

West Sussex Care Limited

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Inspection report

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Date of inspection visit:
21 November 2017
30 November 2017

Date of publication:
14 February 2018

Ratings

Overall rating for this service	Outstanding 
Is the service safe?	Good 
Is the service effective?	Outstanding 
Is the service caring?	Outstanding 
Is the service responsive?	Outstanding 
Is the service well-led?	Outstanding 

Summary of findings

Overall summary

This inspection took place on the 21 and 30 November 2017 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure the registered manager would be available for the inspection.

This was first inspection at this location since the service registered with the Care Quality Commission (CQC).

This service is a domiciliary care agency. It provides personal care to people living in their own homes in the community. It provides a service to people with varying levels of need, including older people, people living with dementia and mental health, physical disability, sensory impairment and also younger adults.

West Sussex Care is a franchise of the Home Instead brand and it provides personal care services to people living in the Chichester and Bognor Regis areas. Companionship and domestic support can also be provided. Not everyone using West Sussex Care receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. At the time of the inspection, 36 people were receiving personal care services from the agency.

The service calls their care workers 'caregivers' which is the name they are referred to throughout this report. We also refer to other staff by title or staff.

There is a registered manager at this service. 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 2008 and associated Regulations about how the service is run.

This service is extremely well-led and demonstrated an exceptionally person-centred culture and evidently put people using the service at the absolute heart of the services they received. The owner and management team worked exceptionally well with other professionals and received positive feedback from professionals of the support provided to people using the service.

The owner worked together with the registered manager to co-ordinate the day-to-day running of the service. The owner worked closely in partnership with the management team when recruiting new caregivers and making decisions about taking on new packages of care and the future plans and development of the service. All new caregivers were carefully selected following a rigorous recruitment and induction process to ensure only the right caregivers were appointed to work towards the ethos and values of the organisation.

People receiving care were "matched" to caregivers with shared mutual interests that evidently ensured

positive trusting relationships were fostered which gave people confidence and faith in the service they received.

Caregivers were well trained to meet individual needs of people, including providing sensitive, compassionate end of life care and dementia awareness, with the provider being an accredited Dementia Champion with the Alzheimer's Society and registered manager an End of Life Care Champion, providing training for the agency.

Systems and processes ensured that people received a high quality safe service, with medicines being given to people safely and in accordance with their wishes and needs.

People were treated with utmost dignity and respect with their personal preferences strongly adhered to by exceptionally caring caregivers who were supported by a devoted management team and provider to "Go the extra mile" for people.

People had access to and were positively supported to attend health care appointments in least restrictive ways. Caregivers understood how to seek consent from people respectfully and appropriately.

The service had a clear strategy, objectives, vision and set of values. These were understood and put into practice. The service's mission is to, "Change the face of ageing in our local communities in West Sussex and be the home care provider of choice for older people and their families". It was evident that the organisation strived to achieve this mission statement with their dedication, compassion and "selfless" commitment to provide the best services to people possible.

"Music and Memories" community events were organised and run free of charge by the provider to support all people to come together to minimise social isolation and loneliness.

People, relatives and caregivers all spoke extremely highly of the service and the leadership was commended by professionals working in partnership with the provider and management team of the organisation.

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.

The service had effective systems in place to help protect people from harm and abuse.

A robust recruitment procedure was followed by the agency, which ensured that only caregivers of a high calibre were employed to meet people's individual needs.

Risks to people's health and wellbeing had been assessed and minimised. The agency had policies and procedures to ensure people received their medicines in a safe way and as prescribed.

The management team responded positively to caregivers reporting incidents and invited partner agencies into the office to talk to the team following an incident occurring. This ensured learning was taken from incidents.

Good 

Is the service effective?

The service was extremely effective.

People received care from suitably trained caregivers, who were matched to meet people's needs and therefore knew people exceedingly well.

Caregivers had exceptional skills and knowledge to meet people's individual needs and choices.

People's rights were protected in line with the principles of the MCA. The service was excellent at ensuring people were supported in least restrictive ways which had enabled people to have positive experiences, minimising distress in challenging situations for people.

The service took exceptional steps to support people to access health services in order to ensure people maintained and improved their health and well-being.

The service ensured that people's needs and choices were

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holistically assessed in line with best practice, which achieved very effective outcomes for people.

Is the service caring?

The service was exceptionally caring.

People and their relatives were extremely positive about the outstanding care they or their relative received. People, their relatives and professionals told us the service frequently went the 'above and beyond' to ensure people's wellbeing needs were promoted and respected.

People were supported by a dedicated and caring team of caregivers who supported them to build and maintain their independence and live their life to the fullest. The service went the above and beyond their role to enable people to develop and meet their personal goals and wishes.

There was an exceptionally positive and caring culture across the organisation. Caregivers were incredibly knowledgeable about people, their needs and preferences. Caregivers fully understood the reason for the support and care they provided and how it had a beneficial impact on people's lives.

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Is the service responsive?

The service was very responsive to people's needs.

People and their relative's feedback described the responsiveness of the service as "excellent" and "wonderful" and they were "delighted with the service they received."

People received care that was thoroughly assessed, personalised and regularly reviewed to meet their individual needs and choices. Care was delivered by caregivers who were matched to meet people's individual needs and preferences.

People were supported to access the community and to build and maintain meaningful relationships with caregivers to minimise social isolation.

The agency had an effective and thorough approach to managing complaints and people were encouraged to provide feedback and raise concerns as they arose.

People were supported in an exceptionally empathetic way at the end of their lives by well-trained caregivers who supported

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people's choices, preferences and wishes to die well.

Is the service well-led?

The service was extremely well-led.

There was very strong leadership at all levels. The provider and management team had been actively involved in all aspects of the service provision and had very good knowledge about the needs of the business and the satisfaction level of people who used it.

There were clear business strategies and visions for the service to continue to strive to improve the standards and quality of service provided by dedicated caregivers and management team, including the provider.

