



Inspection Report on

Verytas Solutions Ltd

**Verytas Solutions Ltd
First Floor Clwyd House
Argoed Road
Buckley
CH73HZ**

Date Inspection Completed

01/12/2020

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About Verytas Solutions Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Verytas Solutions Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	10 November 2017
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are regularly encouraged and supported to discuss the care and support they receive and told us their preferences are valued. Staff know people well because they have consistent rotas which means they regularly support the same people. Staff are enthusiastic about supporting people to achieve their desired outcomes. Personal plan documentation reflects people's current needs and people are referred to other healthcare professionals in a timely manner should their needs change.

The service is overall well managed and responsive to recommended improvements. Staff feel well supported and able to openly discuss any concerns they may have. People felt staff that support them are well trained; this was supported by processes and documentation reviewed during the inspection.

Well-being

People's voices are heard which enables them to contribute to decisions which affect them. The service provider ensures people are involved in formulating and reviewing their personal plans, and therefore they have control over how their care and support is delivered. People are able to do things that matter to them. People we spoke with felt listened to and valued by all staff. Advocacy services are readily available should people require support with decision making.

People receive appropriate, pro-active care. Consistent staff teams are knowledgeable about the people they support and their specific individual needs, and are therefore able to quickly identify any changes in need. Communication channels within the service are clear, and changes are communicated quickly, confidentially and effectively. People are referred on to other healthcare professionals in a timely manner where required.

People are protected from abuse and neglect. People are actively encouraged to discuss the service they receive, their general well-being and anything else that might be on their mind. The service provider is responsive to recommended improvements to ensure people receive the highest quality service. People, relatives and staff feel confident raising any concerns with management and feel like anything they raise is listened to and acted upon. People told us they felt safe. Staff have access to up to date policies and training.

People benefit from safe and healthy relationships. People told us of the trusting and happy relationships they had developed with staff that support them. Staff were able to discuss in detail people's individual needs and were enthusiastic about providing quality care to the people they support.

Care and Development

The service provider considers a wide range of views and information to confirm the service can meet people's needs. People we spoke with all confirmed their admission to the service was in line with the services statement of purpose. All relevant assessments are considered when formulating people's personal plans. People are provided with information regarding the service and told us the service being provided meets their expectations.

People are confident the service provider has an accurate and up to date plan of how their care is to be provided. Personal plan documentation reviewed during the inspection confirmed this. People, and their representatives, are involved in regularly reviewing the service they received, and any changes are communicated to all relevant staff effectively.

Staffing arrangements provide consistency of care and support. People are able to form good relationship with staff because they are supported by the same staff each week; staff rotas evidence this. People have the option of receiving a rota telling them what staff member will be completing each call, people who request this service told us the rotas are accurate. Individuals using the service told us the staff are *'very, very good'*, *'I feel very comfortable with the carers, they know me very well'* and *'10 out of 10, they are fabulous'*.

People are protected from abuse and neglect. People are actively encouraged to discuss the service they receive, their general well-being and anything else that might be on their mind. Staff have had safeguarding training which remains in date, an updated version of this training has been booked in to ensure all staff have a thorough and up to date knowledge of current practice. Comprehensive policies underpin the service, staff are informed of updates and changes to these policies. The regulator has not been notified of all safeguarding reports within the required timeframe, this has now been addressed.

The service promotes hygiene and infection control, and manages the risk of infection well. Staff understand the current policies and procedures in place, regular updates from management ensure staff knowledge remains up to date. Staff have completed training to ensure they are up to date with current guidance and they are able to discuss safe working practices. People are confident that they are being kept safe by staff who are supporting them; one person told us *'Staff wear personal protective equipment (PPE) and I feel very safe with the way they conduct themselves'*.

Leadership and Management

People can be confident the service is provided in line with its policies and procedures which are up to date and regularly reviewed. Staff told us they have access to policies during the induction process, and staff are informed of changes to policies via email. Policies we reviewed support the service provided and are in line with information contained in the service's statement of purpose. The policy review process could be improved by including people and staff.

The statement of purpose (SOP) accurately describes the service provided. People confirmed that they are provided with relevant information prior to commencing a service, and that service delivery is in line with their expectations. People are asked at the pre-assessment stage whether they require their documentation in Welsh or English. The SOP required a 12 month review at the time of inspection, this was addressed by the service provider immediately.

There are systems in place to assess, monitor and improve the performance, quality and safety of the service. Individuals are satisfied they regularly have the opportunity to give feedback on the service they are receiving, and that their feedback is listened to and acted upon. The quality of care review identifies areas of improvement which are documented in an action plan. Evidence that underpins the quality of care review was being collated by the service provider at the time of inspection and it will be reviewed, along with any improvements identified, at the next inspection.

There is a robust recruitment, induction and training programme in place at the service. Staff describe completing a thorough recruitment, induction and shadowing process prior to starting work; this is flexible depending on staff's prior experience. Documentation we reviewed during the inspection supported this. Staff training and supervision is up to date and they are supported to register with Social Care Wales (SCW). There is a robust recruitment process. Staff are subject to a probationary period to ensure the role is right for them. Staff feel confident in their job roles and well supported by the management. People we spoke with feel staff are well trained, and are able to do their jobs well.

Areas for improvement and action at the previous inspection		
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None		
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Areas where immediate action is required	
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None	
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Areas where improvement is required	
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The service provider must notify the service regulator of the events specified in Parts 1 and 2 of Schedule 3.	
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	Regulation 60 (1).
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We have not issued a priority action (non-compliance) notice on this occasion. This is because there is no immediate or significant risk to or poor outcomes for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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