

Viable Care Services Limited

Viable Care Services

Inspection report

23 Blackwell Crescent
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Date of inspection visit:
09 September 2022
16 November 2022

Date of publication:
24 November 2022

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

Viable Care Service is a domiciliary care agency and provides personal care and support to people who require assistance in their own home. At the time of our inspection 5 people were being supported by 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.

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 assessments 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 support 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.

People's experience of using this service and what we found

Right Support: People were happy with the care and support they received. People were supported by a regular team of staff who knew them well. This promoted continuity of care. Staff enabled people to access specialist health and social care 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.

Right Care: People's needs and preferences were assessed prior to receiving the service. People received consistent care from staff who knew them well. People and those important to them were involved in planning their care. Staff understood how to protect people from poor care and abuse. There were enough appropriately skilled staff to meet people's needs and keep them safe. Risk assessments identified and reduced any risks to people and staff.

Right Culture: The registered manager and care team listened and responded to people's views. Quality assurance and monitoring systems were used to identify shortfalls and improve the service for the people who used it. People received good quality care, support and treatment because trained staff could meet their needs and wishes. People were supported to maintain good health, were supported with their medicines and had accessed healthcare services when needed. Staff prepared food and drink to meet people's dietary needs and preferences. People received care that was tailored to their needs.

Staff and the registered manager worked effectively with community health and social care professionals to ensure people's needs were met. People knew how to raise issues or complaints, and said the service was responsive to their needs. People felt consulted and involved in the running of the service.

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 5 December 2019 and this was the first inspection.

Why we inspected

This was the first inspection of a newly registered service.

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 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.

Viable Care Services

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, staff and managers.

Inspection team

The inspection was carried out by 1 inspector.

Service and service type

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

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 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, who is also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

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.

What we did before the inspection

We reviewed information we had received about the service since registration. We sought feedback from professionals who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. 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

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, phone calls to staff, e-mails and electronic file sharing to enable us to review documentation. Inspection activity started on 9 September 2022 and ended 16 November 2022. We spoke with 3 people who used the service and their relatives to gain their feedback about the quality of the service. We spoke with the registered manager and 2 members of care staff about the quality and safety of the service.

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 were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. People we spoke with told us they felt safe using the service.
- Staff had undertaken training in safeguarding and knew how to raise any concerns.
- The manager understood their legal responsibilities to protect people and share important information with the local authority and CQC.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People were protected from the risk of harm because the provider ensured risks were assessed and plans put in place to reduce risk.
- People and relatives told us people were safe, as a result of the care they received from staff.
- One staff member said, "I had time to get to know people and their care plans provide good information about people's needs."
- The provider had a procedure for the management of accidents and incidents. However, no accident or incidents had occurred since the provider had been operating.

Staffing and recruitment

- There were enough suitably skilled and qualified staff available to safely meet people's needs.
- Staff were recruited safely because the provider carried out appropriate pre-employment checks. This helped to protect people from the risk of unsuitable staff being employed.
- Staff supported people based on their assessed needs. People told us they received the care and support they needed. One person told us, "My carers tell me if they are running late. They say, 'if you are worried about anything call me'. They are thoughtful and careful."

Using medicines safely

- People received their medicines safely and as prescribed.
- There was a policy and procedure for the safe administration of medicines and staff were aware of these. Staff received medicines training and had their competency assessed.
- The registered manager carried out regular audits of medicines and the medicines administration record (MAR) charts.

Preventing and controlling infection

- The provider had appropriate policies and procedures in place regarding the prevention and control of infection.

- The registered manager promoted safe working practices in relation to Covid-19, such as wearing appropriate PPE, hand hygiene and enhanced cleaning.
- People told us staff were careful to maintain good hygiene practices, to help keep them safe.
- Staff were aware of how to use PPE effectively and safely. The registered manager carried out spot checks to ensure staff were following good infection control practices.

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

- People's needs were assessed and planned for in line with good practice guidance and law.
- The registered manager met with people to discuss their needs before they started to use the service. They carried out assessments which covered people's physical health conditions, personal care, nutrition and mobility. People and their relatives took part in the assessment process.
- The registered manager told us regular reviews of people's needs were important to ensure changing needs were met.

Staff support: induction, training, skills and experience

- People were supported by staff who were sufficiently trained, supported and supervised.
- Staff confirmed they received training in areas of care which were central to their role. Staff were all up to date with their training.
- People felt staff were trained and experienced in their roles. One person said, "My staff are well trained."
- Staff received an induction and training when they first started and continued to receive training to develop their knowledge and skills. One staff member commented, "My training is up to date."
- Staff told us, and records showed staff received support, supervision and appraisal from the registered manager to improve in their work experience.