Caregivers were very well supported by their managers and they told us they "loved" working for this agency. Caregiver's dedication and contribution to the services provided to people had been acknowledged through staff awards and recognition initiatives.

There were very robust quality monitoring systems in place. People's on-going levels of satisfaction were monitored extremely well with processes and systems that were effective and responsive to people's individual needs and preferences. Therefore care provided was always of a high standard, delivered by hand-picked caregivers who were matched to meet people's needs and choices exceptionally well.

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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 is 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.

This was the first inspection for West Sussex Care Limited since registering with the Care Quality Commission (CQC).

The service is a domiciliary care agency. It provides personal care to people living in their own homes in the community. It provides a service to people with varying levels of need, including older people, people living with dementia and mental health, physical disability, sensory impairment and also younger adults. CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating.

The inspection took place on the 21 and 30 November 2017 and was announced. We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

Inspection site visit activity started on 21 November 2017 and ended on 30 November 2017. It included observation and discussions with people who use the service and caregivers at a 'Music and Memories' Christmas party for people. We spoke to six people and seven people's relatives. We visited the office location to see the registered manager and office staff and to review care records and policies and procedures. We looked at four people's care records, three staff files and other records about the management of the service. During the inspection process we spoke with the management team, including the owner, the registered manager, the recruitment manager, the care co-ordinator, the training and engagement manager, a senior caregiver and three caregivers. During our observations and engagement with the 'Music and Memories' Christmas party, we also spoke with three people using the service, one person's relative and three caregivers who attended the occasion. The registered manager, owner, care co-ordinator and recruitment manager also attended to support the event.

The inspection was carried out by two inspectors and an Expert by Experience (ExE). An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service and of people living with dementia. The Expert by Experience conducted telephone calls to seven people and six relatives of people using the service to seek their views and experiences.

The inspection was also informed by feedback from questionnaires and surveys that we asked people and caregivers to complete before the inspection. The surveys we received from staff and people all demonstrated that people were very satisfied with the service they received.

We used information the provider sent us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

Following the inspection we spoke with a general practitioner (GP), a social worker and reviewed feedback from a community psychiatric nurse (CPN).

Is the service safe?

Our findings

People told us that the service supported them to feel extremely safe and protected them from harm and abuse. People felt safe receiving services from the organisation. One person said, "They [caregivers] visit me twice each day, as I need help with mobility. They are very kind and cheerful and I always feel safe when they are here. They are always good to me and I have never had a moment to worry. They have never let me down". A person's relative told us that the agency was, "Absolutely fantastic in all aspects of safety, it could not be better. They perform way beyond the call of duty. They have proper process in place to recognise risk, and do it with kindness".

The service had systems and processes to help protect people using the services from abuse. These systems included safeguarding policies and procedures. We were told and we saw how the agency complies with the local West Sussex County Council Safeguarding Adults policy and procedures. Caregivers and the registered manager and owner had an excellent understanding of safeguarding and how to report concerns about people's safety, should they arise. All staff we spoke with understood what action to take if they suspected abuse. Electronic monitoring systems, operated by the agency, ensured that people always received the care they needed. The system alerted the management team if caregivers were running late to ensure that people were kept informed of when their caregiver would arrive to support them. This meant that the systems and processes to safeguard people from harm were effective.

Personalised risk assessments clearly detailed any known risks to people and provided guidance to caregivers of how they could support people safely. We were told by the owner that caregivers are personally briefed before they visit any person for the first time. During the briefing session the management team and caregiver discuss any identified risks and how they are managed safely and appropriately. This ensures that no caregiver enters a person's home unprepared which supports them to manage any risks to them or the person. The service do not use and have never used staff from other employment agencies to provide care for people.

The service worked to comply with the local authority West Sussex County Council's medicines management policy and procedures. A relative said, "The carers are excellent – they visit twice every day to look after Mum. They make sure she eats her meals and she is clean, also deal with her medication. They are always on time and never leave early. I have no concerns about her safety, they are professionals". Any concerns that caregivers had about risks to people were recorded within the service's electronic monitoring system, "People Planner". Caregivers had contacted the management team to raise concerns and clear actions taken by the management team to mitigate risks had been recorded. We saw an example of a caregiver contacting the office regarding concerns about a person's medicine. It was noted that the person should not take the medicine if they had eaten foods beforehand. The caregiver had noticed that the person had eaten a meal and contacted the office immediately to seek guidance on the appropriate action to take. The registered manager had contacted appropriate healthcare professionals for advice, ensuring that the person was able to be safely given their medicine as prescribed. Medicines Administration Records (MAR) were audited monthly by the registered manager for any discrepancies or errors with medicines being given. Records were maintained to demonstrate that appropriate action had been taken. This demonstrated that

risks to people were managed appropriately and people were given their medicines safely.

Environmental risk assessments had been completed for people. One example evidenced how the registered manager supported a person whilst a fire officer visited their home to ensure that there were adequate fire safety measures in place to keep the person safe. People and caregivers were safe from environmental harm identified through the service's risk assessment process.

The registered manager and staff team demonstrated a detailed understanding of how to positively support people when they demonstrated behaviours that may challenge the service or place themselves or others at risk. Caregivers knew people extremely well and were therefore able to quickly observe changes in people's behaviours that were then reported to the office without delay. Once reported, the management team supported caregivers by holding "TAC" (Team Around Client) meetings to discuss positive behaviour strategies. The management team had regular contact with community psychiatric nurses (CPN's) for people who required this level of support. As part of the owners approach to monitoring the services they provide, regular quality reviews for people were completed to identify any changes to people's needs or concerns about their care. This enabled them to identify and address issues quickly and appropriately. A caregiver told us of an example where they had raised concerns about a person who had limited support around them. The caregiver said, "I asked for a meeting of the people who look after [person] as I was concerned about how he was. [The management team] straight away set up a team meeting to review the concerns". This meant that people and caregivers were supported appropriately to manage concerns about people's safety or wellbeing.

