

Vow Care Services Ltd

Vow Care Services Ltd

Inspection report

30 Larchwood Road
Hemel Hempstead
HP2 5NB

Tel: 01442462249

Date of inspection visit:
13 June 2023
28 June 2023

Date of publication:
21 July 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

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 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.

About the service

Vow Care Services Ltd is a domiciliary care agency providing personal care for 8 people at the time of the inspection. The service is registered to provide support for older people and younger adults who may live with physical disabilities, sensory impairment, mental health needs, dementia, eating disorders, learning disabilities or autism.

Not everyone who used the service received 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

Right Support:

People were involved in planning how their care needs would be met. 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 workers understood the importance of providing respectful and dignified care and support centred around people's individual needs.

Care workers had received appropriate training and had a good understanding of how to provide safe and effective care and support. Additional specialist training was provided to enhance care workers' understanding of people's health and wellbeing.

People were safeguarded from abuse and care workers were knowledgeable about how to support people safely. Accidents and incidents were recorded and shared with the wider care team to promote learning and reduce recurrence.

Right Care:

People had detailed risk assessments and care plans in place to enable care workers to provide safe and

consistent care and support.

The registered manager operated a robust recruitment process to help ensure people received care and support from care workers who had been safely recruited and inducted into care.

People were supported by kind and compassionate care workers who knew their likes and dislikes.

Right Culture:

The registered manager had developed a quality assurance system encompassing all aspects of the service delivery. The registered manager undertook a range of routine checks to satisfy themselves the service was performing safely and in line with regulation.

The registered manager had developed an open and inclusive culture in the service. They encouraged the care team to truly promote people's individuality, protected their rights and supported care workers to develop their skills and knowledge.

We received positive feedback from people, their relatives and staff about the registered manager. Everyone we spoke with, including external professionals, said the registered manager was approachable and responsive.

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 28/06/2019 but did not start to provide a service until 14/04/2020. 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, 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 ●

Vow Care Services Ltd

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.

Inspection team

This inspection was undertaken 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 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

This inspection was unannounced.

Inspection activity started on 13 June 2023 and ended on 28 June 2023.

What we did before the inspection

We reviewed information we had received about the service since registration. 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

We used technology such as emails and telephone calls to engage with people using the service and staff, and electronic file sharing to enable us to review documentation. We received feedback from an external health and social care professional, 4 care workers, 2 people who received care and support, 4 relatives and the registered manager.

We reviewed records including staff training, complaints and compliment logs, accident and incident trackers and the registered manager's governance and monitoring documents. We reviewed care plans and risk assessments for 2 people.

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

- The registered manager operated effective systems to help protect people from the risk of harm or abuse. Care workers received training and understood how they would report any concerns both internally to the registered manager and externally to the local authority safeguarding team.
- The registered manager understood their responsibilities to safeguard people from abuse. They gave an example where they had shared a safeguarding concern with the local authority and demonstrated a clear knowledge and understanding of the safeguarding processes.
- People, external professionals and relatives told us care workers provided safe care for people.

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were assessed and care plans were developed to help remove or manage any risks where possible. Risk assessments had been developed for areas such as using a walking aid to mobilise independently, falls, fire and self-administration of medication. These risk assessments enabled people to stay as independent as possible within the confines of their health needs.
- The registered manager helped ensure people received support in the event of an emergency. A care worker told us, "I raised a concern through our online reporting platform, and the line manager appearing at the person's home 30 minutes later to help provide direction on how to administer the person's medications more proficiently."
- Care workers were supported to provide safe care. A care worker told us, "We have the training we need; we have the supervision we need and have spot checks by our manager to confirm we are doing the right things to keep people safe."

Staffing and recruitment

- People's relatives told us there were enough care workers available to meet people's care and support needs. There had not been any missed care calls and all feedback received said the care and support was delivered within agreed timeframes. A relative told us, "Vow Care Services have provided us with consistent care workers at set times of the day. All the care workers are punctual and have never missed a care visit."
- The registered manager operated robust recruitment procedures; appropriate checks were undertaken to help ensure applicants were suitable to work at the service. Criminal record checks and satisfactory references were obtained for all applicants before they worked with people independently.
- Newly appointed care workers were personally introduced to people who used the service by the management team. This meant people always knew the care worker coming into their home.