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

- People received support to eat and drink enough to maintain a balanced diet.
- People's nutrition and hydration needs and preferences were included in people's support plans.
- One relative told us, "They [staff] help prepare meals. They do it to suit our preference."

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

- Care records included clear information about the support people needed to maintain their health.
- People had access to healthcare and social care services where required. Information and guidance received from other professionals involved in supporting people was reflected in their care records.

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.

- The registered manager and staff understood the principles of the Mental Capacity Act (2005) and how to support people to make decisions for themselves when they had capacity.

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 all confirmed they received kind and compassionate care.
- Staff used positive, respectful language which people understood and responded well to. A relative told us, "If I were to lose any of my carers I would be absolutely devastated. They do very well. The biggest difficulty is time, if I won the Pools, I'd offer them full time employment."
- People were supported by a small team who knew them well and how they liked to be supported. People's spiritual and religious beliefs were respected, and people were supported to worship and express their faith accordingly.
- Staff were focused and attentive to people's emotions and support needs.
- Staff were able to tell us about people's preferences and how they like to be supported.

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

- The registered manager worked closely with people and their relatives to ensure care was tailored to match their individual needs. We saw evidence of this in people's support plans.
- Support plans were kept up to date and regularly reviewed to ensure staff had all the information they needed to provide person centred care.
- One relative wrote, "The carers provide excellent care for [my relative]. They are professional and nice people. I would definitely recommend Viable to anybody who needs care."

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with respect and dignity.
- People confirmed staff maintained their privacy, dignity and independence. One person who used the service said, "I'm quite proud of our little team; the relationship we've built. My team are very respectful."
- The service ensured people's confidentiality was respected. People's records were kept securely.

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

- People received personalised support based on their assessed needs and preferences.
- The registered manager undertook a thorough assessment of people's care needs when they first contacted the service. Care packages were planned with people's and relative's involvement to ensure their needs could be met.
- People's care was reviewed regularly, and people had the opportunity to shape the service they received. The manager told us they regularly updated the care plans with families where needed.

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 people should get the support they need in relation to communication.

- Staff were skilled in supporting people to communicate and express their views.
- The service followed this standard. Information was available in a variety of formats. People told us information was provided in a way they could understand.

Improving care quality in response to complaints or concerns

- There was a complaints policy and procedure in place and people who used the service and their relatives were given information about this.
- A relative told us they had no complaint and wrote, "I am very grateful for the care Viable is providing for [my relative]. They have been brilliant with ensuring all needs are met and we have had no issues or complaints regarding the care received. I would definitely recommend them."
- The registered manager confirmed they had not received any complaints since they had registered.

End of life care and support

- No-one was in receipt of end of life care at the time of our inspection.
- If required, the registered manager would assess each person individually and work in partnership with community based health professionals.

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.

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

- The provider had clear systems in place to monitor the quality and safety of the service. The registered manager carried out regular quality audits. We found these audits were thorough and helped maintain good standards of practice.
- The registered manager worked alongside the care staff regularly. They also completed spot checks of staff's practice during care visits. This helped to make sure staff were clear about their role and people received consistent, high-quality support.
- Staff meetings took place and covered areas such as people's care plans, time keeping and medicines and staff training. Time was provided for staff to discuss any concerns.

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

- The registered manager and staff team were committed to the values of the organisation which aimed to provide high-quality, person-centred care.
- People's relatives and staff said they found the registered manager supportive and approachable. One relative wrote, "I cannot thank the manager enough for always being very supportive and being there to listen and help us with any questions and concerns."
- People were encouraged to give their views and feedback about the quality of the service they received. The registered manager had tools in place to gather feedback such as surveys for people and relatives to complete about their experience of the service. We saw people had provided positive feedback about the quality of care and support provided by the care staff.
- Staff felt valued and respected by the registered manager and were proud and happy to work for the agency.

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 was aware of their responsibility in relation to the duty of candour.
- People's relatives told us they were kept up to date at all times.
- The registered manager was aware of their responsibility to report incidents to appropriate agencies when needed, including CQC and the local authority safeguarding team.

Working in partnership with others

- Working in partnership with others
- There was l evidence of the registered manager and staff working in partnership with external agencies. This included district nurses and GPs to make sure the service people received was person centred.