

# Inter-County Nursing and Care Services Limited

## Inter-County Nursing & Care Services Rustington

### Inspection report

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Date of inspection visit:  
29 November 2018  
03 December 2018

Date of publication:  
05 March 2019

### Ratings

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

# Summary of findings

## Overall summary

About the service: Inter-County Nursing and Care Services Rustington provides care and support to older people living in their own homes. At the time of this inspection 70 people were being supported with their personal care needs.

People's experience of using this service:

Without exception people and their relatives said that the service provided by Inter-county nursing and care services, Rustington was of an exceptionally high standard. People were extremely confident with the service and spoke very highly about how well the agency was managed by a dedicated registered manager and team of very caring staff.

We reviewed 'five-star' reviews left on an NHS website by relatives of people who had received a service of, "Efficiency with professional care and compassion" from "Excellent staff.". Consistently positive feedback was provided by relatives which demonstrated people were cared for deeply by genuinely kind and compassionate staff who were totally dedicated and committed to ensuring that people received the care they needed and wanted.

People and their relatives said how the agency was responsive to their individual circumstances and situations which gave them reassurance and peace of mind that their loved ones were well cared for. End of life care was provided in a deeply compassionate and gentle way by staff who cared. Relatives said they would "highly recommend" the agency to others. One relative said, "They [staff] have the knowledge of years of experience to advise what is needed without being overbearing and also they care which is what anyone wants when someone you love is not well. I can highly recommend."

People received very personalised care and support from a very dedicated and reliable workforce who were led by a very professional and competent management team. The registered manager consistently went above and beyond to provide a service that was centered around the needs of people. They maintained their professional knowledge and commitment to people and had received an award to recognise this level of commitment and dedication.

Staff demonstrated a depth of compassion and empathy and genuinely cared for people they supported. People felt they mattered. Positive relationships were developed between staff and people, with people saying they always felt respected by staff and that their privacy and dignity were maintained.

The service was safe, with systems and processes which ensured that any concerns were reported to appropriate authorities without delay.

A personalised approach was evident, with the management and staff team ensuring that people received the care they needed and wanted that met their expectations and preferences.

Staff were well trained and competent in their roles.

People had enough to eat and drink. Staff provided support as required to ensure that people's dietary needs were met.

People had access to health and social care services as needed. The staff and management team provided strong support and worked openly and professionally with external professionals which supported people to receive a coordinated and consistent service.

Rating at last inspection: Good [Last inspection report published 30 December 2015].

Why we inspected: We completed a planned inspection based on the previous rating of Good.

Follow up: We will review the service in line with our methodology for 'Good / Outstanding' services.

## 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

Details are in our Safe findings below.

Good 

### Is the service effective?

The service was exceptionally effective

Details are in our Effective findings below.

Outstanding 

### Is the service caring?

The service was caring

Details are in our Caring findings below.

Good 

### Is the service responsive?

The service was exceptionally responsive

Details are in our Responsive findings below.

Outstanding 

### Is the service well-led?

The service was exceptionally well-led

Details are in our Well-led findings below.

Outstanding 

# Inter-County Nursing & Care Services Rustington

## **Detailed findings**

### Background to this inspection

**The 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 checked 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.

**Inspection team:** One inspector and an expert by experience carried out this inspection. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. The expert had personal experience of supporting older people living with dementia who used community services.

**Service and service type:** This service is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to older adults. Not everyone using Inter-County Nursing and Care Services: Rustington, receives regulated activity. Care Quality Commission [CQC] only inspects the service being received by people provided with 'personal care' such as help with tasks related to personal hygiene and eating. Where they do, we also take into account any wider social care provided.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

**Notice of inspection:** We gave the service 24 hours' notice of the inspection visit because it is small and the registered manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in. This inspection took place on the 29 November and 3 December 2018.

Inspection site visit activity included a visit to the office location on 29 November 2018 to see the registered manager and office staff; and to review care records and policies and procedures. We visited people in their own homes on 3 December 2018.

What we did: We reviewed information we had received about the service. This included details about incidents the provider must notify us about. We sought feedback from the local authority and health professionals who worked with the service. Due to technical problems, we did not ask the provider to complete a Provider Information Return [PIR] on this occasion. 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. We took this into account when we inspected the service and made the judgements in this report.