There were sufficient numbers of suitable caregivers to support people to stay safe and to meet their needs. There was a rigorous and robust approach to the recruitment and appointment of suitable caregivers to ensure that only people who share the values of the organisation were appointed. Four employment and character references were obtained as part of the recruitment process. This ensured that the registered manager was able to assure people that suitable caregivers who were of good character were appointed.

Caregivers received training regarding infection control and food hygiene. Caregivers had access to adequate supplies of PPE (Personal Protective Equipment) that were stored in the office for them to collect when required. A person said, "They are meticulous about hygiene and always change their gloves and aprons correctly." This meant that people were adequately protected from the risks of infection.

Accidents and incidents were reported immediately by caregivers and documented in the office the same day or as soon as reasonably practicable if an incident or accident occurred out of office hours. The accident and incident forms were then scanned into the agency's electronic monitoring system and monitored by the registered manager. Noted at the bottom of each accident/incident form was a section for the registered manager to complete which detailed the actions they had taken to mitigate any further risks to the person. This meant that systems existed to minimise risk of harm to people that were closely monitored by the agency.

There was an open and transparent culture across the organisation and lessons were learned and improvements made when things went wrong. The service had learned from incidents and made changes to ensure the continued safety and wellbeing of people and caregivers. One example involved a person who lived with dementia and caregivers had reported that the person had left the gas on their cooker on more than one occasion. Caregivers, concerned for the person's welfare and safety, reported this immediately to the agency's office and the management team contacted the fire service without delay. The gas cooker was disconnected with the agreement of the person to maintain theirs and other's safety. The registered manager told us how the service, retained the person's independence with the use of an electric stove and

how they used the incident to remind staff of the correct procedure in the event of a gas leak being suspected. This demonstrates an organisational wide culture of openness and transparency to learning from experiences to aim to prevent reoccurrence and keep people safe where possible.

Is the service effective?

Our findings

People received a consistent and extremely effective service that achieved very positive outcomes. Well-trained caregivers and the senior management team worked positively and compassionately with people to access healthcare services when they needed it. A General Practitioner (GP) told us that, "They [West Sussex Care] are very good, patients are impressed with the continuity and friendliness of staff [caregivers], staff treat them [people] with compassion. They've [West Sussex Care] always been able to step in to support people at short notice, avoiding hospital admissions for people." A person told us that, "The carers are really good they do anything I need, including getting shopping for me". Another person said how the caregivers support them with their meals. They said, "I have meals on wheels and the carers wash up the dishes. I think I get a good level of service and I have not had to complain yet."

People received very effective care and support from caregivers with the right skills and experience to meet their individual needs. There was an outstanding organisational culture of excellence and of going "the extra mile" as stated by a community psychiatric nurse (CPN) which was fed back to the registered manager following their support of a person to help them to access healthcare services. For example, one person required an urgent hospital admission to receive essential treatment for their mental health and wellbeing to be maintained. The registered manager demonstrated an excellent ability to build and maintain positive relationships based on trust and compassion with the person, their relatives and other professionals supporting the person. The registered manager described how they knelt down in front of the person, at their eye level to ensure effective communication with them. They then spoke calmly with the person, explained what actions the health professionals would like to take by admitting them to hospital. The doctor waited in another room while the discussions took place. These calm, considered conversations encouraged the person go willingly to hospital with the registered manager's support and empathy.

Health and social care services and professionals spoke extremely highly of the caregivers and exemplary leadership within the organisation. A community psychiatric nurse (CPN) had emailed the registered manager to praise them for their exceptionally professional and supportive approach for a person living with long term mental health. The CPN wrote to the registered manager stating, "Your excellent care and good communication with all concerned was invaluable and enabled us all to provide the best care".

The CPN also wrote, "Your [registered manager] support enabled our client to be admitted in a calm and dignified way that avoided the trauma and distress". Historically the person had experienced distress when being admitted to hospital with the use of restraint being required. The registered manager took the time to know people and to understand their support networks very well. This enabled the registered manager to accompany the person to hospital without any distress, in a calm manner. This had a hugely positive impact for the person and their family. The registered manager took the time to sensitively explain what treatment was proposed to the person and sought their consent to willingly accompany them to hospital. But not before stopping for fish and chips on the way, which was enjoyed by the person and gave them a positive experience of being admitted to hospital. A real depth of empathy and commitment to provide the best quality care to people was consistently demonstrated by the registered manager and management team,

including the caregivers, throughout the entire inspection process.

New caregivers received in-depth induction training and support that consisted of four days of classroom based training which included moving and handling, food hygiene, safeguarding adults, Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS), first aid, making relationships, dementia and medication training. Caregivers were also trained in subjects in line with the individual needs of people. We were told how the registered manager, who was the End of Life Champion, provided training to caregivers when they may be supporting people at the end of their lives. This training enabled the caregivers to provide an excellent service to people and everyone we spoke with told us they felt the caregivers were skilled to meet their needs. A caregiver was able to tell us of how the training they received supported them to have an in-depth understanding of strategies to positively support a person's behaviour, by playing music for them. They identified this method for the person through discussions with the person and their relative. We were told by the caregiver that this intervention positively benefitted the person by "soothing and calming" them to enable them to deliver personal care without distress being caused to the person. We were also shown photographic evidence of the person smiling and enjoying their interactions with caregivers in practice.

Caregivers were confident and trained in the principles of the Mental Capacity Act 2005 (MCA). The 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 given appropriate support to make decisions when needed. When they lack mental capacity to take particular decisions, decisions made on their behalf must be in their best interests and as least restrictive as possible. Caregivers demonstrated that they were aware of the need to seek consent from people before providing care and treatment. When we spoke with caregivers they were able to tell us how they sought consent from people and that they had received suitable training regarding MCA.

