

Care2Victory Services Ltd

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Inspection report

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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

Care2Victory is a domiciliary care agency providing personal care to people living in their own homes. At the time of our inspection there were 2 people using the service.

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

Systems and processes were in place to protect people from harm and abuse. People told us they felt safe and staff understood their responsibilities to report concerns.

Risk assessments were in place for people and were individual to their needs. Care plans gave guidance for staff to follow and staff told us they found them useful when caring for people safely.

Medicines were managed safely. Appropriate support was given to people that needed it and records that were kept, did not include any gaps or discrepancies.

The service was new and was only providing support to 2 people. There were enough staff employed to meet people's needs. The registered manager had plans to safely increase the service and ensure they have staff available. Staff were recruited safely with relevant checks in place.

People had their needs assessed before receiving care. Care plans were personalised and included people's needs and wishes. Care staff were given the opportunity to read care plans before supporting people. People and relatives told us they were involved in the care planning process and felt included.

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.

Care staff had received a thorough induction and a variety of online training to meet people's needs. Some areas for improvement had been identified following a complaint received. However, appropriate actions had been taken and improvements had been made. People were supported to maintain a healthy diet and remain independent where possible.

People and their relatives told us staff were kind and caring. Feedback we received about the registered manager was positive. Staff, people and relatives all felt they provided a positive culture within the service. They felt listened to and part of the organisation. The registered manager was aware of their regulatory responsibilities.

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

Why we inspected

This service was registered with us on 7 February 2022 and this is the first inspection.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Care2Victory Services 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

This inspection was carried out by 1 inspector.

Service and service type

Care2Victory is a domiciliary care agency. It provides personal care to people living in their own homes and specialist housing.

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 06 April 2023 and ended on 11 April 2023. We visited the location's registered office on 06 April 2023.

What we did before the inspection

We reviewed information we had received about 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 to the registered manager who was also the nominated individual during the inspection. We also spoke with 2 carers, 2 people who used the service and 2 relatives. We reviewed a range of records. This included 2 people's care records and multiple medication records. We looked at 2 staff files in relation to recruitment and supervisions and a variety of records relating to the management of the service. We also looked at quality assurance 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

- Systems and processes were in place to safeguard people from the risk of abuse. The registered manager had a policy in place to ensure people were kept safe. This included reporting to the relevant authorities and if necessary, removing staff from the service pending investigation.
- People told us they felt safe using Care2victory. One person told us, "Yes I do feel safe, I really trust them. They have access to my locked box to access money for my shopping, they never take out more then they need to."
- Staff we spoke to were able to tell us how to recognise signs of abuse. One staff member told us what process they would follow if they had concerns. This included informing the relevant safeguarding authority if they felt the registered manager hadn't acted on their concerns.

Assessing risk, safety monitoring and management

- People using the service had their risks assessed, monitored and managed. A variety of risk assessments were in place so staff were aware of how best to support people and minimise risk. This included risk of falls and any home environment risks.
- Where a person had been identified as high risk of falling, robust risk assessments were in place to minimise the risk in the person's home. Since using the service, the person hadn't had any further falls.
- Staff told us they found the risk assessments useful in providing relevant information. One staff member told us, "Yes risk assessments provide good information and I was given plenty of time to read them when I first started."

Staffing and recruitment

- Staff were recruited safely. Staff files included staff work references, identity, employment history, and a Disclosure and Barring Service (DBS) check. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Care2victory is a newly registered service and currently only provided care for 2 people in the community. There were enough staff employed to help support these people safely. The registered manager had plans for recruitment and would do this safely as client numbers increased.

Using medicines safely

- Medicines were managed safely. We reviewed people's medicines administration records (MAR) and found no discrepancies or unexplained gaps. People were supported to remain independent, staff dispensed medicines safely for people to take.

