

Valour Private Limited

VALOUR HEALTHCARE SERVICES

Inspection report

3000 Aviator Way
Manchester Business Park
Manchester
M22 5TG

Date of inspection visit:
03 August 2022
08 August 2022

Date of publication:
15 August 2022

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

Valour Healthcare Services is a domiciliary care agency providing personal care to people living in their own homes. At the time of the inspection, there were 20 people using the service.

Not everyone who used the service received personal care. 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 were supported safely and feedback from people and their relatives confirmed this. Risk assessments confirmed actions to be taken to mitigate any risk identified. Staff were recruited safely. Staff received training in safeguarding vulnerable adults and knew what action to take should they have any concerns. Infection control was well-managed. Medication was managed safely.

Full assessments were completed of people's needs prior to the service providing personal care and support. Assessments captured the support required with nutrition and any health needs. Staff received a robust induction and training. Staff felt the training gave them the knowledge they required to support their job role.

People and their relatives told us staff were extremely caring, kind and friendly. All comments were very positive, and staff described how they promoted independence. Everyone we spoke with told us their care and support were dignified and staff went over and above to ensure they felt safe and comfortable.

Care plans were reflective of people's care needs and regularly reviewed. Staff were able to read care plans and were supported to get to know people before providing care. People and relatives told us, they had not needed to complain as the registered manager was actively involved in the running of the service and visited them at home. People and relatives felt comfortable to talk with the registered manager and if they need to, and were confident to raise any concerns and they would be acted upon.

The provider had a clear vision to offer a service which achieved best outcomes for people. It was evident from speaking to people and relatives, the provider had built positive relationships and the consistency of a regular staff team had enhanced this. The provider had processes in place to continually improve the service and stood by their motto which was, "Proud to care."

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.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an

autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

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

Rating at last inspection and update. This service was registered with us on 29 December 2020 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.

VALOUR HEALTHCARE SERVICES

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 team consisted of 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

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 3 August 2022 and ended on 8 August 2022. We visited the location's office on 5 August 2022.

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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

During the inspection we spoke with the registered manager and the office administrator, we also communicated with five staff via email. We spoke with four people or their relatives. We reviewed two care plans, risk assessments and medication records. We reviewed records pertaining to the running of the service as well as policies and procedures and audits. We looked at staff recruitment, induction, training and supervision.

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 were confident they were safely supported by the staff team.
- A relative told us, "Absolutely [Name] is safe, the staff are so lovely and caring."
- Staff were trained and knowledgeable in safeguarding practices and one staff member told us, "I have received safeguarding training and learned the importance of protecting vulnerable adults. I feel it is important to report concerns to ensure service users receive the best care."

Assessing risk, safety monitoring and management

- Risks to people and their environment and any risks to staff were identified and recorded. Staff could describe how they reduced any risks people presented.
- Risk assessments were reflective of people's needs and regularly reviewed.
- Staff told us, "Risk assessments are completed to make sure the person is living in a safe environment. They are updated monthly or whenever there is a change in the person's needs."

Staffing and recruitment

- Staff were recruited safely and the required pre-employment checks were completed for new staff, prior to commencing employment with the provider.
- People received care and support from a regular staff team. Staff provided the care and support at the agreed times and relatives told us; the provider was very organised.
- Comments from people and relatives included, "[Staff] regularly visits, [Name] feels comfortable and safe." and "They are always on time, I have never had to contact Valour about staff, they are the best agency around."

Using medicines safely

- Medicines were safely managed.
- Staff received training and competency checks of their ability to administer medicines safely.
- Medication administration records were fully completed. Medicines were administered according to the prescriber's instructions.
- A staff member told us, "I had medication training online, then face to face training and a competency assessment. I had to be signed off as competent before administering on my own."

Preventing and controlling infection

- Staff were provided with training in infection, prevention and control.
- Personal protective equipment such as gloves, aprons and masks were provided by the provider and

relatives confirmed staff used them.

Learning lessons when things go wrong

- The provider recorded any accidents and incidents.
- Any trends and themes following accidents and incidents were analysed to prevent future occurrences.

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 received a thorough assessment of their needs prior to being supported by the provider.
- The assessment was person-centred and captured information relevant to each individual such as likes, dislikes and personal preferences.

Staff support: induction, training, skills and experience

- Staff completed training prior to commencing employment via e-learning which was then followed up with practical training. New staff received an induction and were able to shadow experienced staff.
- Further training was completed if people had specific care needs such as catheter care.
- Staff told us, "The induction covered everything I needed to know. I felt confident going out to see service users on my own and knew that if I needed support, I could always call on a member of the management."
- People and relatives told us they felt staff were well trained.

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

- People were provided with personal care and support at the time suitable to them.
- If staff were concerned about a person's presentation, they contacted the registered manager, relatives or sought medical intervention.
- The provider worked with other professionals such as social work teams, commissioning teams and healthcare professionals to ensure care and support of people was streamlined and person-centred.

