

## Johnson James Care Limited

# Home Instead Senior Care

### Inspection report

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16 May 2018

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### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

This was our first inspection of Home Instead Senior Care. The visit was announced and was carried out on 15 and 16 May 2018. The provider was given notice because the location provides a domiciliary care service. We needed to be sure that someone would be in the office. The service provided domiciliary care and support to people living in and around the borough of Charnwood, Leicestershire. At the time of our inspection there were 21 people using the service.

Not everyone using Home Instead Senior Care received the regulated activity; personal care. CQC only inspects the service received by people provided with personal care, help with tasks related to personal hygiene and eating. Where they did we also took into account any wider social care provided. Of the 21 people using the service, nine were receiving personal care.

The evidence seen supported the rating of Outstanding.

The service had a registered manager. 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.

People using the service and their relatives were extremely positive and complimentary about the service they received and of the support workers, known as care givers and management team who supported them on a daily basis.

People told us they felt extremely safe using Home Instead Senior Care and felt really safe with the care givers who provided their care and support. Relatives we spoke with agreed that their relatives were safe with the care givers who supported them.

Care givers were aware of their responsibilities for keeping people safe from avoidable harm or abuse. They had received training on the safeguarding of adults and knew the process to follow should they be concerned for anyone. The management team were aware of their responsibilities for keeping people safe and knew to refer any concerns on to the local authority and Care Quality Commission (CQC).

People's needs had been comprehensively assessed and the risks associated with their care and support had been assessed, reviewed and managed. The care givers had received training in the prevention and control of infection and the necessary protective personal equipment was available.

People were supported to stay safe at all times and their freedom was respected. They were supported to have maximum choice and control of their lives and care givers supported them in the least restrictive way possible.

A robust recruitment process was followed to make sure only suitable people worked at the service. A comprehensive induction and training programme ensured the care givers were well trained to meet people's individual and diverse needs and work in line with the provider's values and beliefs. People told us there were enough care givers to meet their needs. They explained they were extremely punctual, always turned up and never missed a visit. Care givers were matched to the people using the service and meaningful relationships had been built between the care giver and the person using the service and their families.

Care givers had received training in the management of medicines and people were supported with their medicines as prescribed by their doctor and in line with the provider's medicines policy. The provider's auditing processes ensured people continued to be supported with their medicines in a safe way.

There were arrangements in place to make sure action was taken and lessons learned when things went wrong to sustain and improve safety across the service.

People told us the care givers were extremely kind and caring and they were treated with the upmost respect. They told us their care and support was provided in a way they preferred and their consent was always obtained. The care givers supported people to make decisions about their day to day care and support. They were aware of the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS) ensuring people's human rights were protected.

People were supported in a way they preferred because plans of care had been developed with them and with relatives or staff who knew them well. The care givers knew the needs of the people they were supporting extremely well because appropriate plans of care were in place which included people's personal preferences, preferred hobbies and interests. The care givers worked extremely hard in supporting people to pursue pastimes that were important to them.

People were supported to maintain good health. Care givers supported them to access relevant healthcare services such as doctors and community nurses and they took quick action when they felt someone was unwell, including raising concerns with family members. An assessment of people's dietary requirements had been carried out and care givers went out of their way to make sure people were supported to partake in meals they enjoyed and to maintain a healthy, balanced diet.

People were provided with exceptional care and support that was responsive to their needs and individually tailored to meet their personal wishes and preferences. The care givers and the management team were thoroughly dedicated and committed to ensuring people's care and support was the best it could be.

A formal complaints process was in place and people knew who to talk to if they had a concern of any kind. People using the service and their families and friends were confident any issues would be addressed in a timely manner and to their satisfaction.

People were supported by care givers who felt very much supported and valued by the management team. They were supported through formal systems such as supervisions, spot checks and monthly meetings and through the opportunity of speaking with a member of the management team at any time if they required support of any kind. The wellbeing of the care givers working at the service was paramount to the management team.

The service played an active role in the local community and worked with other services to raise the awareness of dementia. The work of the care givers had received recognition from outside bodies with one

recently winning an award from a local newspaper publisher.

Robust and effective systems were in place to monitor the service being provided. People's views of the service were sought and welcomed. This was through visits to people's homes, telephone conversations and through the use of surveys. People were put at the heart of the service and the provider's vision for the service was upheld by the care givers and the management team on a daily basis.

The management team were aware of their registration responsibilities including notifying CQC of significant incidents that occurred at the service.

Further information is in the detailed findings below.

## 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 staff team kept people safe from abuse and avoidable harm and risks associated with people's care and support were thoroughly assessed and managed.

Robust recruitment procedures were followed when new staff members were employed and suitable numbers of staff were available to meet people's care and support needs

People were supported with their medicines in a safe way.

Appropriate systems were in place to make sure people were protected against the risk of infection and lessons were learned and improvements made when things went wrong.

Good 

### Is the service effective?

The service was effective.

People's needs were comprehensively assessed prior to their care and support packages commencing.

People received care and support from a dedicated staff team who had the necessary knowledge and skills.

People were encouraged and supported to make decisions about their care and support. Consent to their care and support had been sought and the staff team understood the principles of the Mental Capacity Act 2005.

People were supported to eat and drink well. Their health and wellbeing were being monitored and they were assisted to access health care services when they needed them.

Good 

### Is the service caring?

The service was caring.

The staff team were extremely kind and caring and treated people with the upmost respect.

Outstanding 

The staff team were highly motivated to provide compassionate and kind care.

