

Violet Home Care Ltd

Violet Home Care Limited

Inspection report

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28 July 2021

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service effective?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Violet Home Care Limited is a domiciliary care agency. It provides a service to older adults, some of whom are living with dementia or receiving end of life care. At the time of our inspection the service was supporting one person living in their own home.

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

We found that risks to the person had been assessed by the service and were based on their individual needs. We received positive feedback from a family member about the way in which staff provided care and support. A healthcare professional told us they observed staff completed moving and handling procedures in a safe manner.

Staff received an induction when they started work and had access to the training they needed for their roles. Their competency to fulfil their role was observed by the registered manager on a regular basis.

The person was 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 this practice.

Quality assurance processes were in place which gave oversight of the service. Relatives told us there was good communication with the registered manager and staff said the registered manager was supportive and encouraging of the work they did. The registered manager was receptive to feedback given during the inspection and expressed a desire to develop and grow further.

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 24 September 2020 and this is the first inspection.

Why we inspected

We undertook this targeted inspection in response to concerns received about poor moving and handling practice, staff training, and lack of support and oversight from the registered manager. We found no evidence during this inspection that people were at risk of harm in relation to these concerns. Please see the Safe, Effective and Well-led sections of this report.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns.

They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating. This is because they do not assess all areas of a key question. Since this service was unrated at the time of this inspection, it remains unrated.

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?

This is the first inspection for this newly registered service. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service effective?

This is the first inspection for this newly registered service. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

This is the first inspection for this newly registered service. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Violet Home Care Limited

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on a specific concern we had about safe moving and handling, training, management and leadership.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Violet Home Care Limited is a domiciliary care agency. It provides personal care to people living in their own houses and flats. It provides a service to older people, people living with dementia and those who are near their end of life.

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. 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 26 July 2021 and ended on 5 August 2021. We visited the office location on 28 July 2021.

What we did before the inspection

We reviewed information shared with us by the provider and the safeguarding concerns we had received. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us of give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We visited the provider's office and spoke with the registered manager and two care workers.

We reviewed a range of records. This included one person's care record and three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke by telephone with one family member, a healthcare professional and a training consultant.

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 service since it was registered on 24 September 2020. We have not rated this key question, as we have only looked at the part of the key question we had specific concerns about.

Assessing risk, safety monitoring and management

- The person was known well by staff. They knew their individual risks and where additional support was required. One family member told us, "Staff know what they need to do to keep [relative] safe." They also said, "I find the service very flexible and accommodating according to any changes in [relative]."
- Where there were known risks to the person, information was available to staff. The provider had assessed risks to their safety and wellbeing. These included assessments of their health condition and risks of falls. The assessments had been created with the person and/or a family member and included plans to minimise risks and protect them. One care worker told us, "Everything is risk assessed. We have to be so careful about safety we must know everything about a new client keep them safe."
- However, we found that there was not always sufficient detail contained within the risk assessment to guide staff. For example, the person's moving and handling risk assessment did not specify the type of repositioning aid staff should use.
- We had no concerns that this person was at risk because staff we spoke with knew them very well. They were able to describe how they assisted this person. We also spoke with a healthcare professional who told us they observed how care workers supported the person and said "The manoeuvre was done safely and with great care. There were no red flags for me with this."
- We spoke with the registered manager following inspection and they said they would ensure that in future, risk assessments would be more robust. Assessments will include information relevant to risks associated with the person, as well as information for staff to inform them of how best to mitigate those risks.
- The provider had ensured risk assessments relating to the environment had been completed. This identified any potential risks around conducting home visits to keep both people and staff safe. A care worker told us they referred to an environmental risk assessment for guidance where the floor covering impeded the person's safe movement.
- The service had a contingency plan in place which covered events such as extreme weather or power failure. The contingency plan had been reviewed and updated to include any risks related to COVID-19.

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 of this service since it was registered on 24 September 2020. We have not rated this key question, as we have only looked at the part of the key question we had specific concerns about.

Staff support: induction, training, skills and experience

- Care workers had completed an induction programme before they provided care and support to people. Records showed care workers had completed training the provider considered mandatory in areas such as safeguarding, medication, moving and handling, infection control and mental capacity.
- A family member told us that overall, they agreed that staff had the skills to care for their relative; however, they said, "Some may be a little inexperienced sometimes in knowing how best to respond to [relative]." The registered manager acknowledged that some staff were less experienced, and since the service had so few people who used the service, some staff's confidence levels took longer to develop.
- A healthcare professional told us, "My observations of their [care workers] ability to do their job is that they are very conscientious and caring. They check out things to be assured they are doing the correct thing."
- A member of staff told us, "Whatever I don't know, the registered manager or senior care will help me with. I am not afraid to ask." Another told us, "I would like the face to face training to be up and going again, now that we are more used to managing things around COVID."
- Care workers had their competency assessed every three months which involved them being observed by the registered manager in the person's own home. They were assessed for how they carried out their duties. We saw a sample of these checks, all of which were unannounced to the member of staff. No concerns had been identified during these checks.
- We noted that the registered manager was not included on the record of training. We discussed this with them and were told "I have sat in on all the training; I have done the same training as the staff." We subsequently corroborated this with the trainer. They agreed that the registered manager's training should be formally recorded and this would be actioned.

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.

- The person had consented to their care and treatment. The provider had undertaken assessments of needs with the person and their family member. They had met with the person and discussed their needs and preferences and got their consent before the package of care began. A family member said, "We all discussed [relative's] care plan with the manager and they noted everything down."
- Staff worked within the principles of MCA and ensured care provided was led by people. One care worker told us, "Of course I always ask people before I support my clients with something."

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 of this service since it was registered on 24 September 2020. We have not rated this key question, as we have only looked at the part of the key question we had specific concerns about.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider had quality assurance systems in place which were used to monitor key aspects of the service. There was a range of policies and procedures which were available for staff to view online. The person using the service was also provided with handbooks which outlined key procedures.
- The registered manager understood their role and their responsibility to those whom they supported, as well as the needs of their staff team. They said, "Communication is so important; I believe in taking people's opinions into account, openness is crucial."
- The registered manager was receptive to feedback given by the inspector. They said, "Starting this business during a pandemic was very challenging, and we are still feeling the effects in terms of trying to grow the business. I want to keep trying and learning."
- We saw written feedback from people who recently used the service. For example, "[Carers] have been amazing; please thank them for everything," and "Carers brought not only practical help and suggestions, but also kind, caring and calm care."
- Staff we spoke with were very positive about their jobs and the support they got. A staff member told us, "The registered manager puts their whole self into the work, it's all from the heart. To do this job you have to understand people and the staff, which they do." Another said, "[Registered manager] goes out of their way to help everybody."
- Staff also told us they felt valued. One told us, "[Registered manager] realises that I have a lot to contribute and I feel this is appreciated."