- People had their 'PRN' medicines administered safely. PRN medicines are medicines that are given on a when required basis. Protocols were in place to give guidance to staff on how and when to administer. The registered manager informed us they would include information such as desired effect to people's care notes.
- Staff received training in the safe administration of medicines. One staff member told us how they supported a person by asking them about their PRN eyedrop medicine daily. This enabled the person to get help and support if they needed it.

Preventing and controlling infection

- People were protected from the risks associated with poor infection control. The service had processes in place to reduce the risk of infection and cross contamination.
- Care workers were supplied with appropriate personal protective equipment (PPE), including gloves and aprons. They had also completed training in infection, prevention, and control.

Learning lessons when things go wrong

- The registered manager took action to learn lessons when things went wrong. We were told about a time when a lifeline didn't work in the event of a person falling. The registered manager put in a monthly audit check the person's lifeline to ensure this wouldn't happen again.

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 had their needs assessed prior to receiving care from Care2victory. Initial assessments were carried out to ensure the service could meet a person's needs safely. A plan of care was then put together with people for staff to follow, which included people's needs and choices.
- Nationally recognised tools were used to help assess and manage people's needs. For example, waterlow assessment tools were used to help assess and mitigate risks to people developing pressure sores. Actions were taken when people were at high risk.
- Staff had access to people's care plans before providing care to people so they could understand how to meet people's needs. Staff accessed these records on their phones. During the inspection, we found people's care plans provided information on people's current care needs.

Staff support: induction, training, skills and experience

- Staff had completed a variety of training to meet people's needs. The registered manager had outsourced a provider to carry out training that needed to be done face to face. This included manual handling and first aid.
- Staff told us they felt the training was sufficient to help meet people's needs. One staff member told us, "The training is very good, it helps me to do my job."
- New staff received a thorough induction and shadow shifts were available to ensure staff were ready to work alone. Staff were required 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.

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

- Staff supported people when required to maintain a balanced diet. Staff told us how they supported people to remain independent and make choices around what food and drink they wanted. One staff member told us, "[Person] comes into the kitchen and picks what meal they would like and pudding in the evening. [Person] tells us what they would like for lunch and we prepare it."
- Staff ensured people had plenty of fluids. People and their relatives told us how staff always ensured a fresh cold drink was left after the call.

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

- Staff worked with other agencies to provide effective care. Where a person had poor eyesight, the

registered manager made referral requests to their GP for an occupational therapist (OT). Staff supported the OT's visit and adaptations have been made to this person's home for safety.

- Staff supported people to attend regular hospital and other healthcare appointments. Reminders were given to the person to prepare them for the trip and staff assisted outside of call hours when necessary. Attendance to each appointment was provided which helped the person process any information that was given.
- Staff worked closely with the local GP surgery. Together they provided consistent care to people when they required it.

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

- Care2victory were only providing care to two people in their own homes. Mental capacity assessments were not currently required. However, the registered manager was able to tell us how to apply the principles of the MCA when it deemed necessary.

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 were supported in the way they preferred. Staff knew people well and respected their choices and preferences.
- People and their relatives told us staff were kind and caring. A person told us, "Yes, I think they are very kind, nothing is too much." A relative told us, "[staff member] is definitely caring, if I had any concerns, I would raise them."

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

- People had been involved in their plan of care. People's care plans were individual to them, and regular reviews were carried out and kept up to date.
- Relatives were positive about the people's involvement in care plans. A relative told us, "I was involved in the beginning, but [person] deals with all that now, and is encouraged to do so which is good."
- Staff were allocated enough time to support people in a compassionate way. Care calls allowed for social opportunities and staff were able to sit and talk to people. A relative told us, "I think they are wonderful company, they are never late, always on time and if not will ring and let us know, always stay for the time we pay for and never leave early."

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with respect and maintained their dignity when providing care and support. Staff told us how they support people individual to them so they feel comfortable and safe. They recognised the importance of privacy for people they cared for.
- People felt as though staff respected their privacy and encouraged independence. One person told us, "Yes, they leave me to it, and when I am ready, they come and help on areas I need help with."