People's privacy and dignity were promoted and respected by a staff team who put people's needs at the heart of what they do.

The staff team were given the time they needed to provide people's care and support and were enabled to build open and honest relationships with people and their families.

### **Is the service responsive?**

The service was responsive.

People had been comprehensively involved in developing their plan of care with the support of their relative's. People's plans of care and associated documents reflected well their individual personal care and support needs.

People's care and support needs were met by a staff team who had an excellent understanding of their social and cultural diversities and their values and beliefs.

People knew how to raise a complaint and were confident that any concern would be dealt with appropriately and to their satisfaction.

**Outstanding** 

### **Is the service well-led?**

The service was well led.

There was an open and transparent culture within the service and the staff team went above and beyond to put the people using the service at the heart of what they do.

The staff team were highly motivated and supported to provide excellent care and support to the people using the service.

Robust monitoring systems were in place to monitor the quality of the service being provided to ensure it was the best it could be.

People's thoughts of the service were obtained and taken on board to ensure the continued improvement and development of the service.

**Outstanding** 

# Home Instead Senior Care

## 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 inspection took place on 15 and 16 May 2018. Our visit, carried out on the first day was announced and members of the staff team were contacted by telephone on the second day. The inspection was carried out by one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. Their area of expertise was older people with dementia.

Before the inspection, we reviewed information we held about the service such as notifications, these are events which happened in the service that the provider is required to tell us about.

We contacted the health and social care commissioners who monitor the care and support of people receiving care from Home Instead Senior Care to obtain their views of the care provided. We also contacted Healthwatch Leicestershire, the local consumer champion for people using adult social care services to see if they had any feedback. We used this information to inform our judgement of the service.

At the time of our inspection there were 21 people using the service, nine of which were receiving the regulated activity, personal care. We were able to speak with five people using the service and five relatives of other people using the service. We also visited two of the people using the service in their own home to gather their views of the service.

During our visit to the office we spoke with the provider, the registered manager, the front of house coordinator and two support workers known as care givers. A further three care givers and the field care supervisor were spoken with over the telephone and two healthcare professionals were also contacted following our visit to enable us to gather their views of the service.

We reviewed a range of records about people's care and how the service was managed. This included three

people's plans of care. We also looked at associated documents including risk assessments. We looked at records of meetings, recruitment checks carried out for two care givers and the quality assurance audits the management team had completed.

## Is the service safe?

### Our findings

People told us they felt safe with the care givers who provided their care and support. One person told us, "Because I just have two regular carers who I know well, and they know me, I feel really safe when they are here looking after me and they always make sure that I have everything I need before they go." Another explained, "I'm not always able to get to the front door on my own so the carers do use the key safe these days. I wasn't particularly keen about having one because I was concerned about the door not being locked properly, particularly last thing at night. However, my carers have been very good to reassure me that they always check the lock, particularly after the evening visit and we've never had any problems with it so far."

Relatives spoken with agreed and told us their relations were safe with the care givers providing their care and support. One explained, "We feel very lucky that [person] has such caring workers who see [person] every day. Because of the nature of [person's] dementia, we know we can rely on those carers to let us know when they have any concerns about [person's] safety whatsoever. [Person's] used three previous agents in the past, all of whom were appalling and never once took [person] safety seriously." Another relative told us, "The carer's let themselves in to [person] house with the key which is kept in the key safe. We haven't once had a problem with the use of the key safe by the carers at all."

The staff team had completed training on the safeguarding of adults and knew what to look out for and what to do if they were concerned about someone's welfare. One care giver told us, "There's different types of abuse, physical, mental, neglect and financial. If I was worried I would phone [registered manager], she would act." Another explained, "I would call the office and talk to them, I know there is a number you can ring as well."

The management team were aware of their responsibilities for keeping people safe from abuse and avoidable harm. They told us that any allegation of abuse would be referred to the local safeguarding authority and CQC. This showed us they took people's safety seriously and followed their own safeguarding processes.

Risk assessments had been completed prior to people's care and support packages commencing. This enabled the management team to identify any risks presented to either the person using the service or the staff team during the delivery of the person's care. Risk assessments had been completed on the care and support that was to be provided. These included a moving and handling risk assessment and a physical health risk assessment. Assessments had been completed on the environment in which the care and support was to be delivered, and possible risks relating to the external areas of people's homes, such as pathways and lighting had also been considered. This showed us people's personal safety had been taken seriously and risks relating to people's care and support were, wherever possible, minimised and managed.

A robust recruitment process was in place to make sure only suitable people worked at the service. We looked at the recruitment files for two care givers and found appropriate recruitment processes had been followed. Previous employment had been explored, references, including two professional and two personal references had been collected and a check with the Disclosure and Barring Service (DBS) had been carried

out. (A DBS check provided information as to whether someone was suitable to work at this service.) During people's interviews, standard questions were asked to ensure all prospective staff members were treated fairly and equally. The people using the service were protected by the pre-employment checks that were in place.

Staffing rotas were planned in advance and demonstrated there were enough care givers allocated to provide people with consistent and reliable care and support. People we spoke with confirmed they had regular care givers who turned up on time, never missed a visit and always stayed the correct amount of time. One person told us, "I don't know how they do it, but they are 99.9% of the time on time when they arrive at mine. They actually put other agencies to shame because they always seem to be able to get the carer to us on time and there has only been once, when they have been supporting a previous client who had fallen ill, that they were late arriving. The office told us what was happening and we could have had a different carer if we had wanted, but we were prepared to sit and wait, and as it was, she was here within an hour of the time anyway." Another explained, "They always come at the right time, they are very punctual and never anxious to get away." A relative told us, "I have been so impressed with how patient the carers are with my [person]. Nothing is too much trouble and they never rush [person] so that they can go at their own pace. They are always willing to do extra jobs and if I point at the clock, and say that they should be on their way, they tell me not to be so silly and that if there's anything else I need before they leave, then they are more than happy to help me with that."