The registered manager described how a caregiver had worked closely with a person to obtain their consent. They said the staff member had been passionate in ensuring that the person remained firmly at the centre of discussions with health professionals. The person, who was initially deemed to lack the mental capacity to consent to an operation which was deemed to be in their best interests, was supported in a very person centred way throughout their journey. This enabled them to be fully involved and supported by the caregiver to make the decision to have an operation in their own best interests. We were told by the caregiver that, "I took [person's name] to the doctors", and how they supported the person to be involved in the discussions about the operation to remove the growth. The caregiver said, "We had a best interests meeting and I slowed the doctor down. I said you're talking to me not to [person's name]. I was content [person's name] understood". The caregiver went on to say, "I went with him. I would never dream of him going alone". This demonstrated an excellent understanding of the application of the MCA for this person, which ensured that care and treatment was provided to the person in line with their best interests.

We also saw caregivers gaining verbal consent appropriately from people before supporting them during the "Music and Memories" Christmas party event, hosted by the organisation for people living with dementia and social isolation in the wider community. The registered manager was able to tell us about an example of one person who experienced restrictions of their liberty in their lives which were appropriate to support and maintain their safety and wellbeing. These restrictions had been lawfully authorised by the Court of Protection. We were told how the caregivers worked in close partnership with the person's social worker to ensure that the person's liberty was promoted and maintained wherever possible. We saw records to evidence this partnership working in the person's best interests. People can only be deprived of their liberty so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA.

Caregivers were positively supported to keep their professional practice and knowledge updated in line with best practice. We reviewed the minutes from a recent caregiver meeting that took place on the 21 June 2017. The registered manager told us how each meeting was focused around a "hot topic". This meeting focused upon catheter care, with a professional community catheter care nurse being invited to attend the meeting to talk to caregivers. A person's relative told us "They [caregivers] are very well trained and well organised". All staff we spoke with told us that they received the training they needed to undertake their roles. " Caregivers felt extremely supported in their roles. A senior caregiver told us "there are incredible levels of support. It radiates down from the boss." The training manager told us how they link with the West Sussex County Council "Gateway" accredited training resources to ensure that they maintain their knowledge. Staff told us that they had regular supervision meetings with their manager. We saw evidence of supervisions and appraisals in files for caregivers. This meant that people received support from suitably trained and skilled caregivers.

Caregivers told us that they shadowed other colleagues as part of their induction and that they had completed a four day induction before they were permitted to shadow other caregivers in people's homes. After three weeks in their roles, the caregivers were permitted to work on their own with people with regular contact and support from the management team. This included telephone calls, spot check visits and four weekly induction sessions in the office location. Caregivers were given opportunities to receive intensive support from the management team. The registered manager told us that if a caregiver had any concerns about a person they were invited into the office to "enjoy a slice of cake" with the registered manager to attend a "TAC" (Team Around Client). This meeting provided an opportunity to discuss the concerns and strategies that may support them to better meet the needs of a person. This process was also used to support caregivers when they were dealing with personally challenging situations including the provision of end of life care. A caregiver providing end of life support to a person stated that they felt very supported by the level of support they received at that the TAC meetings. We were told by staff that TAC meetings were a positive way of all staff being able to "work together and keep the person's best interests at the centre of what we do". This approach provided excellent support for caregivers and ensured that the agency strived to "get it right" for the person at the centre of the process. The full induction also included all caregivers completing 12 weeks of on the job induction, with monthly induction training to review how caregivers were settling into their roles and completion of the Care Certificate. The Care Certificate is a set of standards that social care and health staff follow when carrying out their professional duties.

All caregivers were asked to complete a "This is me" document which detailed their interests and personal traits. This enabled the management team to ensure that people and caregivers were "matched" based upon their mutual interests. The registered manager told us how they met with people during their initial consultation at which time they matched the person with a caregiver that they believed would be appropriately suited to work most positively with the person. People receiving care and support were able to choose their caregiver if the agency's original matching didn't work as well as planned. The provider told us of an internal survey that had been completed and care reviews with people, which showed that caregivers and people were well matched to each other. A caregiver told us "they [management team] match you up with the clients. When someone has dementia it's confusing for them to have lots of people". A person's relative said, "My mother has a habit of changing her mind. The carers have the patience of saints – they simply communicate with the office and it gets done. One minute they will be making her scrambled egg on toast, the next, they are required to walk down the road with her on her electric scooter. They are capable resourceful people who work together to get the right outcome".

A comfortable lounge area had been created within the agency's main office location which had been set up to resemble the sitting room of an older person. This room also contained a bed and hoist for staff training purposes. The owner wanted to recreate an environment for new caregivers that may be similar to the

people's homes they visited to ensure that their training experiences were as real to life as possible. One wall of the room was dedicated to a display of the "mum test". The "mum test" is the measure that Care Quality Commission (CQC) inspection teams are asked to consider when inspecting services to judge whether these are services that they would be happy for someone they love and care for to use. The owner told us that the service held quarterly caregiver meetings during which the caregivers are asked "What it still means to them to care", with caregivers placing their comments and testimonials from people using the service on the "mum test" wall. The owner told us that this acted as a positive reminder to all staff coming into the office of the valuable job they did and that they wanted "recognition for caregivers because they work in an exceptional service". Caregivers said, "It's a lovely family orientated company [West Sussex Care], who pride themselves on person centred care and are always available when you need them. Very friendly office team as well as lovely caregivers. It's a pleasure to work here". Caregivers and people confirmed that they were always introduced to one another before a package of care was started, enabling people to have confidence and reassurance with who would be visiting them in their home environment.

People were supported with eating and drinking when this was part of their care plan and detailed information was provided to caregivers in relation to this. Positive relationships were fostered between people and the caregivers to encourage those who may need support to eat well, with a person's independence being at the centre of the support provided to them. For example, one person was supported by the caregivers to be involved with preparing their own meals to encourage positive weight gain. A relative said, "They are brilliant, they visit three times a day they help her with mobility, personal care, cook her meals, and deal with her medication. My Mother gets 5 star service and she has exactly what she wants - the carers are properly trained and know what they are doing". People felt that the care and support they received helped them to be as independent as they could be. When caregivers had concerns about a person's eating or drinking they contacted the office without delay. We saw electronic records of calls to the office and of the proactive actions taken by office staff to support a person's wellbeing. This included contact with health professionals.