Before, during and following the inspection we reviewed and spoke with;

- Three people, their care records and risk assessments
- Four staff, including their recruitment, training and supervision records
- Records of accidents, incidents, complaints and compliments
- Audits, quality assurance reports and surveys [including those prepared by health commissioners]
- Observed and spoke with five care staff while they provided support to two people in their homes
- Spoke with the registered manager, quality assurance manager, a senior care supervisor and five care staff
- Spoke with ten people using the service and four relatives
- We also spoke with a West Sussex County Council contracts officer and a specialist palliative care nurse from a local hospice

# Is the service safe?

## Our findings

People were safe and protected from avoidable harm. Legal requirements were met.

At our last inspection we found that people received a 'safe' service. At this inspection the service continued to be 'Good'.

Systems and processes:

- There were safe systems that ensured people were safeguarded from abuse. Staff were trained and understood when to raise safeguarding concerns outside of the organisation.
- The management team maintained electronic monitoring records of all communication with professionals outside of the agency. This evidenced that proactive action was taken to safeguard people.
- People told us they received their care on time and that no calls were missed. The staff contacted people if they were running late. One person said, "Never been left without anybody. They [staff] ring if they are coming late."
- A person's relative told us, "They [staff] are on time, never been late and sometimes they are early. If they are running late they phone to say. No missed calls."
- Without exception the people we spoke with stated they felt safe and free from any bullying or discrimination when staff visited them. One person said, "I have never felt unsafe with the carers." Another person told us, "Definitely [safe], I have a lifeline and they always check I have got it on."
- People's relatives also said that the service was safe. One person's relative told us, "If I needed to go out [and leave person at home] when the carer comes in, I feel it is safe for me to do so."

Assessing risk, safety monitoring and management:

- Risks to people were assessed in detail with mitigating action taken to reduce risk where possible.
- For example, risks associated with taking blood thinning medication were clearly recorded in one person's care records. This ensured that staff understood the importance of avoiding certain foods in the person's diet which may react negatively with the medicines prescribed.
- Other risks such as those associated with moving people safely and managing behaviours that may challenge were clearly recorded and understood by staff. Staff received training to support them to understand these individual needs for people and how best to manage these positively.
- Accidents and incidents were recorded, with analysis completed by the registered manager. This ensured that any trends were identified. Corrective action was taken to prevent accidents and incidents from happening where possible.
- The provider also completed analysis of all incidents and risks across the business on an annual basis. This provided further assurances, monitoring and management of any identified risks for people.

Staffing levels:

- There were enough staff to provide a regular, consistent service for people. One person told us, "We have regular people most of the time. Mostly we have people we know."

- One person's relative said, "We have a rotation for four carers and there is no deviation really from this. We have one main carer for three or four days."
- Staff were recruited safely with appropriate checks completed which ensured they were of good character.
- The registered manager had a comprehensive recruitment and induction process which provided further assurances that the 'right' staff were appointed.
- The registered manager told us that new staff completed, "Shadow visits and medication competencies with the people they will be supporting." This ensured staff were introduced to people before they became their regular carers.

#### Using medicines safely:

- Medicines continued to be managed safely. Two people stated they received support with their medicines. They told us, "They [staff] do it [medicines] well, they put cream on my back" and "The carers give me my prescription medication. I am happy with the way they do this."
- Staff were trained to give people their medicines safely. Records contained up to date information about the medicines people needed.
- Senior staff completed observed practice for staff who gave medicines to people. This ensured that staff were competent to give medicines safely.
- When people were prescribed 'As required' medicines, a protocol was recorded so that staff knew when the person may need the medicines. The registered manager was updating the protocols at the time of this inspection, to include more personalised detail for each person.

#### Preventing and controlling infection:

- Risks associated with infection were safely managed. Staff used protective equipment such as gloves and aprons appropriately. People confirmed this.
- Staff had completed food hygiene training. This ensured that people were protected from risks associated with unsafe food hygiene practice.