People were given the choice of whether they preferred male or female care givers and this information was recorded within their records. One relative told us, "As far as I can recall, we were asked whether [person] preferred male or female carers but [person] is more comfortable with female carers and that's who [person] has."

For people who needed support to take their medicines, information had been included in their plan of care. A relative told us, "One of the key things which we checked with the agency before moving [person] to their care, was that the carers would arrive regularly on time in the mornings so that [person] tablets were taken in a consistent way." Care givers had received training in the safe handling of medicines and were aware of their responsibilities including completing the appropriate documentation when people had been supported with their medicines. A relative explained, "They take the tablets out, give them to [person] with a drink and once they see [person] taken them, it gets filled in in the book." Care givers competency to handle people's medicines had been regularly checked to make sure they continued to support people with their medicines in a safe way.

People were protected from risks to their health and well-being by the prevention and control of infection. Protective personal equipment (PPE) was readily available and used. This included gloves, aprons, shoe protectors and hand gel. Care givers had received training in infection control and were aware of their responsibilities around maintaining good hygiene. One person told us, "I've never once had to remind them to wash their hands or change their gloves and apron and to be fair; I think their hygiene standards are really excellent. They always insist on taking my rubbish out to the bin for me as well which I'm grateful for because I struggle to get out on the uneven path to do it myself."

The staff team were encouraged to report accidents and incidents and the registered manager and management team ensured lessons were learned and improvements made when things went wrong. For example, improvements to the recruitment process further enhanced its robustness and ensured only suitable people with the right ethics worked at the service.

## Is the service effective?

### Our findings

People's physical, mental and social support needs had been comprehensively and holistically assessed before their care or support package had commenced. The registered manager explained this was so the person's needs could be thoroughly identified and the management team could satisfy themselves that the person's needs could be met by both them and the care givers working for the service.

Care and support was being delivered in line with current legislation and best practice guidance. The provider and registered manager were working with Dementia Action Alliance, coming together with other organisations to share best practice and learn about the latest trends and innovations from across health and social care and share best practice and take action on dementia.

The provider and registered manager were in the process of piloting an assistive technology programme enabling people to remain independent and keep safe in their own home. The pilot involved the use of sensors as an enhancement to the care and support services already being provided by Home Instead Senior Care. It supported people to feel safe and secure with the comfort of knowing that a member of the management team would be alerted in the event that something happened and help was needed.

People told us they were supported by a staff team who had the knowledge and understanding to meet their care and support needs extremely well. One person told us, "I don't need a lot of special help and certainly the help that the carers provide me, by way of helping me get washed and dressed and making my meals, they seem very well trained for." Another explained, "When I compare my dealings with other care agencies to this one, I would say that this agency's overall understanding, and the carers skills in looking after people with complex dementia, makes them stand out from other agencies as far as I'm concerned." A relative told us, "My [person] has [specific health conditions] and they are very good at spotting when [person's] condition fluctuates. It really helps and takes the stress off me, to have such knowledgeable carers looking after [person]."

People received care from a staff team that had the right skills and knowledge. Care givers had received a comprehensive three day induction into the service covering the standards of the care certificate. The care certificate is the benchmark that has been set for the induction of new care givers and is therefore what we should expect to see as good practice from providers. One care giver explained, "The induction was very interesting, I was a little worried as I hadn't done this work before but they gave me the right training, it really did help."

An external training company provided relevant training based on current best practice, and on-going training in areas such as, health and safety, moving and handling, infection control, and safeguarding had also been provided. One care giver told us, "I did all my required training when I joined and I am booked to do my refresher training, I haven't looked back since I joined."

The registered manager explained they and the field supervisor were booked to attend a specialist training course on dementia care in June 2018. They planned to cascade this training to the rest of the staff team

following completion.

People's needs were met by a staff team that were effectively supported and supervised. Spot checks of each care givers work had been carried out to ensure they were working in line with the provider's aims and objectives and their policies and procedures. One to one meetings had been provided enabling the care givers to share any concerns or issues and discuss their performance within the service. One care giver told us, I have supervisions, I feel supported 100%." Another explained, "We have spot checks and supervisions where you can talk about things, but there is always someone you can talk to at any time if you are worried about anything."

Care givers supported people to have sufficient food and drink when they carried out a mealtime call. They supported people who were able to make their own meals so they could maintain skills that were important to them. They knew the importance of making sure people were provided with the food and drink they needed to keep them well. One person told us, "Whether it's something to eat or drink, my carers will always ask me what I'd like and they usually remind me what I have in the fridge or the freezer when it comes to my main meal. If I don't fancy anything in the freezer, they never mind making me a quick omelette or something on toast if that's all I fancy." Another explained, "The very first thing that my carer will do when she comes in the front door is put the kettle on, because she knows I'm usually ready for a nice cup of tea and she will always usually ask if I'd like another one before she leaves me. I can get some cold drinks for myself but it's just nice to have something warm when the carer is here with me."