Using medicines safely

- Care workers received training to support them to administer people's medicines safely. The registered manager undertook competency assessments once staff had completed their training to help ensure safe practice.
- Care workers supported some people with administering their medicines and just prompted others to take theirs as needed. A relative said, "Care workers prompt [person] to take their medicines at the right times."

Preventing and controlling infection

- People were protected from the risk of infection because care workers had been trained in infection control and followed current infection prevention and control guidance.
- Care workers were supplied with personal protective equipment (PPE) to help prevent the spread of infections and were clear on their responsibilities with regards to infection prevention and control. The registered manager told us they held plentiful stocks of all PPE.

Learning lessons when things go wrong

- The registered manager took appropriate action in response to any concerns and learning was shared with the whole team. An example given included a 'near miss' where it had not been noticed a person's medication was about to run out so it had not been re-ordered in time.
- The registered manager told us, "A big lesson was learnt and adequate measures were taken so there was no occurrence, even though it was a near miss, it could have been worse." A memo was sent to the care team reminding them of this and also shared in team meetings and supervisions.

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

- People's needs were assessed before they started to use the service. The assessments were conducted with the person and their relatives (if appropriate) and included information about care and support needs and individual wishes and preferences. The assessments formed the basis of people's care plans and risk assessments.
- People and relatives praised the care team for the care and support they delivered. A person told us, "I have exercises to do, they (care workers) encourage me and drive these exercises forward, they are helping me to regain my mobility and independence."
- People's dietary needs and requirements were identified in their care plans. At the time of this inspection there was little support provided in this area however, care workers had received training around how to support people with these needs. A relative told us, "Care workers prepare [person's] meals and encourage them to join in with the preparation of meals."

Staff support: induction, training, skills and experience

- Care workers received training in basic core areas including safeguarding, safer moving and handling, dementia, fire safety and the Mental Capacity Act. Care workers had a good understanding of these topics and received supervision and competency observations to help ensure they had the appropriate knowledge to perform their job roles. A care worker said, "I am confident I have all training and support needed in carrying out my role effectively. In addition, the Vow Care management always check my day-to-day practice."
- Management and care workers attended a variety of training modules reflecting care and support of the frail and the elderly. These included topics such as end of life care, diabetes awareness and managing pressure areas amongst others.
- Newly recruited care workers inductions were thorough and care workers knowledge was tested by the management team during shadow shifts prior to them working with people unsupervised. The registered manager said the amount of shadow shifts and support provided depended on the skills and confidence of the individual care worker.

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 worked with external professionals for the benefit of people who used the service. These included social workers, GPs, occupational therapists and district nursing teams.
- Information was shared with other agencies if people needed to access other services such as hospitals.

- The registered manager advised they amended the times people received their support around health appointments if this was people's choice.
- Care workers and the management team worked to promote the health, safety and wellbeing of people. We were given an example where a care worker arrived to provide a person with care and support and found they had been ill overnight. The care worker said, "I quickly called Vow Care management and they sprang into action without further delay, taking [person] to appropriate medical centre for further examination."

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 Act 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.

- People and relatives said care workers always asked for consent when supporting them. People were asked for their consent to be supported in line with their individual care plans and risk assessments.
- Care workers received training in the Mental Capacity Act and had a good understanding of how to put this in to practice.

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

- Care workers had a good understanding of the people they supported and took their time to get to know people's individual likes and dislikes. People's past lives and interests were incorporated into their care plans.
- People and their relatives praised care workers for the kindness, care and support they provided. A person said, "We are very happy. They (care workers) are all professional, considerate, patient and we have a laugh." A relative told us the support of Vow Care Services meant, "I have total peace of mind."

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

- People were consulted about changes to their care and these were documented. Regular reviews of people's care support were undertaken involving people and their relatives where appropriate.
- People and their relatives said they were always involved in any decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us care workers promoted people's privacy, dignity and independence whilst supporting them with care, courtesy and kindness.

