

Voyage 1 Limited

Voyage (DCA) Rotherham

Inspection report

Unit 19
Moorgate Croft Business Centre, South Grove
Rotherham
South Yorkshire
S60 2DH

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05 January 2017
18 January 2017

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Website: www.voyagecare.com

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

The inspection took place on 5 and 18 January 2017 it was unannounced on the first day. The service was re-registered with the Commission in June 2016 as the provider changed the company name, so this was the first inspection of the service under the new registration.

Voyage (DCA) Rotherham provides personal care to people living in supported living schemes and also provides care and support to people living with family in their own homes. Its office is based near the centre of Rotherham. The agency supports people with a learning disability.

The service had a registered manager in post at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons.' Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

At the time of our inspection there were 27 people using the service. People we spoke with told us they were very happy with the care and support they received.

We saw there were systems in place to protect people from the risk of harm. Staff we spoke with were knowledgeable about safeguarding people and were able to explain the procedures to follow should an allegation of abuse be made.

We found the service employed enough staff to meet the needs of the people being supported. Staff had completed training to be able to meet people's needs, and received regular supervision, which meant they were well supported. Staff also had an annual appraisal of their work.

We found people received a service that was based on their personal needs and wishes. Their needs had been assessed before their care package commenced and where possible they, and their relatives, had been involved in formulating their care plans. Care records sampled identified people's needs and preferences, as well as any risks associated with their care and the environment they lived in.

Where people needed assistance taking their medication this was administered in a timely way by staff who had been trained to carry out this role.

We found the service to be meeting the requirements of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards (DoLS). The management team had a good understanding and knowledge of this topic. However, staff told us they required more training to fully understand the legislation and how it impacted on people they supported.

People had access to a varied programme of activities which provided stimulation in the supported living scheme, as well as regular trips out into the community.

People were provided with information about how to raise a concern and how it would be addressed. Records showed that systems for recording and managing complaints, safeguarding concerns and incidents and accidents were managed well and that management took steps to learn from such events and put measures in place which meant lessons were learnt and they were less likely to happen again.

There were systems in place to monitor and improve the quality of the service provided. Action plans were implemented for any improvements required and these were followed up by staff.

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

Staff knew how to recognise and respond to abuse correctly. They had a clear understanding of the procedures in place to safeguard vulnerable people from abuse.

Individual risks had been assessed and identified as part of the support and care planning process.

The process for recruiting new staff helped to make sure the right staff were employed to meet the needs of people safely.

People were supported to take their medication safely.

Is the service effective?

Good 

The service was effective

Staff had access to training that enabled them to care and support people who used the service safely and to a good standard.

Records demonstrated people's capacity to make decisions. Staff had completed training in this subject. However, understanding varied and more training was to be organised.

Is the service caring?

Good 

The service was caring

People told us they were happy with the care and support provided. They told us care was delivered in line with their wishes.

Staff knew the people they cared for well, which meant people received consistent care that met their needs.

People were involved in making decisions about their care and offered choices. Staff took account of people's individual needs and preferences.

Is the service responsive?

The service was responsive.

People were encouraged to be involved in planning and reviewing care plans. The plans were being reviewed and staff were implementing person centred plans.

There was a system in place to tell people how to make a complaint and how it would be managed.

Good ●

Is the service well-led?

The service was well led.

The manager had a clear oversight of the service, and of the people who used the service.

People, their relatives and staff were very positive about the way the service was managed.

Systems were in place to monitor the quality of the service.

Good ●

Voyage (DCA) Rotherham

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection included a visit to the agency's office on 5th 18 January 2017. The inspection was unannounced on the first day. An adult social care inspector conducted the inspection. A local authority officer was also conducting a visit during our inspection.

To help us to plan and identify areas to focus on in the inspection we considered all the information we held about the service. Before the inspection, the provider had completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well, and improvements they plan to make. We looked at any notifications sent to us.

At the time of our inspection there were 27 people using the service. Following our visit to the agency's office we visited one supported living scheme to talk to people who used the service. We spoke with four people who used the service and one relative of a person who used the service. We also spoke with the operations manager, the registered manager, two team leaders and eight support workers. We also obtained some information from health care professionals following our inspection.

We looked at documentation relating to people who used the service and staff, as well as the management of the service. This included people's care records, medication records, staff recruitment, training and support files, as well as minutes of meetings, quality audits, policies and procedures.

Is the service safe?

Our findings

People told us they were well cared for, staff supported them and they felt safe. Relatives we spoke with told us they were confident that their family member was safe and well cared for.

The provider had safeguarding policies and procedures in place to guide practice. Safeguarding procedures were designed to protect people from abuse and the risk of abuse. Staff we spoke with were knowledgeable on procedures to follow. Staff were also aware of whistle blowing procedures and explained how they would do this if necessary.

