

Complete Care Agency Limited

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Inspection report

1 Airport West Lancaster Way, Yeadon Leeds West Yorkshire LS19 7ZA

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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 is a domiciliary care service that was providing personal care to 52 people.

People's experience of using this service

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People received safe care and support because systems and processes in place ensured any risks were safely managed by staff, and their needs met with minimal restrictions in place. Staff had received training and clear guidance was followed to help people to understand how to remain safe from avoidable harm and abuse.

People and their relatives told us they were happy with the service provided. Staff understood the importance of providing person-centred care and had developed positive relationships with people. We spoke with one relative who expressed they would like to speak to the provider in relation to a few changes they would like to be made. We spoke to the registered manager who was not aware of these and arranged a meeting.

People told us that regular carers turned up on time, however cover care workers were sometimes late. We spoke to the registered manager about this.

Medicines were managed and administered safely. Records confirmed people had received their medicines as prescribed. Where there had been previous issues these had been investigated and lessons learnt from the provider.

People were involved in their care planning. Records were person-centred and evaluated. These were in the process of moving to electronic records.

People and their relatives told us they were confident if they had any complaints the registered manager would address them appropriately.

Staff received appropriate induction, training, and support and applied learning effectively in line with best practice. This led to good outcomes for people and supported a good quality of life.

Staff were friendly and polite. Staff took time to get to know people. They had a clear understanding of, and how to support, people's individual and diverse needs.

The provider completed records to ensure quality assurance remained a priority and was effective in maintaining standards and driving improvements.

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

Rating at last inspection

The last rating for this service was Good, (published March 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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.	



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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

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.

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 visit because the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in. Inspection activity started on 5 September and ended on 9 September.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We reviewed information we had received about the service since the date of registration. We sought feedback from the local authority.

During the inspection

We spoke with five people who used the service and six relatives about their experience of the care provided. We spoke with 14 members of staff including the registered manager

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at four staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff had a good understanding of what signs of abuse to be aware of and were clear about what they would do and who they would speak with about concerns.
- A safeguarding and whistleblowing policy and procedure was available for staff to follow should they need to both report and escalate concerns.
- Where concerns had been raised they were investigated with actions implemented where required to keep people safe.
- The registered manager had a system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences.

Assessing risk, safety monitoring and management

- The provider completed assessments of people's needs. Any identified risks were recorded.
- People received care and support safely without unnecessary restrictions in place.
- Information in support plans helped staff to reduce the risks when providing care and support.

Staffing and recruitment

- There were enough staff employed to meet people's care and support needs. However, the management team were aware of 'peak times' of low staff and were interviewing for care staff at the time of inspection.
- Appropriate recruitment checks were conducted prior to staff starting work at the service, to ensure they were suitable to work with vulnerable people.

Using medicines safely

- People received an assessment of their needs and were supported to take their medicine safely as prescribed.
- Staff followed best practice guidance to help people to manage and administer their medicines and provided prompts where people were independent.
- The registered manager was aware of previous issues in relation to medication. We saw lessons learnt from these.

Preventing and controlling infection

- Staff had access to protective clothing, including gloves and aprons, and used these when assisting people. For example, when preparing food and supporting with personal care.
- Staff had access to gloves and understood guidance to control and prevent the spread of infections.



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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Staff had a working knowledge of the MCA and understood, the importance of supporting people to make day to day decisions and choices.
- People's assessments of their care and support were detailed. Information was regularly reviewed which ensured it remained up-to-date.
- The staff team were committed to ensuring people's diverse needs were met.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People received effective care. An assessment of their needs was carried out prior to people receiving support from the service.
- People and their families told us they were involved in developing their care plans and these detailed how people wished to be cared for.

Staff support: induction, training, skills and experience

- People received care and support from skilled and knowledgeable staff.
- Staff received an induction to their role and regular ongoing training and supervision to keep their knowledge up-to-date and remain competent. One staff member said, "I absolutely love my job and having the right skills helps me to carry out my role; knowing I am doing the right thing for people and knowing how to support them."

