

Valeo Limited

Valeo Domiciliary Care Service

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

Valeo Domiciliary Care Service is a homecare service and supporting living care provider, supporting people with learning disabilities and mental health needs in West and South Yorkshire. At the time of the inspection the service was providing a small amount of personal care to two individuals who lived in a supported living property in Sheffield. The majority of people who used the service did not receive 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

A person we spoke with, a health professional and staff spoke positively about the service and said they thought good quality support was provided. Systems were in place to keep people safe from abuse and action was taken to investigate incidents or untoward events. Risks to people's health and safety were assessed and appropriately managed. People received their medicines safely. Appropriate systems were in place to ensure good infection control practices. There were enough staff to ensure people received timely care and support.

There was a person-centred culture within the service, with people involved in the creation and review of their support packages. Staff spoke positively about the registered manager and said they were visible and retained good oversight of the service. A range of audits and checks were in place and governance systems ensured the registered manager and provider understood how the service was operating. We identified the services Statement of Purpose did not reflect the service type provided at this location. This was immediately amended and a revised Statement of Purpose submitted to CQC to ensure it accurately reflected the service.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting some of the underpinning principles of Right support, right care, right culture. There was a person centred culture within the service which promoted people's dignity, privacy and human rights and the ethos values, attitudes and behaviours of leaders and care staff helped ensure people led empowered lives.

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

Rating at last inspection

The last rating for this service was Good (published 7 September 2016)

Why we inspected

The service had been dormant for a number of years and as a result we had not inspected the service since 2016. We undertook this inspection to check how it was now operating as in 2020 it had started to provide a regulated activity again

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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?

Good ●

The service was safe.

Details are within our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Valeo Domiciliary Care Service

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

The inspection was carried out by one inspector.

Service and service type

This service provides support to people living in supported living settings, so that they can live as independently as possible. Whilst the registered manager managed 11 individual settings, personal care was only provided to two people living in one of those settings. People's care and housing were provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at those two people's personal care and support only.

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

This inspection was unannounced.

What we did before 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 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

The inspection took place between 13 and 21 April 2021. During this period we reviewed documentation remotely and spoke over the telephone with one person who used the service and a health professional about their experience of the care provided. We also spoke with three members of staff over the telephone including the team leader and two support workers. We visited the registered office location on 19 April 2021 to speak with the registered manager and review further documents in person.

We reviewed a range of records. This included two people's care and medication records. We looked at 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 reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 Good. At this inspection this key question has remained the same.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to protect people from abuse and avoidable harm. A person, and staff we spoke with said they were confident people were safe and they did not raise any concerns. Clear safeguarding procedures were in place which were understood by staff and staff had received training in safeguarding. Safeguarding was discussed with people and staff through meetings and supervisions and a confidential telephone line was available for staff to raise concerns.
- Where incidents had occurred, we saw action had been taken to help keep people safe. This included liaising with other organisations and seeking the advice of specialists in behavioural management to help reduce risk. The registered manager understood their responsibilities with regards to safeguarding which gave us assurance correct processes would continue to be followed.

Assessing risk, safety monitoring and management

- Risks to people's health and safety were assessed, monitored and mitigated. People had clear risk assessment documents in place which were subject to regular review. These provided guidance to staff on how to work safely. Risk assessments and care plans were subject to regular review.
- Staff had a good understanding of the people they supported. They and the registered manager demonstrated the service kept restrictive interventions to a minimum and focussed on giving people freedom and independence.
- Checks were undertaken on people's living environments to help keep them safe.

Staffing and recruitment

- There were enough staff deployed to ensure people received appropriate care and support. A person and staff said there were enough staff around. Staff said shifts were always covered and people always received their contracted support hours.
- Safe recruitment procedures were in place to ensure staff were of suitable character to work with vulnerable people.

Using medicines safely

- Systems were in place to ensure the safe management of medicines. People's medicine support needs were fully assessed and clear information was recorded to aid staff. Information about the medicines each person was prescribed and when to give them was recorded. Medicine administration records were well completed giving assurance people received their medicines as prescribed.
- Staff had received training in medicines management and had their competency to give medicines regularly assessed. Any errors were fully investigated to help prevent a re-occurrence.

Preventing and controlling infection

- The service had appropriate infection prevention and control arrangements in place. Risks associated with COVID-19 had been assessed and measures put in place to help protect staff and visitors from harm.
- Staff had access to a range of Personal Protective Equipment and were provided with guidance and training to ensure they worked safely and appropriately.
- Staff supported people to keep their accommodation clean and enhanced cleaning was in place to reduce the risk of transmission.

Learning lessons when things go wrong

- There was a culture of recording, investigating and learning from incidents and adverse events. Incidents were investigated by the registered manager and debriefs took place with staff if the incident involved violence and aggression. A staff member we spoke with told us they felt well supported following incidents of this nature.
- Incidents were reviewed by the provider and analysed to keep a track of themes and trends. Actions were taken following incidents including involving specialists, updating risk assessments and supervising staff to ensure lessons were learnt and to reduce the risk of a re-occurrence.

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- Whilst the service was providing a supported living service, the service was currently only registered with the CQC for the service type Domiciliary Care Services. This meant that the Statement of Purpose was not fully accurate as it had not been submitted with the correct service type. This was immediately rectified by the provider with a revised Statement of Purpose submitted to CQC to ensure it reflected how the service operated.
- The registered manager demonstrated a good awareness of their role and regulatory requirements. They undertook regular audits and checks on the service to ensure it was operating safely and appropriately.
- Documents relating to people's care and support and the management of the service were clear, accurate and well organised. The provider maintained good oversight of how the service operated through the operation of appropriate systems of governance. Information about how the service was performing was submitted to the provider by the registered manager on a regular basis and the providers' quality team maintained oversight of how the service was operating.
- The registered manager demonstrated they were committed to continuous improvement of the service and told of the priorities over the next few months. A service improvement plan was in place to provide structure to these improvements.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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

- There was a positive culture within the service. The person we spoke with and staff spoke positively about the organisation and said it was well managed. Staff said the registered manager was in regular contact with them and retained good oversight of the service. Staff received regular support including individual and group supervisions, about topics to help embed skills and knowledge. The risk of closed cultures and CQC guidance had recently been discussed with staff.
- People's care needs were regularly reviewed, and people had goals and desired outcomes which were reviewed during monthly care reviews. This helped ensure people worked towards good outcomes and ensured their freedom and independence was focussed on.
- When things had gone wrong, the registered manager had communicated the facts of incidents to the required people and investigated these in an open and transparent way.

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

characteristics

- Mechanisms were in place to seek and act on people's views. People were involved in monthly key worker reviews where their opinion was sought on their care. Tenant meetings were also held. Staff told us they felt involved and able to make suggestions. They had regular supervision with the registered manager as well as team meetings and an annual survey to voice their opinions.

Working in partnership with others

- The registered manager worked closely with health professionals to help co-ordinate people's care and support. They worked with local organisations to help provide people with activity and stimulation on a daily basis. The registered manager linked with other managers and the local authority through attendance of provider forums to help keep up to date with best practice.