#### Learning lessons when things go wrong:

- Lessons were learned. The registered manager ensured that national safety alerts were placed in people's files when the subject matter was relevant to them. These alerts contained information to ensure that equipment was used safely. This provided staff with information that helped them to maintain the safety and welfare of people.
- A reflective practice approach was adopted by the management team which encouraged discussions when incidents had happened. This enabled the team to learn when things had gone wrong.
- Reports were sent to the provider monthly. These contained analysis of any incidents, accidents and safeguarding raised. This ensured that learning was shared across the organisation.

# Is the service effective?

## Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection this key question was rated as 'Good.' At this inspection there were improvements and people now received a service that provided 'Outstanding' care.

People's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law:

- People's needs were assessed in great detail when they started to receive a service with the agency. One person's relative said, "The manager is extremely good. She came and did an assessment at the beginning."
- Care plans consistently contained detailed, personalised information to help staff to support each person as an individual. Records clearly showed who the person was, with information about their backgrounds, preferences and choices.
- The National Institute for Clinical Excellence [NICE] states that, "Older people using home care services have visits of at least 30 minutes."
- Care was provided to people in line with national best practice guidance. People received 45-minute visits. The registered manager stated that they ensured visits were this length of time to ensure that people "weren't rushed" and "received good quality care."
- Evidenced based techniques were used to support the delivery of high quality care for people. The registered manager and provider worked together to review and ensure that outcomes for people were delivered in line with NICE standards. The provider self assessed their compliance against the NICE standards and achieved '100%' compliance.
- People were treated fairly regardless of age, gender or disability. Staff received training to help them to understand how to positively support people equally regardless of any diverse needs.
- Technology was used to support people to maintain their independence and safety at home. This included the use of assistive technology such as 'lifelines' that staff regularly tested for people to ensure they were in good working order. Equipment such as lifelines, support people to stay safe and independent in their own home for as long as possible.
- People knew when carers were coming to see them. One person's relative told us, "They [staff] let her [person] know who is coming and when. They also email me."

Staff skills, knowledge and experience:

- Staff recruitment was developed around the needs of people who used the service.
- New staff were recruited using a 'values based' approach. This ensured they had the required and relevant 'softer' skills as well as the more practical skills in their roles. This also ensured that new staff could be 'matched' to the needs and preferences of people who used the service.

- The registered manager actively encouraged and developed staff to build on and improve their skills. Staff who had consistently demonstrated they were 'exemplary role models' for other staff had been selected to join the organisations 'mentor programme' and to take an active role in, 'supporting others to be the best that they can be.'
- Staff received regular training in subjects that were considered mandatory by the agency and best practice national guidance. Training for moving and handling, medicines management and food hygiene was provided for staff.
- Specific training for staff to meet people's individual care needs was also provided. Specialist training for the management of more complex needs and equipment was provided by a healthcare professional.
- Staff received regular support, supervision and observed practice which ensured they were competent to work with people and provide the care people needed, safely.
- The management team sent regular messages to the staff to update them when things had changed. This ensured that their knowledge was kept up to date.

Supporting people to eat and drink enough with choice in a balanced diet:

- The provider used creative and innovative ways to ensure that meals prepared for people looked as attractive as possible.
- Staff were involved and put together a booklet called 'Meals in Minutes' which is now issued to all staff for reference. This supported staff to prepare attractive meals for people.
- The registered manager had developed strong relationships with a local care home. As a result of this, people had been invited to have their Christmas meal at the care home.
- People were supported with enough to eat and drink. Staff asked for people's preferences when preparing meals for them.
- Providing a service that was what people wanted was important to the staff. One person said, "They [staff] make cups of coffee for me, they do it just how I like it."
- Staff were seen to continually check with people for their preferences at meal times.
- People with more complex care needs were supported to eat their meals with staff assistance.
- Advice and guidance was sought from appropriate professionals to support people with their dietary needs. This was followed in practice by staff.
- Another person said, "They [staff] cook my meals for me. They do them particularly well. I have chicken, steak, all sorts and they serve it very nicely. I provide the food and they cook it. They do encourage me to have a varied diet."