Is the service caring?

Our findings

People were truly valued and treated with compassion, kindness, dignity and respect by extraordinarily dedicated, motivated and committed caregivers and a highly devoted management team. The service was extremely caring, demonstrating an exceptionally strong and visible person centred culture. The service's process for matching caregivers to people enabled strong relationships and trust to be fostered which supported positive interactions and successful delivery of care for people. This approach also enabled people to be involved with choosing who provides their care to them, wherever possible. People felt they were treated with kindness and respect. One person said, "The carers will do anything I need, they are marvellous. My requirements change from day to day and all I have to do is to ask. They are kind and show me respect". One caregiver said that they, "Always ask if they [person] wants me to leave the room when they may require some privacy and dignity during personal care support."

The service embraced diversity for people and caregivers. The registered manager described examples of how people who chose same sex relationships were supported positively and equally to those living in heterosexual relationships. They described how they ensured caregivers were appropriately trained to demonstrate the same levels of compassion and care to people regardless of their sexual orientation, gender, race, religious beliefs and other protected characteristics. The organisation provided suitable detailed training for caregivers regarding equality, diversity and human rights for people.

People were always placed at the centre of the services provided to them, with the agency staff constantly striving to ensure that people were fully involved with their care, promoting independence whenever possible. Caregivers showed a genuine depth of empathy and compassion for people they supported, always enabling people to express their own views, ensuring that people received the care they need and want. We heard and saw caregivers showing nothing but respect for people they supported. This was echoed by the management team and owner equally. A person told us, "The carers are really good, they respect my independence and do not intrude, although they will willingly do anything I need. My needs change from day to day and they always get things done. I have never had any reason to complain, they are a good company and I know they keep an eye on me, it gives me confidence."

Outstandingly positive reviews were left on the Care Home website by the relatives and appointed representatives of people using the service. Relative's comments included, "Home Instead's [franchise brand for West Sussex Care] care and consideration for my mother following her discharge from the hospital over a number of weeks was absolutely superlative. Always kind and compassionate, each carer forged a personal bond with her and made the effort to get to know her and her priorities and preferences. Each also took the time to talk to my father as well as to her and every visit became something to look forward to for both of them". Another relative said, "Very friendly and professional caregiving team, who have all created a strong rapport and trust with my uncle within a very short time". A further relative said, "One hopes to find carers who are kind, gentle and capable and are able to develop a positive relationship with the client, meeting individual requirements, encouraging choice and sustaining dignity. All of these hopes have been met fully by Home Instead, significantly influenced by consistency of well-motivated and well-trained staff". This demonstrated that people and those close to them felt that they mattered and that people were

treated with compassion and respect.

People were supported to attend healthcare appointments by care staff when their families were unable to provide support. One person told us how caregivers had supported them to going to dental appointments. They said, "Everybody's wonderful. The ambulance couldn't take me to the dentist, so [caregivers name] took me instead". The person went on to say, "He's [caregivers name] like a brother to me". The owner told us how they offered caregivers to go with the person to the dentist without additional charges. The owner always went above and beyond to support people and the caregivers to an especially high standard, passionately aiming to support people to live fulfilling and meaningful lives with maintaining independence being at the core of what they do. We were told of an example of the registered manager raising concerns appropriately with social services for a person who lived with what they believed to be unnecessary restrictions of their liberty. This meant that the person was empowered and enabled to make personal choices to maintain their independence as much as possible with appropriate support from caregivers. A person told us that the caregivers, "Do everything to encourage me to maintain my independence." The provider owner told us of their, "Aim to make a difference and improve the model of care".

Data protection measures were in place. We were told by the provider how they ensured that documents containing sensitive information sent to caregivers via the agency's email system were password protected. This meant that there were robust data protection procedures so people could be assured that their private information would be kept confidential and secure.

Professionals highly valued the services provided and told us how the service always supported involvement and engagement of people and helped to express their views and to be involved in decisions about them. A general practitioner said, "Staff [caregivers] are proactive and good advocates for patients" and that the agency had a "Better acuity of judgement of what's appropriate [for people]". They also said that, "Patients are impressed with the continuity and friendliness of staff [caregivers] who treat them [people] with compassion and respect".

Caregivers told us they "loved" working for the agency. They said, "I really enjoy working for this company as it's a care company that genuinely cares". "It's just brilliant". "It's the best thing working here". "It's a pleasure". Throughout the inspection we saw caregivers being warmly welcomed by the management team in the office. There was a relaxed and open atmosphere among those working for the service, with laughter and words of comfort offered to a caregiver who was moved to tears when talking about a person they were supporting at the end of their lives. The consistent empathy and compassion witnessed among all caregivers and the management team was exemplary and demonstrated the absolute commitment the organisation had to the wellbeing of the people they supported as well as towards the caregivers providing that support.

Is the service responsive?

Our findings

The service was exceptionally responsive to identifying and meeting people's individual needs and choices. Caregivers all spoke very highly of the value they placed upon their roles with the agency and what it meant to them to be able to provide a personal service for people. A caregiver said, "If you can make someone smile, that's it".

The service only provides care and support to people for durations of one hour or longer. This exceeds the expectations of nationally recognised guidance, namely NICE (National Institute for Excellence) which states that "Home care visits to elderly people should last for at least half an hour and be centred around personalised care rather than a "one-size fits all" service". This enables people and caregivers to know each other well and enables staff to provide personalised care.

People's needs and personal choices were assessed holistically and caregivers knew people and their preferences extremely well. A person's relative said, "We were involved in the care plan right at the start, and this level of involvement has continued throughout. We genuinely feel part of the care process; it makes life so much easier. The manager in charge of care is very approachable; the carers are cheerful and efficient". A relative said, "We recently had a care review meeting, (at the companies invitation) to check satisfaction, or otherwise. We think the service is excellent."

