

VJ Carers Limited

# VJ Carers Limited

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

VJ Carers Ltd is a domiciliary care agency providing personal care to people in their own homes. The service supports older people, people living with dementia and people with a physical disability. At the time of our inspection the service was providing personal care to 54 people.

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 protected from the risk of harm. Care documents contained risk assessments which were clear and included specific guidance for staff on how to prevent people experiencing harm. There were enough, suitable staff to provide personalised, safe care to people. Medicines were managed safely. Staff observed infection control practices when delivering care and support. Staff reflected on practice to make improvements to care and support.

People's needs and choices were assessed effectively by skilled staff. People were supported to have a healthy diet and were protected from the risk of malnutrition and dehydration. Staff work effectively with professionals from health and social care to promote people's health and wellbeing.

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 registered manager and staff team were dedicated to delivering person-centred, compassionate care which promoted people's dignity and independence. The registered manager had implemented clear auditing and governance systems which ensured staff responsibilities were clear and identified actions were completed. Staff and the people they supported were involved in how the service was run and their feedback was encouraged and valued. Staff demonstrated a culture of learning and continuous improvement and worked collaboratively with other professionals to meet people's needs.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection (and update)

The last rating for this service was requires improvement (published 6 April 2021) and there were two breaches of regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection improvements had been made and the provider was no longer in breach the regulations.

### Why we inspected

We carried out an announced, comprehensive inspection of this service on 8 February 2021. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when, to comply with the regulations for safe care and treatment and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions of safe and well-led, which cover those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for VJ Carers Limited on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### 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 well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# VJ Carers Limited

## 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 Care Act 2014.

#### Inspection Team

This inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

#### 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

This inspection was announced. We gave the provider short notice of the inspection visit. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started on 27 April 2022 with our telephone survey of people who use the service and finished on 3 May 2022. We visited the office on 3 May 2022.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection, including notifications received from the provider. The law requires providers to send us notifications about certain events that happen during the running of a service. We sought feedback from the local authority and professionals who

work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to 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 spoke with two people who used the service and six relatives about their experience of the care provided. We also spoke with the registered manager and office manager. We sought feedback from 27 staff. We received feedback from four staff. We sought feedback from eight professionals and received feedback from five professionals. We reviewed a range of records. This included four people's care and support plans, two people's medicines administration records (MARs), the staff training matrix, staff competency checks, the provider's policies for consent and medicines management and the registered manager's audits for the service.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

At the last inspection risks to people's health and safety were not always assessed and documented. This was a continued breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Staff assessed and managed risks effectively for people.
- People's care and support documents contained clear and specific guidance for staff to help them manage risks for people to prevent them experiencing harm, whilst promoting their independence.
- Risk assessments were individualised and written in partnership with people, and their legally appointed representatives where appropriate. They were regularly reviewed by staff.

### Using medicines safely

At the last inspection we found medicines were not always managed safely. Medicines administration records (MARs) did not contain all of the required information and this had not been identified in the registered manager's audits. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made and the provider was no longer in breach of regulation 12.

- People's medicines were managed safely.
- People's MARs contained all of the required information including names of GPs, dates of birth and allergies. MARs had been completed accurately and audits of MARs had been carried out by staff at regular intervals.
- The registered manager and senior team logged and reviewed all medicines errors and took appropriate actions when errors were made, such as providing refresher training to staff.

### Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm or abuse by suitably trained staff.
- Staff knew how to protect people and reported any safeguarding concerns to the local authority and to CQC appropriately in order to protect people.

### Staffing levels

- People received care from staff who had undergone a thorough recruitment process.
- Staff files showed relevant pre-employment checks were completed as part of the recruitment process, including proof of identity, references, employment history with explanations for gaps in employment, and a Disclosure and Barring Service (DBS) check. The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services.
- The registered manager and senior team ensured there were enough staff to meet people's needs and that people received care from the same staff wherever possible to ensure continuity of support for people.

### Preventing and controlling infection

- People were protected from the risk of acquiring an infection.
- Staff had completed training in infection prevention and control and used all the necessary personal protective equipment (PPE) when delivering care and support.

### Learning lessons when things go wrong

- Staff maintained accurate, up to date records of incidents and accidents. These showed appropriate actions were taken by staff to mitigate risks to people and help prevent incidents happening again.



# 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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection we found service user records were not always accurate, complete and contemporaneous. The registered person had not established an effective system to enable them to ensure compliance with their legal obligations. The registered person had not established an effective system to enable them to assess, monitor and improve the quality and safety of the service provided. This was a continued breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made and the registered person was no longer in breach of regulation 17.

- The registered manager had reviewed and improved their auditing systems to enable them to identify and address any shortfalls in service delivery, and to make improvements to quality and safety in the service.
- The registered manager and senior team had made improvements made to medicines administration records, risk assessments and other documents, to ensure people received safe, personalised care.
- Audits of different aspects of service delivery were completed by staff at regular intervals. These were then reviewed by the registered manager and senior team.
- Audits showed actions were identified, assigned to a staff member and completed promptly.
- We reviewed documents relating to a person's mental capacity. Staff had assessed the person as lacking the capacity to make decisions about financial matters. Records showed the person had a legally appointed representative for managing financial matters. However, staff had not recorded a full assessment of the person's capacity to make decisions about their care and support.
- The provider agreed to evidence their reviews and updates of their assessment process and observe best practice guidance to ensure they recorded all relevant assessments of people's capacity to consent to the care and support delivered by staff.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people, engaging and involving people using the service, the public and staff, fully considering their equality characteristics; working in partnership with others

- Staff demonstrated a commitment to providing person-centred care which maintained and upheld people's rights and independence.
- People made many positive comments about the support they received from staff. One person said,

"[Staff] they're marvellous, I don't know what I'd do without them." Another person told us, "They're all marvellous, even the lady in the office is lovely."

- The registered manager and senior team gathered and acted on feedback from people and staff to improve and develop the service.
- Staff gave positive feedback about the registered manager and senior team. One staff member said, "I'm happy and proud to be a part of this agency. We have a good boss and friendly management team. They would support us in any which way they could. My boss is friendly and approachable can communicate effectively. She is an active listener and gives immediate feedback. Our hard work is appreciated and rewarded." Another staff member told us, "Professional, respectful people, always willing to listen to us, solve our doubts and help us in the work processes."
- The registered manager recognised and rewarded staff's achievements. They selected a 'carer of the month' each month to praise staff for their hard work and dedication.
- Professionals from social care reported staff demonstrated effective partnership working and collaboration. One professional said, "[VJ Carers LTD] has communicated effectively with [social care provider] and is happy to arrange joint visits and follow up with health teams when required." Another professional told us, "[VJ Carers LTD] have worked well with us".

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 registered manager understood the duty of candour and their responsibility to take action if something went wrong.