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's care was person centred, meeting their needs and preferences.
- Initial assessments took place before care began to ensure the service could meet people's needs. Giving people and their families the opportunity to discuss what was important to them.
- The service was flexible when providing care, considering people's requests and working with them to provide a service which met their needs and preferences.

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.

- The communication needs of the people had been met. Information was given to people in a format they could understand. Care plans included all relevant guidance for staff to follow on how best to support people.

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. The service involved people and their families when providing care and built strong relationships with them.
- Many people using the service did not require support to follow activities, however, the staff took an interest in people's hobbies and spent time discussing what was important to them.
- Care plans included people's likes and dislikes, so staff understood what was socially and culturally important to them.

Improving care quality in response to complaints or concerns

- The registered manager acted appropriately when receiving complaints. They had recently received feedback from a person regarding care they were receiving. Action had been taken to immediately address the concern and re-training for the staff member was implemented.
- Feedback we received from relatives in response to complaints included, "[Registered manager] has addressed the concerns and has sorted any issues we had." And, "Yes, I feel confident that any issues raised with [registered manager] will be addressed."

End of life care and support

- The service are not currently providing end of life care for people. The registered manager told us about the process to be able to support people at the end of their life. Training will be outsourced to ensure staff are confident and can provide care to people at the end of their lives.

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

- Staff spoke highly of the registered manager. Staff felt they were approachable and had an open-door policy. Comments included, "[Registered manager] is a very gentle, understanding person and down to earth. Wants what is best for the carers and clients." And, "I can contact [registered manager] at any time, been no problems so far. I feel supported in my role."
- Newly appointed staff were positive about the support that had been given to their new role. One staff member told us, "I have found [registered manager] wonderful, a lovely person, they have helped me to adjust to the system, really supportive and understanding."
- Relatives we spoke to were positive about the management of the service. One relative told us, "I find the [registered manager] absolutely wonderful, deals with things straight away and listens and actions things appropriately." Another relative told us, "The management are very responsive, I have access to the app I can text or ring [registered manager] at any time and they respond and contact me when needed."

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 knew their responsibilities under the duty of candour. They had policies in place to ensure they were open and transparent when things went wrong. They told us it was important to use these experiences to learn and improve from.

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

- Statutory notifications had been submitted to the CQC in line with their regulatory responsibility. Notifications are information we receive from the service when significant events happen, such as an allegation of abuse or a serious injury.
- The registered manager recognised the importance of regularly monitoring the quality of the service. Audits were carried out in areas such as medicines, incident reporting and care call logs. The registered manager arranged for an independent auditor to carry out audits where she was involved with care provision.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- This is a newly registered service however, the registered manager had worked hard to engage people and

staff to improve the service.

- People and relatives have taken part in various feedback surveys since using the service. We reviewed a variety of surveys which were all positive. A relative told us, "We have both done about 3 or 4 for feedback one for [person] and one for me. It's a great opportunity to feedback." Another relative told us, "[Registered manager] is very open to changes and her work ethos is extremely brilliant."
- Staff were also asked to feedback using surveys. Staff were positive about these. One staff member told us, "They are good, [registered manager] is open to our ideas and suggestions."
- Staff worked in partnership with a range of professionals, including GPs, district nurses and occupational therapists. People's care records showed involvement from other agencies and staff had used the advice and guidance provided to help with people's care planning.

Continuous learning and improving care

- The registered manager was always looking for ways to learn and improve the service. Where a person they were supporting was continually missing healthcare appointments., the registered manager looked for new ways to support them, such as equipment to help their eyesight and reading.
- The registered manager told us about how important communication is amongst herself and the team. By using the online system, she receives direct messages from the staff when they need something. For example, staff were struggling to see keypads to people's homes. New torches were provided to help staff access their care calls.