Relatives told us their relations were supported to have adequate food and drink. One told us, "[person] really needs to be encouraged to drink these days so we rely on the carers to do that while they are there with [person] and they usually make sure [relative] got at least one cold drink that [person] can reach once they leave. They seem to be more successful at encouraging [person] to drink these days than we are!" Another explained, "We wanted [person] to have a whole hour at lunchtime so if they feel like it, the carer has time to cook a proper meal rather than just have processed food out of the freezer. The carers are very good and I make sure there are plenty of fresh things in the fridge so they can make up whatever [person] fancies."

For people who were at risk of not getting the food and drink they needed, forms were used to monitor their daily intake. Where concerns were identified action was taken, including supporting people to access the relevant healthcare professional for support.

The staff team closely monitored people's health and wellbeing and when concerns about their welfare had been identified, these had been reported and acted on. A relative explained, "One morning a while ago, when [person's] carer came in, she struggled to get [person] to wake up and to engage with them, so she phoned me and then called the paramedics. I think I got there about the same time as the paramedics who were able to give [person] a good examination. Thankfully, there was nothing seriously wrong but I was really grateful to her for having alerted me and done the right thing to support [person] on this occasion." Another told us, "They are certainly very good at keeping an eye on [person] and will always either ring or send me a text message if they are at all concerned about anything to do with [person] health or care. This way, I find we can pick things up early and get them treated before becoming anything too serious." During our visit we observed a care giver calling the office to inform them that a person was unwell and had taken themselves to bed. The member of the management team immediately contacted their relative to inform them of the care givers concerns. People's health and welfare were taken seriously by the care givers and the management team.

People's care and support were provided in line with relevant legislation and guidance. The Mental Capacity

Act (MCA) 2005 provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to make particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. Applications to deprive a person of their liberty in their own home must be made to the Court of Protection.

We checked whether the service was working within the principles of the MCA. No applications had been made to the Court of Protection. The management team understood their responsibility around the MCA. They explained that if a person lacked the ability to make a decision about their care and support, a best interest decision would be made with someone who knew them well and when necessary, with the relevant professional's involvement. Training in MCA had been completed and the care givers we spoke with understood its principles. One explained, "People can often make small day to day decisions with support. It's always in their best interest."

Care givers explained they always sought people's consent before providing any care or support. People we spoke with agreed with what they told us. One person told us, "Well, I'm never forced to do anything that I don't want to and if I'm not particularly ready to have help with my wash when my carer gets here, she will do the rest of the tidying up and get my breakfast ready while I have a nice cup of tea, after which I'm usually ready to have my wash." A relative explained, "When my [person's] carer first gets here, I usually hear her go upstairs and knock on the door and she always wait's for [person] to say she can go in and then I hear her ask [person] how they are feeling and whether [person] is ready to make a start." A care giver explained, "I always ask them if they are alright with me helping them. I support people to remain as independent as possible, so if they can do things for themselves I ask them if they would like to do it and I let them know I am there if they want me."

## Is the service caring?

### Our findings

People told us they received excellent care and support from a dedicated staff team. They told us the care givers were extremely kind and caring and treated them with the utmost respect. One person told us, "They [care givers] are great, very willing and pleasant, I have been very impressed by them all. They treat us with respect, very much so." Another told us, "I like having regular carers because they are able to get to know me and they know the way I like things to be done. I hate having to explain, time and time again, to different carers, what it is I need help with. Fortunately, I don't have to do that with this agency, they are excellent."

Relatives agreed the care and support their relations received was exceptional. One relative explained, "[Person's] dementia means that they can very often spill things down themselves during the day without really noticing it. [Person] was always one of these people who took great pride in their appearance and [person's] carers now will always make sure that [person] has something clean on each morning and they do it in such a way as to not throw their attention to the fact they spilt things down themselves, because I know [person] would be horrified to think that that was the condition they now find themselves in." Another told us, "I find that my [person's] carers are lovely because not only do they make time to have a chat with [person] while they are looking after them, but they also make time to ask me how I am and have a bit of a chat with me. It's really kind of them, because I don't get out very much these days because of my [person's] condition and just to have a normal conversation with someone make's the world of difference to me."

Respect for people and for people's privacy and dignity was at the heart of the provider's culture and values and the people using the service, their families and care givers felt respected, listened to and valued.

A healthcare professional involved with the support of two of the people using the service told us, "The feedback I have from the families is very positive. The carers go above and beyond to ensure the client's needs are met appropriately. Having met some of the carers I felt very confident in their abilities to provide excellent care. The care packages are regularly reviewed with the client's carers and other professionals involved. Overall this agency is the best I have come across. Yes they are more expensive than other agencies but that is reflected in the quality and consistency of the care given."

The providers recruitment process ensured only people with compassion, kindness and empathy worked at the service. This was reinforced during the induction and training process. This made sure the provider's mission statement of 'ensuring people's lives were enriched by providing personalised care to enhance people's quality of life' was fulfilled.

The provider's aims and objectives stated, 'Home Instead's principle objective is to provide supportive care and companionship which both enables and encourages our clients to remain independent, in their own homes, for as long as possible.' A relative told us, "For [person], the independence of being able to still live in the old family home, rather than having to have moved into a care home, is very important. It's only because the care is going in, I am able to check up on [person] every day that gives us the security blanket, to allow [person] to stay at home on their own which they insist on doing."

