Victoria Homecare Limited

Wakefield

Inspection report

Churchill House
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Tel: 01977526923

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30 September 2022

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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
Wakefield is a domiciliary care agency providing personal care to people living in their own homes. The service is known locally as Victoria Homecare. At the time of our inspection there were five 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
The provider had systems in place to safeguard people from the risk of abuse. Staff received training in safeguarding and knew what action to take if they suspected abuse. Staff were recruited safely, and pre-employment checks were carried out. Staff had access to appropriate PPE and the provider was mindful about infection control. Accidents and incidents were recorded, action taken to mitigate future incidents, and risks associated with people's care were identified and managed safely.

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. The provider ensured staff received appropriate training. Staff felt supported by the management team. Staff worked alongside other professionals to ensure people received timely and appropriate care and support.

People and their relatives told us staff were kind and caring and supported them or their family member in a person-centred way.

Care plans offered staff guidance about how to support people. Staff knew people well and assisted people to maintain their independence. People felt able to raise concerns if they needed to and were confident the provider would take appropriate actions to address them.

The provider had effective systems in place to monitor the quality of the service. This process helped identify issues and action plans were used to ensure issues were addressed in a timely way. People we spoke with felt involved in the service and relatives felt they were communicated with well.

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

Rating at last inspection
This service was registered with us on 30 November 2020 and this is the first inspection.

Why we inspected

This was the first rated inspection of a newly registered 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.

Wakefield

Detailed findings

Background to this inspection

The inspection
We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

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.

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 20 September 2022 and ended on 30 September 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. The provider did not complete the required Provider Information Return (PIR). This is information providers are required to send us annually with key information about the service, what it does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection
This performance review and assessment was carried out without a visit to the location's office. We used technology such as video calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation.

We spoke with two people and two relatives, four staff including the registered manager, and care workers. The registered manager was also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed two people's care plans and documents relating to the management of the service.

Good

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
- The provider had systems in place to safeguard people from the risk of abuse.
- Staff received training in safeguarding and knew what to do if they suspected abuse.
- The registered manager kept a record of safeguarding concerns and took appropriate actions to keep people safe.

Assessing risk, safety monitoring and management
- Risks associated with people's care had been identified and were managed safely.
- People's care documents included environmental risks. This ensured the safety of staff and people.
- Staff were aware of risks and knew what actions to take to minimise them.

Staffing and recruitment
- The provider had a system in place to ensure staff were recruited safely.
- Staff confirmed they had a Disclosure and Barring (DBS) check and references prior to commencing employment. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely
- The provider had a system in place to ensure people received their medicines safely.
- People's care plans include information about how to support them to take their medicines as prescribed.
- Staff received training in the safe handling of medicines and received competency checks to ensure they were competent.

Preventing and controlling infection
- We were assured that the provider was using PPE effectively and safely. During spot checks, conducted by the management team, they checked to see if staff were using PPE appropriately.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong
- The registered manager explained that complains, accidents and incidents, and safeguarding concerns were all used to identify trends and patterns and to develop the service and mitigate future risks to people.

Good

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's needs were assessed, and care was delivered in line with standards, guidance and the law.
- People's care plans were person centred and included their preferences.
- People and their relatives told us they were happy with the care and support they or their family member received. One person said, "The regular girls know me really well, they know how I like things doing."

Staff support: induction, training, skills and experience
- Staff received appropriate training to carry out their role effectively.
- The provider kept a record of training which showed some training required refreshing. The registered manager confirmed this training would be completed by 15 October 2022.
- Staff told us they felt competent and confident providing support to people.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support
- The registered managed confirmed they worked alongside other professionals when appropriate.

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 registered manager and staff team were knowledgeable about the MCA and DoLS. At the time of our

inspection, no one lacked capacity.

Good

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 registered manager told us people were at the centre of their care and support and the provider recognised everyone as individuals and ensured protected characteristics were respected.
- Staff told us they carried out all care with as much privacy and dignity as possible.
- People and their relatives felt the care and support provided was good. One relative said, "All staff are caring and friendly and our current team of staff are sociable and have a laugh with my [relative] and try to cheer them up if needed."

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

- People told us staff included them in decisions about their care and respected their individual needs and preferences.
- Staff told us they respected people's decisions and choices about their lives.

Respecting and promoting people's privacy, dignity and independence

- People we spoke with told us staff were kind and friendly and treated them with respect. One person said, "They [staff] are very caring and helpful." Another person said, "The carers are nice, very good and I usually have the same carers."

Good

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 care and support which was personalised and met their individual needs and preferences.
- Care plans were reviewed every six months; however, they would be reviewed sooner if people's needs changed. The registered manager told us staff were trained to recognise any changes in people and would identify any changes without delay.

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.

- Care plans included information about how to communicate effectively with people. This included information about any hearing difficulties or whether the person required spectacles.
- Information was supplied to people in different formats such as large print. This supported communication.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure in place and people were encouraged to raise concerns if they needed to.
- The registered manager used complaints to learn and improve the service.
- People told us they felt at ease to raise concerns if they needed to. They were confident the registered manager would address them appropriately.

Good

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 management team worked alongside staff to ensure people received person-centred care which supported them to achieve good outcomes.
- People and their relatives felt involved in their care. One relative said, "I know if there was a problem, they [staff] would contact me and I find that very reassuring."

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

- The management team consisted of the registered manager and care co-ordinators. The team worked together to ensure the service was operating effectively.
- The management team understood their legal responsibilities and acted on their duty of candour.

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

- The provider had systems in place to ensure people were involved in the service.
- People were asked for their feedback via questionnaires, telephone calls and spot visits to people's homes.
- People and their relatives were confident the management team would listen and act on feedback.

Continuous learning and improving care

- The provider had a system in place to monitor and improve the service.
- The management team completed regular audits to ensure any issues were identified and actioned in a timely way.
- The registered manager was keen to learn and improve the service as a result of the auditing process.

Working in partnership with others

- The management team could demonstrate they were working in partnership with others to meet people's needs and develop the service.