"Life Journal's" were completed for people living with dementia to ensure that caregivers knew their social histories, preferences and personal choices. The completed Life Journals were reviewed by the registered manager with the caregivers' completed "This is me" document, which contained information about the caregivers interests and personal traits that enabled people to be matched with suitable caregivers who shared their interests. People were positively encouraged to develop and maintain meaningful relationships with people that mattered to them to avoid social isolation. The provider was an accredited Dementia Champion with the Alzheimer's Society, who delivered training to support people to enhance their knowledge and understanding of people living with dementia. Relatives and carers of people living with dementia were invited to participate in the dementia training to support them to better understand a person's experiences living with dementia. This meant that people and their carer's were supported to live well with dementia. One person living with dementia was supported by the service, who liaised with their Power of Attorney, to purchase an electronic tablet that enabled them to learn new skills. The person enjoyed searching for places that they used to visit which had provided them with a new enjoyable and meaningful hobby.

People living with dementia and their carers were exceptionally well supported by the organisation. The owner told us of how the service had purchased a vehicle suitable for wheelchair access to enable them to transport people to attend the Music and Memories social events. One person told us how they would not be able to attend appointments if the caregivers weren't able to support them using the accessible vehicle.

The service organised and ran events for people living with dementia and for their relatives, but also for people living in the community who may be experiencing social isolation. The events were free of charge for people. Home Instead (West Sussex Care Limited) told us that they were the only service in the local

community offering free community events that are not only offered to people they support but also to the wider community. We attended a Christmas party "Music and Memories" event to observe the experience for people. We saw eight people and seven members of staff supporting the event, which was filled with laughter, singing and smiling faces.

We spoke with people enjoying the Christmas quiz and sing-a-long to festive carols. One person was observed to be singing loudly thoroughly enjoying the music. They said, "I love it. Absolutely wonderful. Everybody's wonderful." This person would not have been able to attend the event if their caregiver hadn't been enabled to accompany them using the service's accessible vehicle to accommodate the person's wheelchair. For another person, this was their first time at a Music and Memories event. They attended with their husband. We asked them if they enjoyed the session. They said, "I loved it. I love people" [smiling]. The owner showed us electronic evidence of many people attending various Music and Memories events that they had organised and told us of the nationally recognised benefits [including NICE] of people living with dementia having the opportunity to engage in music therapy. The owner had invited a theatre company to attend previous Music and Memories events. The theatre company had experience and understanding of people who lived with dementia. We saw how people who lived with dementia were engaged in meaningful activities. This meant that people were supported to live well and to engage in meaningful and stimulating social activities to support their wellbeing.

Caregivers and the management team went above and beyond to support people to follow their hobbies and access activities of their choice within the community. The owner told us how important it was to them to support people to avoid social isolation and loneliness and this dedication to people's social wellbeing was apparent in the evidence we saw. We saw photographs displayed in the agency's office of people enjoying their chosen activities. All of whom looked happy and engaged with caregivers supporting them as they required. An example of people being supported in a very personalised way was a member of staff being matched to a person based upon their interests with a shared interest in fishing was matched with a person who wanted to go out on a fishing trip. involved a person being supported to partake in an all-night fishing trip, enabling them to catch their prize fish. The activity was risk assessed appropriately and the caregiver who accompanied the person displayed exemplary dedication by offering to stay with the person over night, but only requested payment from the agency for two hours of the outing. This opportunity provided a wonderful experience for the person which had a positive impact upon their mental health and wellbeing. We were told of how this person had lived with low moods and loneliness.

People were supported to be involved and to maintain their independence with an inclusive care planning process. Records for people contained relevant information about people including their personal histories and interests. The service was always responsive to people's needs and people were always fully involved with and contributed to their plans of care. A relative said they were "delighted" with the service they received from the service. A person told us, "The staff at the main office came over and helped me prepare a care plan; they are always helpful if I need to make any changes, and nothing is too much trouble. They also do everything to encourage me to maintain my independence." A relative said, "I have been in nursing care all of my working lifetime and I rate them very highly. My husband has kidney failure and the maintenance of his care plan is critical. They treat him with kindness and respect and attend to his medical needs with skill and confidence. They are very caring and I cannot fault them in any way".

Cultural diversity and other protected characteristics for people, including age, gender, race, disability and religious beliefs were understood and respected by the agency. The provider told us how they "value diversity enormously". Caregivers received detailed induction training in a workbook titled "Building relationships" which ensured that all caregivers fully understood and embraced diversity and understood equality. This ethos was evident within the recruitment processes for the agency and also with the people that the agency supported, having their diverse needs met appropriately. We asked caregivers how they

worked to support different groups of people. A caregiver said, "Be open and be honest and be non-judgemental which builds relationships". Records showed that caregivers also completed sensory and communication training to support them to be able to communicate appropriately and sensitively with people who may have degrees of sensory loss and to manage difficult conversations constructively. Diversity and equality was respected and people's individual needs were understood very well by a well-trained, non-judgemental professional workforce.

People knew how to raise any concerns they may have about the service they received. At the time of this inspection the service had not received any formal complaints within the last 12 months. People's records contained information and guidance of how they could raise a concern or complaint. We saw records containing one historic complaint which demonstrated that the owner had handled the concerns appropriately and in a timely and sensitive manner with an appropriate outcome for the person and the service. The owner told us how they believed that seeking regular feedback from people and completing quality assurance support visits to people on a regular basis had enabled them to proactively identify and resolve concerns for people, at an early stage.