People were provided with care and support from a passionate and exceptionally motivated staff team. Members of the management team and care givers all spoke with passion about the work they did and the support they provided to people. One care giver told us, "I rang up to discuss the possibility of working for them, I listened to what they said and I said, 'You sound like you care!' and decided I wanted to work for these people!" Another explained, "I love it, the relationships you build up with the clients is great." A member of the management team explained, "We provide more than just going in and doing the job. We want them to look forward to us coming. We look at ways to improve people's lives. They are in control and we are there to support them. It is wonderful to see the journey they have with us. We are able to improve and enrich people's lives."

The provider shared examples of how people's lives had been enriched by the caring and thoughtful attitudes of the care givers. This included one of the people using the service who had started losing weight. A weight chart had been introduced and their care giver started to cook with them at each visit, often cooking pastries and cakes. With support from their care giver, they also helped to prepare meals from scratch, using herbs and vegetables picked together from their garden, turning it into a delicious nutritious meal they enjoyed to eat. The process of carrying out these activities encouraged the person to eat more and they gradually regained weight. The caring attitude of the care giver enabled the person to continue an activity they loved to do previously, but were unable to do so until now.

Another person loved being busy and socialising. They taught the care givers how to knit and in turn, one of the care givers taught them how to crochet. Despite the person's diagnosis of dementia, they remembered how to do this and now crocheted on a regular basis. The care givers also took them out shopping, walks around the local nature reserve and their favourite, the garden centre. They were able to purchase some plants and spent their afternoons potting in the garden. Their relative explained, "[Person] remembered the name of both their carers. This has not happened for over 10 months."

Another person who had been diagnosed with Alzheimer's, suffered extreme anxiety and water phobia. Through the trusting and caring relationship built up with their regular caregiver, they were encouraged and supported to have a shower, which they now enjoyed on a regular basis.

A comment received by the registered manager from a care giver read, "I cannot tell you what a fab week it has been! Something special every day for both the clients and myself! First a trip to see the floods and feed the birds at Watermead park with [person], then a cooking morning with [person] followed by a morning reading poetry with [person] and then being able to get [person] out today. Positively buzzing! I cannot deny I am a little tired approaching the end of a 12 day run with a rather hectic Easter weekend thrown in, however I would not change a thing!" Another expressed, "I've had a bad few days but this made my week, this evening was the happiest I have ever seen [person]. They grabbed my arm and looked at me with a big smile on their face and said if it wasn't for us they would never smile or laugh like they do, as nothing they ask of us is ever too much trouble." Another stated, "I can't thank you all enough [staff team] for being part of my life now. You have no idea how you have enriched my life, each and every one of you. A fantastic team of people now, I am proud to be a part of it all."

The provider and registered manager worked extremely hard at ensuring the care givers focused on building and maintaining open and honest relationships with the people using the service and their relatives. A member of the management team explained, "We are there for everyone, the people we are supporting and their families, we are there for them as well."

Care givers gave examples of how they preserved people's dignity when supporting them. One explained, "I always close the curtains and the door so no one can just walk in." Another told us, "I make sure we are on

our own and close the curtains and doors. I talk to them and explain what I am doing and chat with them throughout."

The staff team explored ways to communicate with people according to their needs. This included the use of flash cards for one person who was hard of hearing. This enabled them to share their views, preferences and choices with the care givers and receive their care and support in a way they preferred.

People told us the care givers were given all the time they needed to properly support them in a compassionate and personal way. One person told us, "When I compare my dealings with other care agencies to this one, I would say that this agency's overall understanding, and the carers skills in looking after people with complex dementia, makes them stand out from other agencies as far as I'm concerned."

A relative told us, "It's sometimes just the little things that make all the difference. I will occasionally get to [person] and they will tell me that they'd run out of something like milk or bread the day before, but that their carer has gone and got it for them from the village shop so that they didn't have to wait until I arrived to do the shopping for them." Another explained, "We have been so impressed with their patience and the way in which they really take their time when they are looking after [person]. They really understand dementia well."

One of the care givers had recently won Dementia Carer of the Year 2017 in the Carer of the Year awards held by the Leicester Mercury, a local news publisher. The provider explained how proud they were and acknowledged the length's they went to for each and every one of the people they supported. They explained, "Their [care giver] understanding of people's needs had been recognised. Their attention to detail in listening to and caring about people's individual needs enabled them to offer activities bespoke to each individual. The support the care giver provided enabled people living with dementia to have episodes of memory that their family had not thought possible." The care giver explained, "I love it, it's a caring and supporting role. The relationships we build with the clients are great. We support them to stay at home for as long as is possible and support their safety and wellbeing. I love my job."

Care givers had the information they needed to provide individualised care and support. They were extremely knowledgeable about people's history, their preferred routines and the people who were important to them. Before any care or support package commenced care givers were given the opportunity to meet the people they would be supporting. They were able to meet with them, read their plans of care and determine the support people required. A care giver told us, "We are always introduced to people before we start." A relative told us, "We have just a small team of regular carers, it's always somebody [person] knows well. If the agency does want to introduce anybody new to [person], they will make sure that the new carer comes along with one of the regular carers to be introduced. They are able to watch what help [person] needs and they can do that on a couple of occasions if they need to before they take over the care on their own."

Care givers recognised the importance of showing respect in people's homes when providing care and support. One person told us, "My carers help me by hoovering and dusting once a week because these days I really can't manage it on my own. I do have quite a lot of knickknacks but they are always very careful when they are dusting them to make sure that nothing happens to them. I always tell them not to worry because accidents happen, but they always try their best to make sure they put things back where they came from."