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

• People told us they were happy with the support they received with meals. One person said, "Staff are all

supportive of what I want to eat. They help me to prepare a meal I enjoy."

• Care plans contained people's food preferences and specific instructions around their diets and culture.

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

- People confirmed they were supported, where needed, to access and receive healthcare services to maintain their well-being.
- Records included medical information to inform other health services and professionals of people's health needs.
- Records of healthcare professional visits were recorded.



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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 received a service from staff who were friendly. It was clear there were positive interactions between staff and people which showed positive relationships had been developed.
- People and their relatives told us staff were caring. A person said, "Always in one word." A relative told us, "The carers are compassionate- kind and always given dignity and respect to my relative."

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

- Staff communicated clearly with people and respected people's individuals' views, choices and decisions. One person said, "They do respect my wishes, sometimes I will have off days. They know when these days are, and they work round me."
- On the whole people and relatives told us, and care records confirmed they were involved in writing and reviewing care plans.

Respecting and promoting people's privacy, dignity and independence

- People had been consulted with and their wishes and preferences had been recorded. Where people chose female support, this was recorded in their care plan.
- Staff understood the importance of treating people with dignity.
- People were encouraged to retain their independence and staff confirmed they only assisted people where this was required. One staff member said, "We always try to ensure people keep their independence as much as possible. People are encouraged to do what they can for themselves."



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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; 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 and support was provided in line with people's care preferences.
- The registered manager gave examples of when staff had supported people to engage socially. These were to attend religious services, coffee mornings, and other social events.

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 registered manager ensured staff were aware of the requirement to provide people information in different formats to help aid people's understanding.
- Care plans included clear guidance for staff to follow to ensure people's needs were met and understood. We saw in one care plan of an aid to support one person to communicate with people around them. Staff had clear guidance in place to support them with this.

Improving care quality in response to complaints or concerns

- People and their relatives told us they were confident if they had any complaints the registered manager would address them appropriately. One person said, "The management are good, I can pick up the telephone at any time and speak to them."
- Where complaints had been made, they were recorded, investigated and responded to in line with provider's policy. It was clear the provider was responsive to people's concerns and acted on these.

End of life care and support

- No one was receiving end of life care when we visited. Staff were aware of people's needs and preferences, including any protected characteristics, such as cultural and religious needs. These were recorded in their care plans.
- Staff told us they would work alongside external health professionals to provide effective care for people at the end of their lives.



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 Good. At this inspection this key question has remained the same. 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

- Most people and relatives spoke positively about the management of the service and how the registered manager promoted person centred care and people's independence. One person said, "Excellent service, we are extremely happy with the care workers and management." Another person said, "The service is getting better, I have stayed due to the regular care workers."
- The provider promoted staff inclusion, for example for long service or a job well done. Staff told us they have received flowers from the company. One staff member said, "The flowers were a lovely surprise makes you feel valued."

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 registered manager was open and transparent in dealing with issues and concerns. They understood their responsibility to apologise when mistakes were made and give feedback to people if needed.
- There was a well organised management structure and organisational oversight. The management team met regularly.
- Management carried out audits to monitor the quality of the service provided.
- The provider had an action and continual improvement plan which included any known concerns, suggestions and a summary of actions and outcomes.

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

- The service was well-run and well-led. Effective systems were in place to manage risks to care quality, which staff understood and used.
- There was a clear staffing structure and staff understood their roles and responsibilities and when to escalate any concerns.
- Policies and procedures for staff to reference to ensure care and support was provided in line with national guidance and regulation were kept up to date.

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

• Links with outside services and key organisations in the local community were well maintained to promote people's independence and wellbeing.

- A newsletter was circulated to introduce new staff to the organisation, events during the month, and any awards.
- Staff worked with health and social care professionals such as the district nursing team, GPs and social workers to improve the service and outcomes for people.