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 , whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The provider assessed people's capacity as part of the assessment process.
- Staff received training in mental capacity and understood the principles of the MCA.
- Staff told us, "I assume that an individual has the capacity to make decisions until proved otherwise."
- No one currently being supported by the provider was subject to an authorisation to deprive them of their liberty.

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

- Some people required prompting to eat and drink. This was captured in the person's care plan.
- Staff received training in managing nutrition and fluids.

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 were well treated, respected and valued by the provider and the staff team.
- Feedback from people and their relatives was consistently positive and they told us staff were extremely caring.
- Comments included, "The staff are absolutely brilliant, I can't fault them at all," and "The staff are very caring. They will do anything for me and [Name]," and "This is the best agency we have had."
- A staff member told us, "Initially when we meet service users we always make it a point to create rapport and make them feel comfortable to discuss their needs and wants and also the care plans which details how they prefer things to be done and their routine."

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

- People were supported to be involved in their care planning and make decisions about their care and support.
- A staff member told us, "I involve service users in their care as much as possible for example allowing them to do aspects of their personal care that they are able to and assisting them with what they cannot do. By ensuring that doors and curtains are closed when I am doing personal care."
- A relative told us, "The staff just can't do enough for you. Staff will ask if [Name] needs anything else doing before they leave, it can be bringing the washing in or washing the pots. They ask us what we need, and they do it."

Respecting and promoting people's privacy, dignity and independence

- The provider and staff respected people's privacy, dignity and independence.
- People and their relatives told us they received personal care and support from a consistent team of staff which was dignified and comfortable. People and their relatives confirmed staff supported them to remain as independent as possible.
- One person told us, "They [staff] have helped me so much. They helped me to walk again by completing exercises with me. [Staff] take me out of the house to get some fresh air, no other agencies did that. They are wonderful."

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's care files contained person-centred care plans which were individualised and reflective of people's care and support needs.
- Care planning had been completed with people and their relatives and were regularly reviewed.
- Staff told us they were able to read the care plans before providing care and support to people. One staff member told us, "I know them [people] very well. Reading their care plan helps me to get a baseline. Communicating with them and their family helps me to identify their likes and dislikes."
- People and relatives told us staff knew them well.

Improving care quality in response to complaints or concerns

- The provider ensured people and their relatives were aware of how they should raise any concerns or complaints.
- People and their relatives raised no concerns and told us they would be very confident to raise any concerns with the registered manager and they would be promptly responded to.
- The provider had not received any complaints about the service.

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.

- Information was provided to people in an accessible format.
- Care records contained information for people and their relatives for making complaints and compliments and as well as who to contact in an emergency.

End of life care and support

- The provider was not supporting anyone who was at the end of their life at this inspection. However, the provider had access to training and policies to underpin staff knowledge for good end of life care.

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

- The provider promoted a positive culture and had the best interests of the people they supported, their relatives and staff members at the heart of what they offered.
- People and relatives consistently told us; Valour Healthcare Services was the best agency they had received care from. Comments included, "They [the provide] is good at what they do," and "They have really helped me."
- Staff were well respected and packages of support were offered to staff by the provider to ensure they were able to complete their role effectively. This included staff uniform and jackets, travel arrangements, training, supervision and personal support.
- Staff were complimentary about the registered manager and the staff team. They told us, "Valour is a great place to work, there is such a positive culture. Communication is great. I enjoy looking after service users and making a difference to their lives," and "Valour is a great place to work. It is a forward-thinking, supportive company that realises that its clients and employees are their greatest asset. This job allows me to meet new people, clients and employees who have had different experiences, and this is what I enjoy most."

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

- Managers and staff understood regulatory requirements and the provider was continually evolving to improve outcomes for people who were supported by the service.
- The registered manager was visible and supportive to people, relatives and staff. People told us, the registered manager visited them at home to check on the quality of care and seek feedback. A relative told us, "[Registered manager] visited and we shared information with them. [Registered manager] ensured staff knew all about [Name's] needs.
- Audits to monitor and improve the service were in place and being continually developed. The provider had identified areas to improve on and this was recorded in an action plan.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People, their relatives and staff were fully involved in the running of the service.
- Staff told us they were involved in regular meetings and updates. A secure messaging group has had been created by the registered manager to ensure staff were up to date with any changes to people or any

important updates.

- Staff had access to a policies and procedures portal and told us, they regularly logged in to review documents.
- People and their relatives told us they felt listened to by the registered manager and staff. A staff member told us, "I like working for Valour because the management team are very supportive and easy to reach which makes the job more enjoyable."

Working in partnership with others

- The provider was working with commissioners to provide effective and timely care.
- It was evident from the people and relatives we spoke with, the service had exceed their expectations and partnership working had been key to achieving the best outcomes for people using the service.

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 understood their responsibilities under duty of candour.
- Any information which required reporting was done so following the appropriate processes.