The provider and registered manager not only cared about the people using the service but cared for the care givers as well. They subscribed to an employee support program and the care givers were regularly reminded they could call this free service at any time for support or guidance. A care giver told us, "They

[management team] really do care!" A member of the management team explained, "We are here for them [care givers], to give them the best experience along with [people using the service]. If they love what they do, everyone benefits. It is more than a job, we try to be the very best we can be."

A confidentiality policy was in place and the management team and the care givers understood their responsibilities for keeping people's personal information confidential. Computers which stored personal information were password protected and people's care records were kept secure. People's personal information was safely stored and held in line with the provider's confidentiality policy.

## Is the service responsive?

### Our findings

People had been visited prior to their care and support package commencing to determine what help and support they needed. A comprehensive assessment had been completed and people had been consulted and fully involved in the planning of their care with the support of their relatives. One person told us, "My care plan is in the folder and I know that it was written up following my first meeting that I had with one of the managers and my daughter when I first came out of hospital. I absolutely feel that I've been thoroughly involved in planning my care and can't think of any ways in which I haven't been."

Once people's care and support needs had been identified the provider and registered manager began the process of matching the person with a suitable care giver who had likeminded interests and outlooks. Records showed us one care giver had been matched to a person because they both loved to clean. Another care giver had been matched to a person because they both loved to cook and another care giver had been matched to a person because they both loved the garden. A relative told us, "They have time during the week for [person] to go out with their carer. This time of year [person] loves anything to do with gardening, so the carer take's them out and about to either some of our local gardens, or to one or two of the garden centres where they can have a coffee and then they will usually spend a bit of money and buy some plants to bring home with them. [Person] really value's this time."

Care givers were always introduced to people before their care and support package commenced. This enabled them to meet the person, read their plan of care, learn and understand their needs and observe the care and support the person needed. Only then were they allowed to support the person alone. A care giver told us, "We are always introduced before care is started." Another explained, "They [management team] take you to them to introduce you and show you where everything is. You get time to read the care plan and get to know them." One of the people using the service told us, "I only have two regular carers who split the week between them. If they are suddenly taken ill or are going on holiday then the agency will bring someone new round and introduce them to me and they usually shadow my carer, at least once before then coming back to me. It's nice to meet new carers rather than be surprised by somebody totally new when they come through the front door."

Life journals had been developed to help the care givers get to know the people they were supporting and find out more about them. These were developed when a new person using the service and a care giver were first matched. They helped the care giver to get to know more about the person. Together, they completed the journal, filling out details about family, past homes and jobs, and pets and hobbies people had. The journal enabled the care givers to discuss periods of the person's life, triggering happy memories and conversation. The staff team went above and beyond to understand the needs of the people using the service and provided excellent care and support to meet those needs and promote equality.

The management team kept in regular contact with the people using the service to ensure they remained satisfied with the care and support they received. A call was always made 24 hours after their first visit to check that all was well. Contact was then made on a regular basis thereafter to make sure people were happy with the care givers who were supporting them and with the level of support they received.

People's plans of care were very much centred on them as a person. They were comprehensive and included information to enable the care givers to provide the care and support each person needed. The plans of care included Information on people's history and how they wished their care and support needs to be met. Relevant emergency contacts and details of risks that had been assessed were also included. One care giver told us, "There is always a care plan and they reflect the people's needs. We always read them when we first meet them."

Care givers had an excellent understanding of people's social and cultural diversities and their personal values and beliefs. They went out of their way to support people to follow their interests and take part in activities that enriched their lives and which were socially and culturally relevant to them. The things that were important to people were identified and enjoyed by them on a daily basis. A relative commented, "We are very pleased with the whole care package and with these extra items (activities) it can only enrich [person's] life."

One of the care givers, who had been awarded the Leicester Mercury dementia carer of the year 2017, had created a scrapbook with one of the people using the service. It consisted of photographs of the plants in the person's garden at different times of the year and the birds who visited the garden. The care giver had been able to sit with the person and look through the book which helped trigger memories for the person of planting the flowers and seeing the various stages they went through. The success of the scrapbook and reflecting back each week on the changes in the person's garden had remarkable outcomes and memories of change which would not have been possible without it. The work on the scrap book enabled the care giver to build a trusting relationship with the person, who went from being very reluctant to receive care and support to looking forward to the care giver's visits. The care giver had commenced developing these scrap books with other people using the service to further enhance and enrich their lives.

The management team had developed a dementia resource library. This provided the care givers with items and materials they could use to support people with their interests and hobbies. Items such as active minds jigsaws and domino picture cards were available to borrow and active minds room sprays were also available. These included sprays and sounds of the seaside and gardens and were used to trigger happy memories for people. Wartime memory cd's, scented jumbo colouring pens and colouring pencils and flash picture cards were also available to help communicate moods and feelings. The care givers had access to these resources at all times enabling them to support people to enjoy the pastimes they enjoyed on a daily basis.

The provider and registered manager had gone above and beyond to support the people using the service, their families and the general public. They had recently created a Companionship Café. The Café was being held on a quarterly base at different local community halls and premises and was free and open to all. Tea, cake, music and companionship were offered to people wishing to attend. Home Instead Senior Care were supporting the local community and working hard to try and end loneliness and isolation for older people.

