

Comforting Healthcare Ltd

# Comforting Healthcare

## Inspection report

Unity Business Centre, Suite 12b  
26 Roundhay Road  
Leeds  
LS7 1AB

Tel: 01134182801  
Website: [www.comfortinghealthcare.co.uk](http://www.comfortinghealthcare.co.uk)

Date of inspection visit:  
07 October 2020  
08 October 2020  
12 October 2020  
13 October 2020

Date of publication:  
28 October 2020

## Ratings

Overall rating for this service

Inspected but not rated

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Comforting Healthcare is a domiciliary care agency providing personal care to people living in their own homes in the Leeds area. At the time of the inspection five people were using the service.

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

People and relatives provided positive feedback about the service. They said it met individual needs and providing high quality and person-centred care. People said staff and management had developed good relationships with them and communicated effectively.

Since the last inspection, improvements had been made to the service's documentation, to ensure it now met legal requirements. We found care plans were clear and person-centred and provided staff with clear guidance on people's individual needs. Records of care delivery were accurate and complete. Documents relating to the management of the service such as training records, and risk assessments to work safely during the COVID-19 pandemic were in place.

There was now better oversight of the service with a range of audits and checks being undertaken to help ensure the service was operating to a high standard. We saw there was a commitment to continuous improvement of the service, with management keen to develop the service.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection (and update)

The last rating for this service was requires improvement (published 6 September 2019). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

We undertook this targeted inspection to check whether the requirement action we previously served in relation to Regulation 17(Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on breaches or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

The overall rating for the service has not changed following this targeted inspection and remains requires

improvement.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information.

# The five questions we ask about services and what we found

We always ask the following five questions of services.

## Is the service well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about at the last inspection.

Inspected but not rated

# Comforting Healthcare

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirement action in relation to Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

#### Inspection team

The inspection was carried out by one 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.

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 start of the inspection. This was because we wanted to make arrangements to speak with people who used the service prior to visiting the office location.

#### 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 prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with one person who used the service and two relatives about their experience of the care provided. We spoke with three members of staff including the registered manager and care workers.

We reviewed a range of records. This included two people's care and medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# 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 as requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about. However we found improvements had been made in all the areas we looked at.

The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously issued relating to Good Governance. We will assess all of the key question at the next comprehensive inspection of the service.

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

At the last inspection, we found care records did not demonstrate a complete assessment of people's current needs. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Since the last inspection, management had re-written care plans and developed auditing systems. There was now better oversight of the service by the management team. We found the service was no longer in breach of regulation.

- Care plans were clear and accurate. They provided detailed and person-centred information on people's care needs to assist staff in delivering care. Risk assessments were in place which demonstrated risks to people's health and safety had been properly assessed. Records of care delivery such as daily notes and Medicine Administration Records (MAR) were well completed.
- Management had attended training in the Mental Capacity Act (MCA) and had used skills developed to update care plans. Records demonstrated the service was acting within the legal framework of the MCA.
- Since the last inspection, systems to assess, monitor and improve the service had been developed. There was now clear and effective oversight of the service. Care plans, staff records and records of care delivery were all audited and action taken to address any shortfalls. Feedback from people and staff was regularly sought and monitored.
- There was a culture that supported continuous improvement of the service. The provider had recently invested in a number of electronic management systems which would help ensure real time monitoring of staff activity as well as making it easier for staff to engage and interact with the management team.
- The service had ensured risks associated with the COVID-19 pandemic were fully assessed. Clear risk assessments were in place and staff had access to a reliable supply of Personal Protective Equipment (PPE).

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and relatives told us the service provided high quality care that met individual needs. They said that staff and the management listened to them and planned care and support flexibility.
- People received care from a small staff team which helped the development of strong relationships and this ensured staff were very familiar with people and their care needs.
- Staff and the management team demonstrated to us they were committed to providing a highly personalised service to people. The service was effective at communicating well with people and their relatives.