

Volsec LTD

# Volsec Healthcare Ltd

## Inspection report

Office 7, The Plaza Business Centre  
45 Victoria Avenue  
Southend-on-sea  
SS2 6BB

Tel: 07944659871

Date of inspection visit:  
10 January 2023  
11 January 2023

Date of publication:  
26 January 2023

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Volsec healthcare limited is a domiciliary care agency who provide personal care to people in their own homes. At the time of inspection approximately 20 people were using the service. 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 and their relatives were very positive in the feedback they gave about the service. One relative said, "They are a very well-run company."

We have made a recommendation about person centred care.

Care was person-centred and delivered in a way that was intended to ensure people's safety and welfare. People were cared for by staff who had been recruited and employed after appropriate checks had been completed. Staff had received appropriate training. There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents. Medicines when needed were dispensed by staff who had received training to do so.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service support this practice.

People when needed were supported with hydration and nutrition. The provider responded to complaints received in a timely manner. People were supported to make plans for the end of their life.

Systems had been put in place to monitor the service and continuously drive improved outcomes for people.

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

This service was registered with us on 25 August 2021 and this is the first inspection.

### Why we inspected

This inspection was prompted by a review of the information we held about this service.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection program. 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 in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring 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.

# Volsec Healthcare Ltd

## 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 Health and Social Care Act 2008.

#### Inspection team

The inspection was completed by one inspector.

#### Service and service type

Volsec Healthcare limited is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

#### 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

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 10 January 2023 and ended on 11 January 2023. We visited the location's office on 10 January 2023.

#### What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority.

We used the information the provider sent us in the provider information return (PIR). A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 2 people and 2 relatives. We spoke with the registered manager, nominated individual and 3 members of care staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records including 4 people's care records, 3 staff recruitment folder, audits, policies and training records

# 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 newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives felt safe using the service. One person said, "The staff are very helpful and kind." A relative told us, "The staff are very reliable."
- Staff had received training in safeguarding and knew how to raise an alert if they were concerned about somebody.
- The provider had a 'whistle blowing' policy for staff to follow and followed the local authority's safeguarding policy.
- The registered manager knew how to safeguard people and would work with the local authority if needed to raise and investigate concerns to keep people safe.

Assessing risk, safety monitoring and management

- Risk assessments were in place and included assessments of people's environments and care needs such as moving and handling.
- People's needs were assessed to identify their level of risk in an emergency so staff could identify the people with higher support needs. For example, people who were at greater risk because they had no family support.
- Staff knew what to do should they come across an emergency situation, such as a person having a fall or finding a person not answering a care call. One member of staff said, "If we found someone had a fall, we will call for an ambulance and let the office and next of kin know."
- The registered manager had a system in place to check care calls were happening when they should and to monitor for the risk of missed calls.
- The provider had business contingency plans in place to support the service through any untoward events, to ensure the service could continue to run smoothly and safely, and policies in place to support staff in an emergency.

Staffing and recruitment

- People were supported by a consistent staff team. Their preference for the gender of carers who provide support was considered. A relative told us, "The staff are very good and are on time, any issues they give us a ring."
- The registered manager told us they had recruited above the hours they currently needed to allow for flexibility and growth of the service.
- Recruitment processes were followed to ensure staff employed were suitable for the role. This included obtaining references, checking work history and obtaining a Disclosure and Barring Service (DBS) check and Police checks from abroad. Disclosure and Barring Service (DBS) checks provide information including

details about convictions and cautions held on the Police National Computer. This information helps employers make safer recruitment decisions.

#### Using medicines safely

- People were supported to receive medicines safely. Where people required support medication administration records were kept and these were maintained to a good standard.
- Staff had received training in supporting people with medicines and had their competency checked to do this.
- There was a medicine policy in place to provide guidance to staff and the registered manager completed regular audits of medicine records.

#### Preventing and controlling infection

- Staff had received training in infection prevention control and COVID 19. Staff were provided with personal protection equipment (PPE), and had their competency checked to use this.
- The provider had policies in place to support good practice and followed government guidance.
- The provider had an infection prevention and control policy for staff to follow.

#### Learning lessons when things go wrong

- The registered manager had regular meetings with staff and the senior team to share information and learning from incidents and accidents. Staff also had regular discussions on people's care needs and shared information.

