

VIRTUS CARE LTD

# Virtus Care LTD

## Inspection report

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Virtus Care LTD is a domiciliary care agency. At the time of the inspection, the service was providing support to five people. CQC only inspects services 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

During this inspection we found the service had made improvements around the management of risks and quality assurance.

People told us they felt safe and trusted the staff providing care and support. People received help and support from a consistent and professional staff team.

People were supported to have maximum choice and control of their lives and the provider supported them in the least restrictive way possible and in their best interests; the application of the policies and systems supported good practice.

The provider assessed the risks associated with people's care and support needs and staff members were knowledgeable about these risks and knew what to do to minimise any potential for harm.

Risk assessments were reviewed when changes to people's health occurred and the provider worked in partnership with other health and social care professionals to optimise people's health, care and well-being.

People received safe support with their medicines by staff members who had been trained and assessed as competent to provide this support where it formed part of an agreed package of care.

Staff followed effective infection prevention and control procedures and had access to personal protective equipment (PPE).

Safe recruitment processes were being followed to ensure staff were suitable for their roles.

The provider operated effective quality monitoring systems and sought feedback from people using the service, family members, staff and healthcare professionals in order to continually improve standards of care.

The provider had policies and procedures in place including an appropriate complaints procedure.

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

The last rating for this service was requires improvement (27 August 2019). At the time, we found a breach of regulation 12 (Safe care and treatment) and made a recommendation in relation to the development and implementation of robust quality assurance systems. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

#### Why we inspected

We carried out an announced focused inspection of this service on 21 April 2022 to check the provider had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Virtus Care LTD on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Virtus Care 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 one inspector.

#### Service and service type

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

#### 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 that 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 in post.

#### Notice of inspection

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We looked at information we hold about the service such as notifications of events, monitoring activities and registration information. We used this information to plan our inspection.

#### During the inspection

We spoke with the registered manager and requested a range of information relating to the safety and management of the service to review off site.

#### After the inspection

We reviewed four people's care records, risk assessments and related documentation. We looked at records for three members of staff in relation to recruitment, induction training, supervision and appraisal. We reviewed policies and procedures and other records relating quality assurance and the management of the service.

We spoke with one person using the service, two relatives and four members of care staff.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

At our last inspection the provider had failed to ensure systems and processes were established and operated effectively to ensure safety was effectively managed. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- People told us they felt completely safe when being supported by staff members.
- The provider's risk assessment processes were identifying, assessing, monitoring and mitigating all aspects of people's care and were reviewed and updated to address people's healthcare needs as these changed.
- The provider assessed individual risks to people in relation to mobility and falls, skin integrity, medicines compliance, nutrition and hydration, behaviours that challenge and risks presented by the home environment including risk of fire.
- People who had complex needs had separate care plans in place which contained clear descriptions of their conditions, associated risks and instructions for staff on how to minimise these risks.
- People and their relatives told us staff were well informed about their individual needs and knew how to safely manage any associated risks.

### Preventing and controlling infection

- The provider and staff followed safe practices and procedures to help prevent the spread of infection including those related to COVID-19.
- The provider had an up to date infection control policies. Staff received training in infection prevention and control and knew how to minimise the risks of infectious illnesses.
- Staff had access to personal protection equipment (PPE) such as disposable gloves, face masks and aprons, all of which they used appropriately when providing people with support.

### Using medicines safely

- Not everyone receiving support from the service required support with their medicines. However, those that did were safely supported with their medicines by trained and competent staff.
- Care records contained a comprehensive list and photographs of people's current medicines for guidance and information purposes.

- The names of people's medicines were written on medicines administration records (MARs). MARs we reviewed were completed appropriately and staff were fully aware of the importance of supporting people with their prescribed medicines, time specific and as required medicines.
- The provider's medicines policy included appropriate procedures to address any potential medicine errors.

#### Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and staff were familiar with the provider's safeguarding policy and related procedures.
- Staff told us they would report any concerns to their manager and other agencies if they suspected or witnessed abuse in any form.
- Staff members understood the policies and procedures that informed their practice including the whistleblowing policy. Whistleblowing is when a worker reports suspected wrongdoing at work. A worker can report things that are not right, are illegal or if anyone at work is neglecting their duties, including if someone's health and safety is in danger.
- Staff were confident they would be supported by the registered manager should they ever need to raise such a concern. One member of staff told us, "There is no policy I don't know. I write and work on the policies. The registered manager is amazing, not just a manager but also a friend and very supportive."

#### Staffing and recruitment

- People were supported by a familiar team of staff members who arrived when expected and stayed for the agreed length of time.
- Staff records included evidence that pre-employment checks were carried out before new staff were appointed and commenced employment. This included requests for employment references and confirmation of identity.
- The provider ensured Disclosure and Barring Service (DBS) checks were completed before staff began working with people. This process includes a criminal records check and ensures that people are not barred from working with vulnerable adults or children.

#### Learning lessons when things go wrong

- Processes were in place to promote learning which fully involved people who used the service, family members and the staff team.
- Staff understood their responsibility to report and record any accidents, incidents, events, complaints and concerns.
- The provider reviewed incidents to ensure all necessary steps were taken to minimise repeat occurrences. This included carrying out investigations and making referrals to other agencies and healthcare providers.

# Is the service well-led?

## Our findings

Well-Led - this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to 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

At our last inspection we recommended the provider sought suitable guidance in relation to the development and implementation of robust quality assurance systems.

Enough improvement had been made at this inspection and the provider demonstrated that consistent and effective processes were in place to ensure people were safe and the service well led.

- The registered manager demonstrated a clear understanding of regulatory requirements and had systems and processes in place to assess, monitor and improve the quality of care provided by the service. These included regular checks of people's care plans and medicines ensuring people received the care and support they needed and had consented to.
- The registered manager had appropriately submitted notifications to the CQC. The provider is legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People were happy with care they received. The registered manager and the staff team were committed to providing a high standard of person-centred care.
- Staff understood their roles and were clear about when they would need to seek guidance and support from the registered manager whom they described as "amazing" and "very supportive".
- The registered manager provided some of the care herself and was therefore on site to coach staff and observe their performance. A member of staff told us, "[The registered manager] is always there when you need help."
- Staff received regular spot checks. This was where a senior staff member attended the care call and checked the performance of the staff member against a set of standards including, but not limited to, timeliness, safe use of equipment and engagement with the person they were delivering care to.
- The registered manager told us, and staff confirmed that informal team meetings took place as needed.

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

- The provider regularly asked for people's feedback on their experiences of care. This was either done face

to face as part of the staff spot checks or via a phone call.

- People and relatives were fully involved in the service they received.
- The registered manager told us and records reflected that referrals were made to relevant agencies and other healthcare professionals when people needed additional support. This included referrals to services such as occupational therapists, district nurses, wheelchair services and the London Fire Brigade.
- The management team had established and maintained good links with local communities, healthcare professionals and people's GPs.
- The registered manager and staff team identified and attended learning and networking opportunities to ensure their practice remained up to date. This included attending meetings and completing training courses.
- People using the service, family members, staff and colleagues were asked to provide feedback about the service. Completed feedback was reviewed by the registered manager and any opportunities to improve the way in which the service was managed were acted upon.

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 the provider's registration requirements including the duty of candour.
- There were systems in place to review and share any learning with the staff team.
- People and relatives had a positive relationship with the management team who they found to be accessible and engaging. Everyone we spoke with was complementary about the registered manager and staff team. Comments included, "[The registered manager] is very good and everything is ok", "[The staff team] are my family" and "[Staff] go above and beyond, we have absolutely no problems."
- The service worked closely with people, their relatives, professionals and staff to create and promote a fair and open culture. People felt in control and were happy with the care and support they received.