

Comforts Independent Living Care Ltd

# Comforts Independent Living Care

## 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

Comforts Independent Living Care is a domiciliary care service that is registered to provide personal care to people living in their own homes in the community. At the time of our inspection two people were using the service for support with daytime activities and personal care.

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

People's families told us that staff were caring and supported people well. The service promoted people's dignity, choice and independence.

The provider carried out assessments of risks to people's health and safety and provided guidance for staff on managing the risks. There were detailed care plans advising how to provide the right support and care to each person.

People using the service were supported to live meaningful lives taking part in activities they enjoyed and developing new skills.

Staff had been recruited safely and were experienced and trained for the role. They showed good knowledge of the people's needs and enthusiasm for the work. Staff had regular supervision and were supported in their role.

Staff had access to the required personal protective equipment (PPE), information and guidance to prevent and control the spread of infection.

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. Staff worked with professionals to share relevant information about people's care.

The registered manager regularly asked people for their feedback on the service and communicated clearly with staff.

### Why we inspected

The service was registered with us in 2015, started providing a service in 2019 and this is the first inspection.

### 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 we may inspect sooner.

## 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.

# Comforts Independent Living Care

## **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 Care Act 2014.

#### Inspection team

The inspection was carried out by one inspector and an inspection manager.

#### 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 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 10 December 2020 and ended on 11 December 2020. We visited the office location on 10 December 2020.

#### What we did before the inspection

We looked at the information we held about the service. This information included statutory notifications the provider had sent to us. A notification is information about important events which the provider is required to send us by law.

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. We used all of this information to plan our inspection.

#### During the inspection

We spoke with the representatives (relatives) of the two people who used the service about their experience of the care provided. We spoke with three members of staff including the registered manager and the two support workers employed.

We reviewed a range of records. This included both people's care records and medication records. We looked at the staff files in relation to recruitment checks, training and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We sought feedback from the local authority who work with the service.

# 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 for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- Each person using the service had risk assessments in place. Where risks were identified, there were details about how they needed to be managed. There was not enough guidance in one risk assessment for staff to follow to keep a person safe from one risk to their safety. The registered manager was able to explain in detail how staff managed this risk in practice and told us they planned to update the risk assessment immediately to reflect what staff did to keep the person safe.
- Staff had a good understanding of the risks to people's safety.
- A relative told us that they thought staff worked well with the person to ensure their safety and acted on the advice from the relative.

### Using medicines safely

- Staff had completed medicines administration training.
- Staff were not giving medicines at the time of this inspection but had recorded the information about the medicines people took and were prepared to give medicines when this became necessary.
- The service had a medicines policy in place giving guidance about how to support people with their medicines safely.

### Systems and processes to safeguard people from the risk of abuse

- Staff were trained in understanding and following safeguarding procedures and they were able to explain to us what they would do in the event of any suspected abuse.
- The provider had a safeguarding policy and procedure in place as well as contact details for the local authority safeguarding team.
- The registered manager told us that they had not had to raise any safeguarding alert nor had any raised against the service. They had a good understanding of what to do in the event of any abuse or allegation of abuse.

### Staffing and recruitment

- Staff were safely recruited.
- The provider had carried out required checks before employing staff which included checks with previous employers and with the Disclosure and Barring Service (DBS). The DBS is a service that keeps records of criminal convictions. Completing these checks reduces the risk of unsuitable staff being employed.
- Staff had previous relevant work experience with people with a learning disability and autistic people as well as suitable training for the role.
- Relatives told us that staff arrived on time and carried out their work appropriately. One relative said staff

were, "experienced and knowledgeable" and "they have patience and understanding of his needs."

- The provider had a contingency plan in place in the event of staff being off sick in that they were recruiting more staff and had an agency they were able to use if needed.

#### Preventing and controlling infection

- Staff had personal protective equipment (PPE) such as masks and disposable gloves to minimise the risk of infection when providing personal care. Relatives and staff confirmed that staff wore appropriate PPE including masks at all times as required by current government guidance.
- Staff had completed training on infection prevention and control and COVID-19 awareness.
- The provider had a Coronavirus plan and followed government advice on how to prevent and manage any concern relating to the current COVID-19 outbreak.

#### Learning lessons when things go wrong

- There had been no accidents, incidents or complaints so far, but the registered manager said they would analyse all feedback to see if any lessons could be learned and if improvements could be made to 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

- The registered manager assessed people's needs before they started using the service to ensure this service could meet their needs. The assessment informed the care plan which detailed the person's needs and how to meet them. The assessment process was ongoing. The registered manager said that one person had only been using the service a few weeks and they were continually updating this person's assessment.
- Care plans reflected people's holistic needs and were comprehensive.
- People using the service were not able to give us feedback as we were not able to communicate with them. We spoke with their relatives who said this service provided the support and care as they wanted it. One person received support during the day for six days a week and the other for five days a week. They had a full programme of activities during this time supported by staff from this service. Their relatives described the service as, "pretty good" and "good."

