



Inspection Report on

Compass Community Care Ltd -W030001598M0010001

**St Andrews Park
Queens Lane
Broomfield Industrial Park
Mold
CH7 1XB**

Date Inspection Completed

28/11/2023

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About Compass Community Care Ltd - W030001598M0010001

Type of care provided	Domiciliary Support Service
Registered Provider	Compass Community Care Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	16 March 2021
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Care staff are knowledgeable, respectful, caring and employed in appropriate numbers. People receive excellent continuity of care and support. People receiving a service and relatives are happy with the support they and their loved ones receive. People's care documentation is detailed, outcome focused, and gives care workers appropriate instruction on how to deliver support. People's personal plans are reviewed in a timely fashion.

Care is delivered by an enthusiastic and familiar staff team, led by highly effective senior managers. High quality care documentation accurately reflects people are being cared for appropriately by care staff and in line with their personal plans.

Support staff are properly vetted prior to employment and are well trained to ensure they carry out their roles safely. Care staff have regular supervision and appraisals. The management team are visible and available to chat with both people receiving care and support and their next of kin about the support people receive. There are high quality arrangements in place to ensure the provider knows how the service is running, and the Responsible Individual (RI) ensures the Quality-of-Care review is undertaken in line with the regulations.

Well-being

People have control over their day to day lives. The provider has excellent quality assurance processes in place which consider and act on the views of people receiving support. The RI consults with people using the service on a regular basis. The Quality-of-Care review is completed in line with regulations.

Relatives are happy with the support their loved ones receive. They told us their relatives are treated well, with dignity and respect. People also told us they receive the support they need, and care staff listen to what support they require. Care workers told us personal plans are updated as soon as the persons support needs change.

People are protected from potential abuse, harm, or neglect. Reviews of personal plans and risk assessments are undertaken in a timely manner and reflect the information contained in professional documentation on file. Care records give care workers the instruction required to support people accurately and are reviewed appropriately. The care staff we spoke to confirmed care plans give them enough information to support the person effectively. Personal plans are an accurate reflection of the support the person needs. Care staff records are checked robustly. Training records show care staff have undergone appropriate training. There is a robust set of management audits in place which ensure any risks are minimised.

Care and Support

The service provider considers a range of views and information about prospective clients. People are consulted regarding their care needs and preferences prior to the service commencing to ensure the service can provide the care and support required. Care staff we spoke told us to ensure they are familiar with the requirements of the person they view personal plans, prior to the service commencing. Pre-admission paperwork is detailed, and person centred. In the shared supported living properties care staff and people told us anyone new will come for “taster” sessions before they move in. Personal plans are detailed, person centred, and goals are outcomes focused. People using the service confirmed their care and support is undertaken in the way in which they want their support delivered. People are involved in regular reviews of their care and support.

People are provided with good quality care and support which is tailored to the needs of the individual. Detailed personal care plans are in place and give comprehensive instruction to care staff on how to support people. They are reviewed in line with regulations and care staff told us they are made aware of any changes to people’s personal plans. Care plans mirror information contained in the service’s own pre-admission assessment documentation and information provided by professionals on how to support the individual. People we spoke with told us they receive the care and support they require. We saw evidence of people living in the shared supported living properties engaged in a lot of different activities, which people whom we spoke with confirmed. Care workers told us care plans are detailed and gave them the information and instruction they needed to undertake their role. They also confirmed care plans are updated with any changes to the care and support people may require and they are informed of any changes. We found risk plans to be detailed, comprehensive and reviewed at appropriate intervals. We saw senior managers interacting positively with service users, evidently familiar with the people and their needs.

Leadership and Management

Management arrangements ensure oversight of the service, and required policies and procedures are in place. We saw evidence of regular, and comprehensive audits of all aspects of the service. The provider also undertakes monthly audits of each property, which feeds into their own reviews of the service, details of which are passed to the company's board. Senior managers regularly visit the services and spot checks are undertaken during these visits. The RI has great oversight of the service. The RI's three-monthly review of the service and six-monthly Quality-of-Care Review are undertaken in line with the regulations. Records of both are detailed and transparent, and show discussions with stakeholders, including professionals, take place.

Care staff and relatives told us managers are approachable and supportive. One care worker told us *"It's a good firm to work for and has great client focus... I get great management support... I can pick up the phone if necessary and ring and get whatever I want."* A relative also confirmed that her loved one gets the support they need. Policies and procedures in areas such as safeguarding, medication and infection control are comprehensive and reviewed regularly.

People are supported by an appropriate number of staff who are suitably fit and have the knowledge, competency, skills, and qualifications to provide the levels of care and support required. We saw several staff files which evidence robust recruitment processes are in place and care workers are registered with the appropriate bodies in regards their fitness to work. Training resources are good. Care staff told us they receive a lot of training which is appropriate for the people they support. We saw training records which confirm this. We saw evidence which show there is an induction process in place. Care staff told us people are supported by small groups of care workers which staff rotas confirm. We saw regular staff supervision and annual appraisals are taking place.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
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N/A	No non-compliance of this type was identified at this inspection	N/A
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