

Vantage Care Services Ltd

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Inspection report

Sky Studios
149B Albert Road
London
E16 2JD

Tel: 02074743434

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an announced comprehensive inspection of this service on 13 & 14 February 2017. We issued one warning notice for detailed risk assessments not being in place and one requirement action for limited quality systems in place. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to detailed individual risk assessments not in place and quality assurance and monitoring systems not being robust.

We undertook this focused inspection on 6 July 2017 to check that they had followed their plan and to confirm that they now met the legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Vantage Care Services Ltd on our website at www.cqc.org.uk. At this inspection we found some improvements had been made.

The service provides support with personal care to adults living in their own homes. The service was providing a service to 40 people at the time of our inspection.

There was a registered manager at the service at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

Most risk assessments were specific to the individual needs and included information for staff on how to manage risks safely. However two risk assessments were not detailed. The inconsistencies in risk assessments means there was a risk that people did not receive safe support. The registered manager told us additional training on risk assessments was to be provided by the end of July 2017. We will check this during our next planned comprehensive inspection.

The service had various quality assurance and monitoring systems in place. The registered manager told us and we saw records of regular quality checks. These quality checks included spot checks in people's home, medicine audits, telephone monitoring and annual surveys to people who used the service and their relatives. Weekly staff meetings were being recorded.

We could not improve the rating from requires improvement to good because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that some action had been taken to improve risk assessments and make these more detailed. Most risk assessments were specific to the individual needs and included information for staff on how to manage risks safely. However two risk assessments were not detailed.

We could not improve the rating from requires improvement to good because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement ●

Is the service well-led?

We found that action had been taken to improve quality assurance and monitoring systems. The quality checks included spot checks in people's homes, medicines audits, telephone monitoring and annual surveys to gather the views of people who used the service and their relatives.

We could not improve the rating from requires improvement to good because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement ●

Vantage Care Services Ltd

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook an announced focused inspection of Vantage Care Services Ltd on 6 July 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our 13 & 14 February 2017 inspection had been made. The team inspected the service against two of the five questions we ask about services: Is the service safe? and is the service well-led? This is because the service was not meeting some legal requirements at the last inspection.

Before we visited the service we checked the information that we held about the service and the service provider. This included any notifications and safeguarding alerts.

The inspection team consisted of one inspector. We talked with the registered manager and liaison manager. After the inspection we spoke with the quality service improvement manager. We looked at seven care files including risk assessments and care plans, six medicines records including audits, staff meeting minutes, five staff files including supervision and group supervision records, quality assurance records which included 27 returned annual surveys for 2017, telephone monitoring and spot check records.

Is the service safe?

Our findings

During our previous inspection in February 2017, we found that detailed individual risk assessments were not in place to identify and protect people from the risks associated with their personal care needs. At this inspection we found improvements had been made. We could not improve the rating from requires improvement to good because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

After the last comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the lack of robust risk assessments. The action plan submitted stated that that all staff which included care co-ordinators, field care supervisors and senior support staff would receive training on risk assessments. Records showed the service held a workshop on 15 February 2017 on risk and needs assessments.

Records showed that all the people who used the service had new risk assessments completed by the service since our last inspection. People's care files included risk assessments which had been conducted in relation to their support needs. Risk assessments covered areas such as risks to people in relation to their health needs, mobility, medicines, personal care, communication, toileting, nutrition, moving and handling and daily living skills. Most risk assessments were specific to the individual and included information for staff on how to manage risks safely. For example, one person was assessed with poor mobility. The risk assessment stated, "Encourage me to stand up in order for me to strengthen my legs so I can be able to move my feet again in the future." Another example, one person was at risk of malnutrition. The risk assessment stated, "Carers needs to encourage me to eat because sometimes I forget. When I feel hungry I cry."

However two risk assessments were not detailed. For example, the service had assessed the person at risk of falling. The overall summary to address this risk stated this person was to be supported by an experienced care worker but did not address specific ways to support this person from harm. The inconsistencies in risk assessments means there was a risk that people did not receive safe support. The registered manager also told us the quality service improvement manager was providing more training by the end of July 2017 on risk assessments. After the inspection we spoke with the quality service improvement manager who confirmed this.

Is the service well-led?

Our findings

During our previous inspection in February 2017, we found that there were limited systems in place to monitor the quality of service provided to people at the service. Also staff meeting records were not always being recorded. At this inspection we found improvements had been made. We could not improve the rating from requires improvement to good because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

At the last inspection the service was not recording medicines audits. The provider wrote to us to say what they would do to meet legal requirements in relation to recording medicines audits. The action plan submitted stated medicines records were to be collected monthly from people's homes and audited for any discrepancies. Records showed medicines records were being collected and audited monthly. Also records showed that group supervision was held with care staff on medicines recording and medicines audits were discussed in staff team meetings. This meant the service had arrangements in place to protect people against the risks associated with medicines.

At the last inspection the registered manager told us the office staff held weekly meetings however these were not being recorded. During this inspection records showed weekly staff meetings were being documented. Topics included risk assessments, manual handling, training, supervision, medicine audits, and care plans.

At the last inspection the service did not have a robust quality monitoring and auditing system in place. We found improvements had been made. The service undertook unannounced spot checks to review the quality of the service provided. Spot checks included visiting people in their home and telephone calls to people and their relatives. The spot checks topics included communication, time keeping, respect and dignity, health and safety, care records, personal protective equipment, medicine records and complaints.

The quality of the service was also monitored through the use of annual surveys to get the views of people who used the service and their relatives. The last annual survey was sent to people and their relatives on 14 February 2017. Twenty-seven questionnaires were returned. The questionnaire for people who used the service included questions about safety, personal protective equipment, competency of the care staff, respect and dignity, spot checks being completed by office staff, and communication with office staff. Returned surveys were positive. Comments included, "[staff member] has become a valued member of our extended family. She is very caring toward [relative]", and "all the carers that I have had visit and assist me have been professional, friendly and very pleasant."