People told us the care givers knew them extremely well and knew what they liked to do. One person told us, "When one of my regular carers is away, if one of the others can't fill in for her then I will be sent someone that I at least know, who has been to me before or who, at least shadowed one of my regular carers, so that they know what it is I need help with." A relative explained, "They will take [person] for a walk round the village so that they can have a chat with some of their friends and also pop into the local shops to get provisions. Because we live away, it's not possible for us to help them as often as we like, but we really value the fact that the carers support them in this way because it's important to us that they have some normality in their life and do something they enjoy even now they have developed dementia."

People told us they received consistent and reliable care and support. One person told us, "I must admit, it's been a breath of fresh air since being with this agency, because I don't think I can recall my carers being late once since I've started with them. If they can do it why can't others?" A relative explained, "It was important to us that times are adhered to because [person] goes out to a day centre twice a week and we don't want them missing that unless it's absolutely necessary. We have been very impressed with how the carers always arrive on time and they never mind staying for longer than their allocated time, if there are extra jobs [person] needs doing."

The service looked at ways to make sure people had access to the information they needed in a way they could understand it, to comply with the Accessible Information Standard (AIS). Whilst the AIS is a framework put in place making it a legal requirement for all providers of NHS and publically funded care to ensure people with a disability or sensory loss can access and understand information they are given, the provider made sure they too complied with the standard. People were able to access information regarding the service in different formats to meet their diverse needs. Care givers knew people extremely well and knew how each person communicated. For example, for one person with limited hearing, flash cards were used as a way of communicating their needs and wishes.

There was a formal complaints process in place. People and their relatives knew who to contact if they were unhappy or unsure about anything and were confident any issues would be dealt with speedily and to their satisfaction. One person told us, "We've never had anything to complain about, but I'm conscious there is a leaflet about complaints in the folder and if needs be, I would phone and speak to one of the managers and hope they would sort any issues out before it became a formal complaint." Another explained, "If I had any problems, I'd speak to my daughter and get her to talk to the agency because at my age, I don't really like making a fuss about anything. Having said that, there's been absolutely nothing to complain about since I've been looked after by the carers here."

People's requirements at the end of their life were identified during the assessment process. The registered manager explained that whilst no one currently being supported by the service required end of life care, people's individual needs would be met by appropriately trained care givers with the support of the relevant healthcare professionals.

## Is the service well-led?

### Our findings

There was a registered manager in place. 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.

People told us the service was extremely well managed and the provider, registered manager and the management team were welcoming and approachable. One person told us, "We cannot fault them. We just wish other agencies were as well-managed as this one is and, as we always say to people, if they can do it why can't everybody else?" Another explained, "We just wish we had found them sooner, but now that we have, we have let our friends know about them too."

A relative explained, "Their organisation is excellent, the carers are professional, dedicated and caring in their roles and they really do seem to put the best interests of the clients at the heart of everything they do rather than profit. Therefore, I think they're excellently managed and run." Another told us, "If I need to call the office, they have always picked up the phone in the past and been able to sort out everything for me. They are always very friendly on the phone."

A health professional told us, "I have nothing but positive reports about Home Instead Senior Care. They have been personalised and flexible with providing care. The carers use their initiative to care for older people with mental health problems. They care about people's wellbeing as well as meeting their essential needs. The managers have also worked well with us with reviewing care packages and are responsive when we ask for their support. I would consider Home Instead Senior Care if one of my family members needed help at home."

The staff team were extremely committed to working together to achieve the provider's vision and values. One staff member told us, "It is all about things you would want yourself. To be treated with dignity, have your privacy maintained, remain as independent as possible and be safe in your own home." Another explained, "It's about supporting people to live in their own home. To support them to live how they want to live with support and to meet their needs in a person-centred way." A member of the management team explained, "We personally believe as a team that it's not merely going above and beyond but providing a service that we believe every single person deserves to receive as standard and ensure we enhance everyone's lives as outlined in our mission statement which each member of our team is passionate about."

The staff team felt extremely well supported and valued by the management team. They told us there was always someone available that they could talk to if needed. A care giver explained, "I've not looked back since I started working here. I feel 100% supported and there is always someone available should you need help or advice." Another told us, "I feel listened too. We can talk to them [management team] at any time, and talk about anything your worried about." A comment received after our inspection visit stated, "Thank you team Home Instead. The support and belief I have from you all is incredible. Best company to work for. Best job in the world, best decision I ever made! A million thankyou's from me for giving me the

opportunities you have!"

The staff team received feedback from the management team in a constructive and motivating way. One care giver explained, "I have just had a supervision. They asked me if I was happy with everything and told me how pleased they were with my progress and how pleased they were that I had gained the trust of the people I am supporting. It meant a lot." Another told us, "Having positive client feedback from clients and hearing I'm doing well from [management team] means more than anything."

The staff team went above and beyond the expectations of the management team and their dedication and commitment to providing excellent care and support was recognised. Care givers were awarded a gold badge for being star of the month for going above and beyond the providers expectations. A new recognition scheme for 2018 had also been implemented. This included blue badges being awarded for random one off support over and above expectation. Purple badges were awarded for doing something special for an on-going period that had really enhanced a person's life and green badges were awarded for repeatedly helping the management team in their hour of need. For example, one care giver had been awarded a purple badge. This was for enhancing the lives of the people using the service through having the patience and the care to update people's journals and scrap books, garden therapy books and memory books of activities and outings. These had then been used to reflect back on and provoke memories of the good times they had had with the people they supported. Another care giver had been awarded a green badge, for being available to work to ensure people had regular care giver's in times of sickness or where additional calls may be required. This ensured people were supported by a familiar face at all times. Badges were being worn by the care givers with pride.

