow my routine and how I like things done."
- The provider, registered manager and staff had a good understanding of the importance of delivering person-centred care and were all committed to providing support in this way. A relative told us, "The registered manager is very responsive. They have always been willing and quick to accommodate any additional needs."

#### 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.

• People's communication needs were considered within their assessments and care plans. Care plans contained detail about what support people needed to enable effective communication including any adaptations and aids people might have. The provider could adapt information to meet people's needs, such as translation and larger print formats.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People told us they were supported to do the things they wanted to do, including activities, and following interests. The registered manager told us how they were supporting people to access the local community and had developed very good links with the local community services.
- The service sent out newsletters with information about what was happening in the local community.

Improving care quality in response to complaints or concerns

- The service had systems in place to manage complaints and the registered manager understood how to manage, investigate, and respond to complaints.
- The service used various systems to obtain feedback from people and this was used to improve the service. People and relatives told us they felt confident to feedback and could raise concerns if they ever

needed to. One person told us, "I know if there was anything I could tell them [staff] and they would go out of their way to sort it."

End of life care and support

• The service was not supporting anyone with this type of care at the time of inspection. However, we saw thankyou cards sent from families where the service had supported a family member prior to their death.

### 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

- People and families spoke very positively about the quality and care of service being given. One relative told us, "The registered manager is very approachable and listens to me. They go out of their way to help and support my [family member]."
- Care records were detailed, and person-centred. There was a focus on promoting choice and independence as much as possible.

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 understood the requirements of the duty of candour. People told us the service was very responsive, and information was being submitted to agencies as needed, including the CQC.

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

• The registered manager and staff team were clear on their roles and worked closely together to deliver good quality care to people. One staff member said, "We work well as a team. The communication is good. It's a nice place to work."

• Comments from people and relatives were positive and people felt confident about feeding back their views. One relative told us, "The staff listen to me, I communicate with [the registered manager] frequently and they always reply promptly. They are very responsive, and I am extremely satisfied with the care being given to [family member]."

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

- Staff worked closely with other agencies where people's need required this. We saw that people were supported to access other services as needed and any advice following changes in needs were incorporated into the care plans.
- People and relatives were supported to feedback views through surveys and reviews. One person told us, "I feel really involved in my care."

Continuous learning and improving care

• Regular checks and audits to ensure good quality care were completed. Where any shortfalls or areas for improvement were identified these were actioned. Updates and information were shared within team meetings, with opportunities to discuss ideas provided.

• Staff felt very positive about working at the service. One staff member said, "I feel like I am giving proper care. I feel able to raise concerns and make suggestions. I feel supported and encouraged to develop and grow in my role."