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 care to meet their individual needs and preferences and their care was adapted to meet their changing needs. For example, care workers spoke of people who had been discharged from the hospital unable to move and cared for in bed. A care worker told us, "Within 2 weeks the person could walk and even climb the stairs back and forth. This was a big relief to the person's family."
- Care plans included information about people's preferences, likes and dislikes. This meant care workers had the information available to help ensure people received consistent care to meet their individual needs and wishes.
- People's care was kept under regular review. Each person's care plan was reviewed within the first month and then every 3 months routinely unless their needs changed or they requested a review. The registered manager told us, "Care plans are not static, people's needs change constantly so we review as needed." This meant staff had up to date information to help ensure they provided the right care to meet people's needs.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager had not had the need to make information available in different formats yet but said they would do so should the need arise.

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

- The registered manager said support was provided to follow interests and activities if people requested it. Examples given where this support was provided included supporting a person to go for a walk, to visit the local shopping centre and library.
- We saw an example where a person had gradually increased their health and mobility with the support of Vow Care staff. As a result, they had been able to slowly resume previously enjoyed social activities such as attending church, shopping or going to a café.

Improving care quality in response to complaints or concerns

- The registered manager had a complaints and compliments policy; people and their relatives told us they

had a copy of the policy in their homes to access if needed. People and their relatives said they had not had the need to raise any complaints, but all said they would be confident to do so if the need arose.

- A care worker told us, "The Vow Care management put the welfare and satisfaction of people who use the service first in every decision-making process. Each concern raised, regardless of the it's magnitude, is always look into by the Vow Care management."

End of life care and support

- The registered manager advised no-one was receiving end of life care and support at the time of this inspection. However, care workers had received training and knew how to support people at the end of their life.

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; Continuous learning and improving care

- The provider was also the registered manager of Vow Care Services Ltd. They had a good understanding of their responsibilities towards the people they supported.
- People and relatives said they found the registered manager professional and knowledgeable. One relative told us, "[Registered manager] came out to start with to make sure the care was set up properly, they run a tight ship!". The registered manager told us, "I try to have a personal relationship with all the people who use our service, I want them to know me."
- The service delivered good outcomes for people. A relative told us, "They (care workers) do exercises with [person] regularly and have been very encouraging which has helped [person] in regaining their mobility."
- The registered manager had created an open, inclusive and supportive environment for the care team. This enabled care workers to be more confident and feel respected. A care worker said, "I will strongly recommend Vow Care Services Limited to anyone looking for care as they strive to offer first class care to all, regardless of race, gender, or belief."
- Learning was taken from incidents to improve people's experience of care.

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

- The registered manager demonstrated a clear understanding about the duty of candour. Team meeting minutes showed care workers were encouraged to be open and honest in their feedback.
- The registered manager and care workers understood their roles and respected the impact their roles had for people. The registered manager undertook unannounced spot checks to assure themselves that people received the appropriate care and support to meet their planned needs.
- Staff meetings were held regularly. The meetings were used to share important updates about the service or the people using the service. Mini training sessions were also held at team meetings to underpin staff knowledge and understanding in a range of areas. For example, moving and handling, duty of candour, medications and infection control.

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

- People and their relatives gave positive feedback about the service and how it operated. One relative said, "I would recommend Vow Care Services, they are responsive to any suggestions we might make." A person

said, "We have established a friendship with the care workers. I would recommend them to others having care in their own home."

- Care worker feedback was sought via regular scheduled face-to-face meetings and supervision with the registered manager. Care workers were positive about working with Vow Care Services Ltd. A care worker told us, "Vow Care Ltd is a company passionate about staff's personal development and improvements, it is a good environment to improve your skills."
- Regular feedback about the quality of the service provided was gathered from people and their relatives. The satisfaction scores were high and people's comments were positive.

Working in partnership with others

- The registered manager often worked with external professionals to achieve good outcomes for people. For example, social working teams, community nurses, occupational therapists and GPs.
- An external professional advised of positive feedback they had received from people receiving care and support from Vow Care Services Ltd.