We found risk assessments were in place in people's care files. Risks had been regularly reviewed and staff received regular training on how to manage risks to ensure people were safe.

The service had a recruitment policy which helped to ensure only suitable people, with the right skills, were employed by the service. Safe recruitment procedures were followed. However, staff files at the location did not include written references or a Disclosure and Barring Service (DBS) check. The Disclosure and Barring Service carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions. This information was kept at head office. We received confirmation from the company's head office that these had been received at the time the staff were recruited. The operations manager told us there was a reference document to use in recruitment files. These would be completed by the registered manager when they saw the references and DBS checks, they would date and sign the document to evidence they had seen them and that they were satisfactory. This would then be used as a reference front sheet in the recruitment files at the location.

Staff we spoke with who had been recently employed were able to explain to use the process they went through. They confirmed they had completed an application, references had been obtained and that they were unable to commence work until a satisfactory DBS had been obtained.

We found there was adequate staff to meet people's needs. Staff we spoke with confirmed there was adequate staff to be able provide the care and support required, including accessing the community and activities.

We looked at the systems in place for managing medicines in the supported living schemes. This included the storage, handling and stock of medicines and medication administration records (MARs) for people.

Medicines were stored safely. We saw records were kept for medicines received, administered and disposal of medicines. We found people were receiving medication as prescribed.

Is the service effective?

Our findings

Relatives told us staff delivered care that met the needs of people they supported and that their family's wishes and preferences were respected. People we spoke with told us they liked the staff that supported them and their choices were respected. One person said, "The staff are good I am well looked after."

We found new staff had undertaken an induction which included them completing the 'Care Certificate,' if applicable, along with other essential training. The 'Care Certificate' looks to improve the consistency and portability of the fundamental skills, knowledge, values and behaviours of staff, and to help raise the status and profile of staff working in care settings.

New staff we spoke with who had recently been recruited told us the induction was very good and enabled them to have the skills and knowledge to be able to support the people living in the schemes. The operations manager told us the provider's induction had been improved over the last six months. This now included regular support meetings and a full appraisal after six months to determine if probation had been successful.

Records we saw showed staff were up to date with the mandatory training required by the provider. Staff we spoke with told us the training was good. Staff also told us they did additional training to further understand how to meet the needs of people they supported. Training was both e-learning and class room based. Some staff told us they preferred the classroom training as felt it was more effective.

Staff told us they felt supported by the management team and confirmed they received regular supervision sessions. Supervision sessions were individual meetings with their line manager. Staff felt they were able to contribute to their supervision session and felt valued.

The Mental Capacity Act 2005 (MCA) is legislation designed to protect people who are unable to make decisions for themselves and to ensure that any decisions are made in people's best interests. The CQC is required by law to monitor the operation of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards (DoLS), and to report on what we find.

We checked peoples care files in the office to see whether people had given consent to their care and support, and where people did not have the capacity to consent, whether the requirements of the Act had been followed. We saw policies and procedures on these subjects were in place. Care records demonstrated that people's capacity to make decisions was considered and recorded within the assessment and care planning process.

The registered manager understood that where decisions had been made in people's best interest, these needed to be fully documented. However not all best interest decisions were kept with the plans in the supported living schemes; this was being implemented at the time of our inspection. We also found some staff although had completed e-learning training did not fully understand the legislation and how it impacted on the people they supported. We discussed this with the registered manager who was already

aware that more training was required for some staff. The operations manager agreed it would be covered and addressed in group supervision and other training organised if required.

We looked at people's care plans in relation to their dietary needs and found they included detailed information about their dietary needs and the level of support they needed to ensure that they received a balanced diet. People were offered a varied and healthy diet, which was based on their preferences and dietary requirements. When we visited the supported living schemes we saw snacks and drinks were available throughout the day. People we spoke with told us they liked the food, chose what they wanted to eat and prepared the food with support from staff. We saw people being given choices of drinks during our visit to the scheme and one person said, "I like the food, we can choose what we want to eat and go shopping."

People had good access to healthcare services. We saw records of visits by health care professionals in peoples care plans and any actions from the visits were followed up.

Is the service caring?

Our findings

People who used the service, and the relatives we spoke with, said they were happy with the way staff delivered care and support. People we spoke with said, "The staff are nice, I am looked after." Another said, "I am happy, I like it here." A relative we spoke with told us, "The service provided is very good."

We saw that people's privacy and dignity were maintained well. We spoke with staff and found they knew people well. They explained how they would maintain people's privacy and dignity by closing doors and curtains when supporting with personal care. We observed staff who addressed people in a caring way and in a manner that was appropriate for each individual person. This showed staff respected people. We saw staff organising an outing with a person they supported they gave the person choices and gave them time to understand the choices and make a decision.