People who used the service were provided with positive regular opportunities to be involved with how the service managed and responded to complaints and feedback from people. One person told us of how their feedback was promptly responded to and resolved. They said, "So far, they have always done what I need and what I have asked for. My only complaint is that they changed the time of my visit without telling me, so I called them. They did not ignore me, they corrected their mistake". This proactive response to handling low level concerns enabled the service to avoid more formal complaints being raised by people. This supported people to feel heard and to have their concerns addressed in a timely and effective manner. They were supported to raise any concerns they may have with a responsive and open approach from the caregivers and management team. Daily comments or concerns were recorded within the agency's electronic call monitoring system. This system, titled "People Planner" enabled office based staff to maintain records of contact from and with people, their relatives, caregivers and other professionals. We saw evidence to show how the service responded without delay to any issues raised by people and how happy people and their relatives were with the responsiveness of the service. People felt that they knew how to make a complaint and that they were confident the service would respond appropriately should they need to raise concerns. This means that people are always positively supported to raise complaints and are confident that they will be supported by the service when they do.

The use of information technology enabled people to receive a responsive service and provided caregivers and office staff with easy access to the information they required. The agency's call monitoring system ensured that visits to people were monitored. If caregivers were running behind schedule, the agency's "IQ timecard" system alerted the management team with text messaging and emails being sent to them, informing them that a caregiver may not have logged in or out of a person's home. This would prompt the registered manager to contact the person and the caregiver to ensure that all was well. This provided a safe lone working process for caregivers. Caregivers were also able to access the electronic system using their mobile phones to view changes to their scheduled visits. This ensured that the service provided to people was responsive to changing needs.

People told us how their care was reviewed in the agreed timescales. One relative said, "We know that we have chosen the right company, my mother is very happy with them. They are cheerful and treat my mother with kindness and respect. She certainly looks forward to their visits every day. The Manager met with my Brother and I, and we had fundamental input into her care plan, and our view of her needs. Also, at their request, we had a meeting three months later to review our level of satisfaction. There is no doubt that my mother would let us know if the level of care was not up to the standard we expect, thus far we are

delighted."

People approaching the end of their lives received extremely sensitive, dignified and compassionate care and support from caring and thoughtful carers. The registered manager told us of their previous experience working with people in a Hospice receiving end of life care and how this had enabled them to provide insightful and meaningful end of life care training to the caregivers for this agency. We saw evidence of this in caregivers training records, as well as photographic evidence of meaningful activities completed with people at the end of their lives.

One person received end of life care and support. The provider and registered manager told us of the meaningful relationship a primary caregiver had with a person and of an example of the caregiver wishing to support the person to engage in a meaningful activity to lift their mood. The caregiver purchased the person's favourite food and prepared this with them. Taking the expertise of the person's knowledge of the best way to prepare the meal which we were told brought happiness and a sense of purpose to the person as well as the caregiver. The caregiver had received end of life training to support them to provide an exceptional service to the person whilst also supporting the family to come to terms with the diagnosis and prognosis of their relative. The registered manager told us of how they ensured that they worked closely with the person and their relatives at the end of someone's life to ensure that their individual choices were respected as much as possible. We were told of how the caregivers had ensured that a person was supported to die well by having the music of their choice played at the end of their life. A general practitioner told us, "They [agency] are always able to step in to support people at short notice and avoid hospital admissions for people." This means that people were able to choose their place of death and avoid hospital admissions at this critical time to support people to die well.

Is the service well-led?

Our findings

The service was exceptionally well-led.

There was a clear, organised management structure that uncompromisingly and passionately promoted a person-centred culture. The owner ensured that the service demonstrated their organisational values of, "Compassionate, supportive, prepared, positive and true to yourself and others". Caregivers told us about their very positive views of working for the agency. They said, "A great company to work for and to feel fully supported, to be able to provide an excellent personal service", "Best thing working here", "It's a pleasure, I really value the return I get from the work and it is enhanced by people who live the values". Caregivers said that some of the most positive elements of their roles were the commitment, ethos and values represented at leadership level across the organisation.

The leadership of the service was exceptional, providing services to people that went above and beyond expectations of people and professionals. The registered manager described their relationship with the caregivers and management team, including the provider as "wonderful", saying that they are all, "Bonded almost like a family". A person's relative said, "There is a corporate spirit from top to bottom with this company. It is incredibly impressive. It runs from the carers to the office staff up to senior management. I only have to ask and I know it will be done".

A notably high quality service was delivered, that was both effective and responsive to people's needs, generating positive outcomes for people and caregivers alike. The provider told us of the agency's mission to, "Change the face of ageing in our local communities in West Sussex and be the home care provider of choice for older people and their families", with operational objectives of being, "Outstanding in compliance" and to, "Become the employer of choice". The entire management team and caregivers were evidently very proud of their roles in people's lives, which had such a positive impact upon their relationships with the people they supported and people's relatives.

The registered manager told us that staff supervisions were focused upon KPI's to ensure the quality of the service. The KPI's were reliability, communication, training, sickness, quality assurance feedback from people. This close and consistent monitoring of caregivers performance enabled the registered manager to have effective oversight of the quality of services being provided by their team and enabled them to act to address any identified concerns promptly and fairly.

The use of effective Information technology supported people to receive an efficient service and caregivers to get the information they required at all times. There was a "portal" that caregivers could access using their mobile phones, laptops or computers to see changes to their visits. The "IQ timecard" system was also in place ensuring staff arrived safely at people's houses and people were made aware quickly if staff were running late. This provided assurance to people with office staff proactively contacting people to inform them if caregivers were running late. A person said, "They have been late only once over the past year, and even then, they let me know."

The owner provided us with information regarding their plans to harness new technology by introducing "VR" (Virtual Reality) methods with people's relatives and caregivers as a training experience to provide them with "unparalleled insight into the lives of those living with the disease" [dementia]. This demonstrated the owner's dedication and motivation to continually strive for ways to provide services that support both caregivers and the carers of people living with dementia to care for people with a real depth of understanding about people's experiences.