Staff members were given the opportunity to share their thoughts on the service and be involved in how the service was run. The provider arranged monthly drop in sessions which care givers were encouraged to attend. During these sessions they were able to discuss any issues or suggestions. Refreshments were provided and during these sessions, massages and hand treatments had been offered by way of a thank you from the provider.

The provider had recently introduced policy of the month. Members of the staff team were given a policy to read and digest each month. Policies provided to date included the safeguarding policy, whistle blowing policy and their policy on MCA. A care giver explained, "There is plenty of information available to support you in your work." Information on safeguarding and MCA was also included on the care givers identity badge for reference.

A monthly newsletter was available to the people using the service, their relatives, the staff team and other interested parties. This provided information about Home Instead Senior Care and included ways in which people could be involved and have a say on how the service was run. Including reminding people to complete the surveys that were regularly sent out.

Robust and effective monitoring of the service ensured people were provided with excellent care and support. When people first started using the service they were visited on a regular basis to check they were happy with the service they were receiving. A member of the management team made contact with people after their first visit, then after the first week of their care package commencing, then after the first month and then three monthly thereafter. They checked people were happy with the care and support they were receiving and with the care givers supporting them. A quality audit and review of peoples care records was carried out and ways in which they could improve on the service provided were explored.

Records kept were audited on a weekly and monthly basis and further audits on areas of the service such as

timings of calls and duration of calls were carried out. This ensured people were provided with a safe, flexible and unique package of care and support that met their individual needs.

The management team used a variety of ways of gathering the views and thoughts of the people using the service, families, staff members and other interested parties. This was through the use of surveys, regular visits and telephone monitoring. One person told us, "Somebody pops in probably about once a month from the office to make sure that I'm happy and that there haven't been any changes in my health and she always looks at the care plan to make sure that there is nothing that needs changing." Another explained, "I remember filling in a survey some months ago and I get telephoned from the office who ask me if I'm happy with everything."

The views of the people using the service were at the centre of the quality monitoring arrangements that were in place.

The provider and the management team had an open and transparent culture, with clear values and visions for the future. The provider explained, "Our aim is to remember who they have been [people using the service] and who they still are. I want this business to be the best of care businesses. If you work hard in life, you have choices you can make. People should have options of more bespoke care with a holistic approach; this is what we can offer."

Spot checks were regularly carried out on the care and support people received. This made sure the care givers were supporting people in a way that mirrored the management team's vision and values.

The management team strove to provide the best possible care to people. The service had a 9.8 out of 10 rating on [www.homecare.co.uk](http://www.homecare.co.uk) for the work it did with people using the service. This rating was based on nine people's feedback to [www.homecare.co.uk](http://www.homecare.co.uk). Comments included, "As far as I am concerned, I am very pleased and happy with the service as a whole. I am cheered up by all the team who come to care for me and look forward to seeing them all. They are all well organised. I feel the staff are chosen exceptionally well to suit me and all are very friendly and professional." And, "As an Independent Advocate, I have to be sure that the care providers I recommend to my clients offer a first-class service. I found the approach from Home Instead Senior Care to be excellent, professional and caring. The review carried out to ensure they understood the client's needs, interests and expectations was one of the most thorough I have come across."

One relative did explain they felt part of the terms and conditions of the service could be more flexible. They explained, "Just occasionally, we've wanted to take [person] away and what we haven't appreciated was that the agency wants to be given at least 14 days' notice of cancelling care, otherwise they will still charge the full amount for the visit. I could understand them having a policy like this, but 14 days seems a long time in advance. Surely as long as they have three or four days' notice it doesn't really make any difference to them, does it?" We discussed this with the provider who immediately took on board the comments and was thankful for the feedback. Following our inspection we were informed the cancellation process had been reduced to seven days to accommodate people's wishes. The provider had a strong emphasis on continuous improvement and was committed to ensuring the service met the needs of the people using it.

Members of the management team had attended meetings with the Dementia Alliance Action group in Leicester and were keen to be involved with as many groups as possible. They had visited most of the elderly groups in and around the Charnwood borough, including the local Alzheimer's Society Group, both to understand if these groups would be suitable for the people using the service to join, and to highlight the support they offered people.

Following the management teams recommendation, one of the people using the service attended the memory café run by the local Alzheimer's society. They enjoyed colouring and crafting, something they would never have done at home and socialising with other members. It also benefitted the family who attended with them and found useful information and support on Alzheimer's and dementia.

During a visit to a dementia action group the management team found out about a company that operated holidays and breaks for people living with dementia and their families. During a recent meeting with a one of the people using the service, concerns had been shared by the mental health team regarding them going on holiday. The management team were able to share information about the company, including a brochure, with the person so they could access a holiday that was safe and had the appropriate support and activities.

As part of dementia action week, Home Instead Senior Care had created a 'Songs for Awareness' campaign to highlight the importance of the benefits of music to those people living with dementia. This had been shared with the people using the service, their family and friends, the staff team and all interested parties. The provider held a companionship café with music as the focus. People were able to request a song to be played and the people who attended joined in. The session was enjoyed by all.

The registered manager was aware of and understood their legal responsibility for notifying CQC of deaths, incidents and injuries that occurred for people using the service. This was important because it meant we were kept informed and we could check whether the appropriate action had been taken in response to these events.

This was a first ratings inspection of the service. The provider understood their responsibilities for ensuring that once rated, this rating would be displayed. The display of the rating poster is required by us to ensure the provider is open and transparent with the people using the service, their relatives and other interested parties.