Staff received training in respecting people and maintaining their dignity as part of their induction to the agency. Staff we spoke with described to us how they provided care in a respectful manner, while they maintained the person's dignity. This included enabling people to make choices and respecting their decisions.

The registered manager told us they had stable staff teams at each supported living scheme. This meant the staff and people who used the service could build up relationships, as well as helping to ensure consistency when delivering care and support. The people we spoke with confirmed they were happy with the staff that supported them. We observed support in the supported living schemes we visited. We saw this was provided in a caring way and interactions we saw were positive and inclusive. For example, one person was having their nails painted and the staff member and the person were laughing and joking together and enjoying some banter. They were enjoying each other's company.

People who were able had been involved in developing care plans. Care files sampled contained details about people's likes and dislikes. They also outlined their abilities, so people's independence could be respected and encouraged. Staff told us they had access to adequate information about how to support people and ensure their care was tailored to their needs and preferences.

There were arrangements in place for people to access advocacy services if required. An advocate is a person who supports the rights and decision making process for another person, should they need support to make their voices heard. At the time of our inspection people had accessed this service with support from staff.

Staff understood the need to respect people's confidentiality and not to discuss issues in public, or disclose information to people who did not need to know. Any information that needed to be passed on about people was discussed in private.

Is the service responsive?

Our findings

People we spoke with told us staff listened to them and looked after them well. People who were able confirmed they had been involved in planning their care and support. A relative told us, "I am happy with the care provided staff keep me informed if there are any changes."

We looked at the office copies of three people's care records and found they contained good information about the person's needs, any risks associated with their care and their preferences. The people we spoke with confirmed care files were available in each person's home. Care plans were being further improved at the time of our inspection and were being written in a person centred way that gave staff clear guidance about how to support individual people. We also visited the supported living schemes and looked at the care plans these in general these were to the same standard as the ones kept in the office. However, some areas around health action plans, MCA and DoLS needed updating in these care plans. The registered manager was aware work was required in this area and was implementing it at the time of our inspection.

Records showed the provider worked responsively with external professionals, such as social workers, occupational therapists and commissioner. We saw records were documented following any input from health care professionals and we saw one care plan had been updated following a review. A health care professional we spoke with told us, "It is a well-managed service, staff provide a consistent approach and it is a stable staff team."

People were supported to access the community and participate in activities. People had been on holidays and at the time of our visit to the scheme the staff and people they supported told us they were arranging holidays for this year. People were involved in the choices and decisions. People told us they liked going out and one person told us, "I am going to the pictures." The visit was arranged the afternoon of our visit, the person was very excited about going out as they said they enjoyed going to the cinema. Staff supported them to do this.

There was a complaints' policy which was given to each person when their care package commenced. It was written in plain English and gave timescales for the service to respond to any concerns raised. A record of compliments received had been maintained with outcomes

People we spoke with did not raise any complaints or concerns about the service provision. They said they would feel confident raising any issues, which they felt would be taken seriously. Staff told us if they received any concerns about the services they would share the information with the team leader or the manager. Staff told us they were confident the management team would deal with any complaint received no matter how minor.

Is the service well-led?

Our findings

The service had re-registered with the Commission in June 2016 as the provider changed the company name. This was the first inspection of the service under the new registration. At the time of our inspection the service had a registered manager in post registered with the Care Quality Commission.

The manager told us they had achieved the level four diploma and the registered managers award in adult social care for adults and younger people. They said this had helped them develop their management skills.

We also found systems were in place for managing safeguarding concerns and incidents and accidents. From discussions with staff it was evident that management took steps to learn from such events and put measures in place which meant they were less likely to happen again.

Effective systems to monitor and improve the quality of the service provided were in place. We saw copies of reports produced by the operations manager and the registered manager. The issues we had identified during our inspection had been identified by the registered manager and were being actioned. They told us they completed weekly, monthly and quarterly audits which included environment, health and safety, medication and care plans. We saw a variety of audits and it was clear from talking with staff that any actions identified were addressed.

We found there was an open, fair and transparent culture within the service. Staff told us they felt that they worked well as a team and they all helped each other. They told us they felt the management team were approachable and listened to their concerns and ideas for improvement.

Staff told us that they received regular supervision and support. They also told us they had an annual appraisal of their work which ensured they could express any views about the service in a private and formal manner.

There was regular staff meetings arranged, to ensure good communication of any changes or new systems. We saw the minutes of meetings that had been held. There were also key worker meetings involving the people who used the service, which ensured people's voice was heard.

Questionnaires were used to gain the views of people using the service, relatives and visiting professionals. We saw people had responded to the set questions in a positive way. The outcome of the surveys was available. One comment received stated, 'A friendly, homely environment.'

We saw company policies and procedures were in place to inform and guide people using the service and staff. They had been reviewed and updated regularly to make sure they reflected current practice.