# 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 for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Before people began using the service their care needs were assessed and their choices for care recorded in support plans for staff to follow. The registered manager told us this was then reviewed and adapted as needed.

Staff support: induction, training, skills and experience

- Staff were supported with a full induction and their competency to provide care checked. The registered manager told us new staff worked with experienced staff as part of this induction. One person said, "The staff seem to know what they are doing and are well trained."
- Staff new to care were supported to complete the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- Training had mostly been provided on-line, however the registered manager and provider were in the process of sourcing face to face training for certain subjects.
- The registered manager had put systems in place to complete regular spot checks and hold supervision meetings with staff.

Supporting people to eat and drink enough to maintain a balanced diet

- Where needed people were supported with food and fluids and staff kept records. People's preferences for food and drink was identified and how they liked to be supported.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager had made links with other healthcare professionals and liaised with them when further care needs were identified for people. For example, they liaised with occupational therapist services to assess people's equipment aid requirements to help them remain comfortable and independent whilst at home.
- One member of staff said, "I have met with social workers in people's homes to review care needs together."

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 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.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff had received training in MCA and knew to gain consent from people to support them with their care.
- People's consent for care was recorded on care documentation.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People and their relatives were very complimentary of the staff and the care and support they received. One person said, "The staff are extremely good." A relative said, "I have been really pleased with the service."
- People were supported as individuals and their preferences recorded in care documentation for staff to follow.

Supporting people to express their views and be involved in making decisions about their care

- The registered manager and senior staff met with people to get their feedback on care.
- The registered manager also asked people to complete feedback cards on the performance of the service they received. One comment we saw said, 'Nothing we asked for was too much trouble and was carried out perfectly.'

Respecting and promoting people's privacy, dignity and independence

- People were supported by staff who respected their privacy, dignity and promoted their independence. One person told us, "The staff are very kind and friendly and never make you feel awkward."
- A relative told us, "We have a perfect balance with the carers now and the support they give."

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Before people started using the service their needs were assessed. If the service could meet the needs of the person, and the service had capacity to take on care packages, support was then agreed.
- Care plans identified how people liked to have their needs met as individuals. Support needs were regularly reviewed by senior staff and changes to care packages made when appropriate.
- We found where a person had a specific health condition there was not a care plan in place to support staff with managing this condition. For example, one person was being supported to have eye drops administered but we did not find a care plan to guide staff in the best way to apply these. We discussed this with the registered manager who agreed to put more detailed plans in place.

We recommend the provider considers best practice guidance to provide staff with information in care plans when supporting people with specific health conditions .

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 considered, and care planned appropriately to ensure these needs were being met.

Improving care quality in response to complaints or concerns

- The registered manager had a complaints procedure in place and people knew how to make a complaint. Any concerns raised were responded quickly in line with this procedure.

End of life care and support

- Staff received training in how to provide end of life care and worked closely with other health professionals to provide support.
- People's wishes at the end of their life were considered and recorded.

# 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 for this newly registered service. This key question has been rated 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

- Information in the providers information return (PIR) demonstrated how the service had been flexible to meet people's individual needs.
- Relatives and people, we spoke too were able to describe how they had positive outcomes from the support they had received. One relative said, "Staff have been really accommodating with the call times."
- Staff shared the manager's vision for the service. One member of staff said, "We want people to be treated with privacy and dignity, have person centred care so they can remain living in their own homes."

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

- Managers and staff were clear about their roles. The service had a structure in place where senior staff and leads provided support and oversaw care being delivered by staff.
- The service always had a senior member of staff on call to support staff with any issues they may encounter. Staff told us they felt support by the management team and that communication was good.
- The registered manager held regular meetings with staff to get their feedback and discuss care needs of people.
- The registered manager understood their responsibility under duty of candour to be open and honest and investigate when things go wrong.

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

- The registered manager or a member of their senior team met with people, relatives and other health professionals to get feedback on the care and support they were receiving.
- Staff received training in equality and diversity and people's equality characteristics were considered.

Continuous learning and improving care; Working in partnership with others

- The registered manager had sourced a number of on-line courses for staff to complete that were relevant to the care being provided. They continued to source further training for staff that could be provided face to face.
- There were systems in place to monitor the overall performance of the service being delivered, including monitoring of call times, audits of documentation and regular staff meetings.

- When required the service worked in partnership with other healthcare professionals to support positive outcomes for people.