Recruitment practices supported the employment of a diverse workforce with individuality and diversity being welcomed by the provider. Caregivers respected and cared for one another and worked exceptionally well together as a cohesive and supportive team. The organisation recognised the involvement and contributions of the caregivers with regular awards being presented at quarterly caregiver meetings. Financial incentives were given to caregivers who successfully referred other caregivers to the organisation. The registered manager said, "We want people [caregivers] to feel like care is a real and valued job". The culture of the organisation was one of extraordinary dedication and passion to always continuously strive to deliver care that went "the extra mile" for people, as we were told by professionals. A person said, "The carers and office staff are loyal and well managed they communicate well with each other and always appear to know what is going on. They [caregivers] also show respect for one another. I am a very happy and satisfied customer". A social worker said, "They are a really good agency and they go beyond where they need to go". The provider had nominated the registered manager to receive "Registered Manager of the Year" award with West Sussex Partners in Care, positively recognising their incredible contribution to the service and to the lives of people receiving services.

The leadership team continuously strived to learn and improve the service with innovative and business, yet personalised focused approaches, which ensured sustainability of the service. The registered manager, training and engagement manager and provider were very proactively engaged in maintaining their knowledge and skills to positively benefit the organisation. The registered manager attended National conferences to maintain their knowledge and had signed up to, "Care Quality Matters", and stated, "You have to be involved, or you don't know". The Training and engagement manager actively linked with the West Sussex County Council "Gateway" training for staff to ensure they were fully aware of the local commissioning authority's policies and procedures and access to training resources for caregivers. As an accredited Dementia Champion with the Alzheimer's Society, the provider positively supported people and their relatives to attend and engage in Music and Memories events and delivered free of charge dementia training to people receiving services from them and their relatives but also to the wider community to support community wide understanding and awareness of dementia. The provider told us of their innovative plans for developing the service further by relocating the agency office to a "Hub" in the near future, enabling them to work closely with other professionals in close partnership, at one location, to provide a "one stop shop" service for people who required support in the local community. This also supports a best practice approach in accordance with the six principles of the Care Act 2014, in which "Partnership" working is identified as an essential approach to safeguard people from abuse by sharing information appropriately with other professionals in a timely way, reducing duplication and potential delays with implementing procedures to keep people safe.

Caregivers were valued and treated with respect, equality and were actively included in the development of the service. Caregivers are regularly sent personal thank you notes and gifts from the management team for their exceptional contributions to the service provided. Caregivers and people's views are reviewed against the organisations values each year to enable the management team to measure their success against their objectives. Quarterly newsletters recognised individual caregiver's achievements and positively encouraged their engagement and involvement in the service and highlighted the wonderful examples of positive feedback and experiences of the people they supported. People were asked about the service they received

and felt their views were taken into account by the agency. We asked people and their relatives to complete a survey before the inspection took place. People said that the information they received from the service was clear and easy to understand and agreed that they were asked for their views of the service they received.

People and caregivers were positively encouraged to discuss any concerns they may have which were always listened to by the management team and owner and acted upon promptly and effectively. The service provides creative and accessible opportunities for people to raise their concerns through various avenues, including, telephone reviews, face to face informal reviews and formal reviews of their care, as well as the owner ensuring that they personally visit all people receiving care at least once every six months to seek their views. The owner told us how this personal involvement and investment for people using the service, "Motivates me and the registered manager" that they are providing an outstanding service to people with the service being positively "Endorsed" through the feedback from people. There is confidence that the management and provider of the organisation acted upon all feedback and concerns raised. For example, a caregiver expressed a concern to us about the rate of pay they received for travel time. They told us that, "I have reported it and feel confident that they will do something". The owner told us that they were already acting upon this and by the end of the inspection process this had been resolved. 100% of people, their relatives and caregivers stated in a survey we reviewed that they were confident reporting any concerns to the service.

We were told within the provider's PIR (Provider Information Return) that the agency only recruits individuals who demonstrate, "Generosity of spirit". Each month the service receives approximately 30 new caregiver enquiries, only approximately three of which are successful as caregivers. The provider said, "We are very selective". This was evidenced extremely thoroughly with all new caregivers working through an intensive two stage process before being appointed by the organisation. There is an initial interview discussion with potential caregivers and a second stage that involves the caregivers attending the organisational four day induction training. If the caregivers are not a suitable match for the organisational values, they are not appointed.

We were told how one potential employee had not been taken forwards through the induction training as they were not a good match for the services being provided to people. The owner said that this demonstrated the real passion and commitment the management team have towards appointing the right caregivers to deliver the "Right services to people". The leadership team are very passionate, proud and dedicated, ensuring that only the best caregivers go on to represent the organisation, providing excellent quality care and support to people. The owner emphasised how important it is to them to "provide the right service for everyone". A person using the service told us, "This is a very well managed organisation. I think they are very particular about employing the right kind of people, and the service is pretty good – certainly the best I have ever had".

There was a strong framework of accountability with robust systems and processes that monitored the quality of service delivery effectively. Audits were completed and the registered manager maintained central systems to ensure oversight of core elements of service delivery, including accidents and incidents which were monitored for trends. Actions were taken to mitigate risks when these were identified. A centralised electronic system logged all interactions between the agency, the caregivers and people, their relatives and professionals liaising with the service. Daily "Issues and Actions" meetings were held, with weekly hour long meetings held with the management team to monitor the agency's "Key Performance Indicators" (KPI's). Minutes of these meetings were reviewed by us. Concerns regarding people receiving services were also discussed at these meetings. We saw records of caregivers contacting the office to discuss their worries for a person at the end of their lives. This was managed sensitively by the management team, with clear actions

logged evidencing the actions taken. The outcome of this call was the registered manager arranged a meeting with the person and their caregiver. The person's relative was invited to attend but was unable to partake in the meeting. The registered manager ensured they were updated following the meeting in line with the person's wishes.

The service exudes an openness of approach with an exceptionally positive, devoted culture of continuous improvement and quality. The business places people at the very heart of everything they do. With a keen focus upon maintaining the quality of the service to ensure long-term sustainability for those enjoying the benefits of such an incredibly person-centred, caring and genuinely dedicated organisation. We were told of the waiting list for the service and the reluctance of the provider to exceed provision of service to more than 100 people because of their overwhelming desire to purely deliver an outstandingly high quality service to people that also protected their caregivers from being overworked or undervalued.