Staff support: induction, training, skills and experience

- The provider's induction training included the mandatory training topics for care workers and the care certificate which is a nationally recognised training for care workers. One staff member had completed the care certificate and the other was in the process of completing it. Staff told us they were very satisfied with the training.
- The registered manager said they were arranging for staff to have specific training in learning disability and autism.
- Staff had previous experience working with people with a learning disability and autistic people. This meant they understood the needs of people using the service and were able to communicate effectively with them.
- Staff had two monthly supervision which had recently been increased to monthly sessions. Both staff members confirmed they had regular supervision and good support from the registered manager.
- The newest staff member had "shadowed" a more experienced worker for a few shifts to learn the needs and routine of a person using the service.

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

- Staff supported people with meals.
- Staff did not have to prepare meals and people either had packed lunches or ate in cafes but staff supported people with their meals.
- Care plans included people's dietary needs.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live

healthier lives, access healthcare services and support

- The service liaised with social workers and care coordinators when needed. One local authority representative told us they had no concerns about the service and had received positive feedback from the family of the person using the service.
- The registered manager was fully aware of when to share information with other agencies.
- Care plans included relevant information about people's health.
- The registered manager said that the service had supported one person to lose weight for health reasons.
- As both people using the service lived with their families, staff did not have to arrange healthcare appointments but would support if needed and reported any health concerns back to the family.

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 Act 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 people using the service were not subject to a deprivation of liberty.
- One person was awaiting a mental capacity assessment so in the meantime the registered manager was aware that best interest decisions needed to be made.
- Staff understood the importance of seeking people's consent before providing care and told us they always did this.

# 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 relatives of people using the service said they were happy with the service and felt their relative was treated well and had the support they needed.
- Staff were aware of people's protected characteristics including religious and cultural preferences.

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

- The registered manager told us that one person was able to answer questions and make choices so could contribute to decisions about their care.
- Where one person had limited communication the service offered them choices and opportunity to make decisions by offering them a selection of two or three things to choose from.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect.
- Staff were able to tell us how they ensured people's dignity and independence were respected. They told us that they encouraged people to carry out any personal care they could do for themselves and helped them rather than do everything for them.
- Staff had helped people develop their skills and improve their independence with their personal care.
- The registered manager told us they encouraged people to choose their own clothes to wear, which food to eat and which activity to do so that they could be as independent as they were able to.

# 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 which met their needs.
- People's care plans showed they had a programme of individual activities which met their needs and interests.
- Staff planned and supported people with activities that they liked and followed a weekly timetable which the person understood.
- The service helped people to develop new interests. They were planning to take one person to play golf the week after the inspection.
- People's relatives told us their care workers knew their needs and provided a good service to them.
- Care plans gave detail on people's needs and how staff should provide their care. These also included information about the person's history, likes and dislikes and how to support the person effectively.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service was meeting the AIS standards.
- Staff had some training and experience in communication with people who had a learning disability and autistic people.
- Care plans reflected people's communication needs and guidance was in place for staff to follow.
- The registered manager was able to explain people's communication methods in detail which demonstrated a good knowledge of the person and the way they communicated.

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

- Care workers went out with people every day. The type of activities they supported people to enjoy included; attending a daycentre, swimming, using a gym, music, basketball, IT, shopping, eating out and online games.
- The service supported people with their cultural and religious needs where appropriate. They supported one person to attend their place of worship weekly.
- The registered manager had a good understanding of people's cultural and religious needs.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure which they gave to families.
- There had been no complaints so far. Relatives confirmed they had no complaints about the service. They confirmed that the registered manager listened to their feedback and acted on their suggestions.

# 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.

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

- The registered manager had a good understanding of regulatory requirements. Staff were clear about their roles.
- There were systems in place to assess, monitor and improve the quality and safety of the care people received. This included weekly or fortnightly reviews of records of care provided.
- The registered manager was planning to introduce a system of spot checks on staff and contacted families regularly to check if they were happy with the service or wanted any changes.
- Daily records were kept and staff carried out monthly reviews of the support they were providing to the person and to see if any changes were needed. This meant the service was able to respond to changing needs quickly.
- Care staff understood their role and responsibilities and spoke positively about the registered manager and the level of support provided to them.

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

- The service worked towards promoting a positive culture which achieves good outcomes for people.
- Relatives' feedback was that the service had consulted them and incorporated their advice and suggestions into the care plan. They were confident that any suggestions for improvement would be addressed. One person told us, "They listen to what I say."
- People's relatives knew the registered manager and were able to contact them when required. They received regular calls during the COVID-19 pandemic
- Care staff were supported through regular training, supervisions and meetings. They said the level of communication in the service was very good.

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 registered manager demonstrated a clear understanding of their statutory responsibilities and the duty of candour.

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

- The service engaged with people and their relatives to check on their satisfaction with the quality of care and to offer additional support if required.
- The registered manager said they would use satisfaction surveys when the service expands. At the time of the inspection they sought feedback through telephone calls and face to face meetings.
- Care staff also confirmed that they were regularly engaged and involved with the running of the service
- The service worked in partnership with the local authority.
- People's equality characteristics were addressed in the assessment process and on an ongoing basis.