

Victoria Homecare Limited

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Inspection report

Office 7, M&M Business Park Doncaster Road Doncaster DN3 1HR

Tel: 01302733625

Website: www.victoriahomecare.co.uk

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Victoria Home Care Limited is a domiciliary care agency providing personal acre to people in their own homes or flats. At the time of our inspection there were 78 people using the service.

People's experience of the service and what we found:

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessment and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

Right Support:

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. People received care that was responsive to meet individual needs. People's support focused on them having opportunities to gain new skills and maintain independence. People were made to feel safe by a staff team who were trained to recognise and respond to concerns of abuse and manage people's risks in a safe way. Medicines were managed in a safe way. People received consistent support from a staff team who were punctual and who knew people's needs well. Care plans were detailed and gave staff the information they needed to be able to care and support people in the most effective way.

Right Care:

There were enough staff available to meet people's needs. There was a complaints procedure with which people were familiar and people knew how to make a complaint. Staff worked well with other agencies to ensure people received consistent and timely support.

Right Culture:

There were systems in place to identify when things went wrong and learning adopted to prevent future occurrences. The registered manager adopted an open culture where staff felt valued and proud. The provider and registered manager worked well with other agencies and organisations to improve the quality of care people received.

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 (2 November 2017).

Why we inspected

The service was inspected due to the length of time since the last inspection. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Victoria Homecare Limited on our website at 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.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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 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.	



Victoria Homecare Limited

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 1 inspector.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was announced. 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 available to support the inspection.

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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us

annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager and gathered feedback from 6 staff. We spoke to 8 people using the service over the telephone. We looked at the care records for 3 people, including risk assessments and medicines records. We looked governance systems, policies and procedures and training records.

This performance review and assessment was carried out without a visit to the location's office. We used technology such as telephone calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation.' The inspection started on 12 November 2023 and ended on 16 November 2023.



Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- People told us they felt safe with the support they received from Victoria Homecare Limited. One person said, "I am safe, there is no problem."
- Staff understood their safeguarding responsibilities and knew how and where to report safeguarding concerns

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- People were supported by staff who followed their risk assessments and care plans. A staff member told us," People are safe, we have good communication with management and if I have any issues, they are resolved quickly to ensure safety."
- People's risk assessments were incorporated in their care plans and covered areas that were important to them such as health, medicines, and daily living. The risk assessments were regularly reviewed and updated as needs changed.
- Staff knew people's routines, preferences, and identified situations in which they may be at risk and acted to minimise those risks.
- The provider policies and procedures explained how to manage risk and crisis situations, promoted service continuity and whistle blowing, including the reporting of bad practice.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The provider operated safe recruitment processes.
- The registered manager told us they had adequate staff cover in the event of staff sickness or emergencies as office staff were able to step in to cover care calls.

Using medicines safely

- People were supported to receive their medicines safely.
- People either self-administered or were supported by staff to take their medicine.
- Where people required support with medicines, this had been assessed and care plans included guidance for staff, to support people with their medicines. Electronic medicines records evidenced people had received their medicines as prescribed.
- Staff received medicines training and their competency was checked regularly to ensure good practice was followed

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- People told us staff had good hand hygiene and wore gloves and aprons when delivering care.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- Staff told us they knew how to report accidents and incidents and management shared any lessons learnt to prevent similar incidents from happening again.

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.

• The provider was aware of the MCA, its requirements, and their responsibilities.



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed to Good. This meant people's needs were met.

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.

- People's communication needs were understood and supported.
- The provider was able to produce a range of accessible information where it was required.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to maintain relationships, follow their interests and take part in activities that were relevant to them.
- People were supported as individuals, in line with their needs and preferences. Care provided was personalised to suit people's routines. A person told us, "They [staff] come in on time generally and are very good and flexible."
- People told us staff encouraged them to remain in control of their care and support. The care provided was also adapted as people's needs changed. Care plans were comprehensive and covered all aspects of people's lives.
- Staff gave examples of how they empowered people to make their own choices wherever possible and feedback received confirmed this. One staff member said, "I personally love the role I have and especially getting to know the service users and feeling their appreciation for what we do, and giving care and company to those who need it."

Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to and used to improve the quality of care.
- People had no concerns about the service and felt assured complaints would be taken seriously. A person said, "They are like my family."
- The provider had a clear complaints policy and procedure which was shared with people using the service.

End of life care and support

• No one who was being supported with end-of-life care at the time of our inspection.



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 Good. At this inspection the rating has remained 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; 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 had systems to provide person centred care that achieved good outcomes for people.
- Before people started to use the service an assessment was completed to ensure their needs could be met. The registered manager completed frequent reviews of care to make sure needs were being met or if changes and additional care was needed.
- Feedback from relatives and people was positive about the care they received. One person said, " Overall, they have been excellent."
- The provider understood their responsibilities under the duty of candour.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- Staff told us they were well supported by the registered manager. One staff member told us, " All raised issues are listen to by my manager and I felt listened to."
- The registered manager had a range of checks and audits in place.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- People were supported and enabled to express their views and needs.
- People told us they were able to express their views and opinions of the service and felt listened to. One person said, "The manager has been out to see me and I have no complaints at all."
- •The provider had created a learning culture at the service which improved the care people received.

Working in partnership with others

• The provider worked with other agencies to ensure people received the care they needed.