Supporting people to live healthier lives, access healthcare services and support and staff providing consistent, effective, timely care within and across organisations:

- People experienced very good healthcare outcomes and were supported by staff to access healthcare services as they needed them.
- Staff supported people to receive the care and treatment they required.
- One person said, "Occasionally they [staff] take a letter to the surgery. I feel they would help in other ways if necessary." Another person said, "They [staff] do extra things like drop my prescription in on the way to the next visit or take letters to the post box."
- Care plan and office communications records showed that the management team regularly contacted healthcare professionals. The registered manager described in depth the different professionals they liaised with for people's healthcare needs.
- The provider had developed very positive links with professionals and worked closely with health and social care professionals and commissioners to provide six week 'one-call' short term care for people when they were discharged from hospital.

- The 'One-call' contracts and staff involvement enabled people to return to their own homes with the right care and support. This enabled people to regain their independence where possible.

Ensuring consent to care and treatment in line with law and guidance:

The Mental Capacity Act 2005 (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 helped to do so when needed. When they lack mental capacity to take 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). If a person is living in another setting, including in supported living or their own home, it is still possible to deprive the person of their liberty in their best interests, via an application to the Court of Protection. We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Where people did not have capacity to make decisions, they were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. The provider met the legal responsibilities under the MCA legislation.
- The registered manager had completed mental capacity assessments and best interests' decisions appropriately. People's representatives were involved in decisions about their care when they had legal decision-making powers to do so.
- The registered manager was confident about following the MCA and understood the principles clearly. They worked proactively and engaged with external stakeholders to ensure that outcomes for people who lacked mental capacity were very positive.
- A very positive example of this was reviewed during the inspection. The registered manager and care staff had worked hard to protect a person's rights and ensured they remained at the centre of their care throughout their liaison with a number of different agencies which included social services, solicitors and health professionals. Due to the involvement and engagement of the provider, the person was enabled to stay in their own home and not moved to live in a care home against their wishes.
- Staff consistently sought consent appropriately from people.

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

At our last inspection we found that people received a Caring service and we rated this key question as 'Good.' At this inspection the service continued to be 'Good'.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported:

- People were treated with kindness and respect by a dedicated and compassionate staff and management team.
- People said that staff treated them very well. We observed staff treated people with utmost care and empathy.
- One person told us, "I think they are really good helpers and become good friends. I am grateful for their companionship and helpfulness." Another person said, "If I have down day, they are doubly good. They make me a cup of tea and I call them my angels."
- Staff communicated with people in their preferred ways and in line with people's needs. This ensured people were treated fairly, regardless of any 'protected characteristics' such as sensory loss or disability, including dementia.

Supporting people to express their views and be involved in making decisions about their care:

- Staff were allocated to people based upon their qualities. The registered manager told us how they chose certain staff to work with people as they knew they would be a good "match."
- The staff rotas were managed accordingly to ensure that as far as possible people received care from carers they knew well.
- People said they received a rota so they knew who was coming to visit them. One person said, "I get a rota usually on the Friday from the following week, so I know who is coming to me. Sometimes they may have a change, it doesn't happen very often. I am very satisfied with how they run the agency."
- Staff had time to care for people and time to listen sensitively when they wished to talk. One person's relative said, "They help her and take time to chat to her which is really nice."
- One person told us, "They [staff] are caring. They move at the speed I want to move, they are aware of this all the time."
- People were encouraged to express their views about the care they received. Staff listened with patience and understanding.
- Staff continually checked with people that the care they were given was right for them and being done in their preferred ways.

Respecting and promoting people's privacy, dignity and independence:

- Staff respected people's privacy and dignity. One person said, "Very much so [respectful]. I have a curtain across the bath, the carer draws the curtain while I shower and passes me the towels. They are very good about this [privacy]."
- Independence was actively promoted and maintained for people. One person's relative said, "Yes they [staff] encourage independence. My relative has improved since receiving their care. They are encouraging him [person] to shave himself."
- One person said, "She [staff] walks with me for half a mile. Keeps me from seizing up."
- People's private information was kept confidential. Records were held securely in the office location. The management team and staff had received training to update their knowledge about the new data protection law.

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs.

At our last inspection people received a Responsive service and this key question was rated as 'Good.' At this inspection we found that the service had improved and people received an exceptionally Responsive service. We rated this key question as 'Outstanding.'

Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Personalised care:

- People received an exceptionally personalised service that was very responsive to their individual needs. The agency staff and management team worked with dedication and passion to respond to each person and family's personal situations and often went above and beyond to achieve this.
- People's care and support needs were always placed at the heart of the service.
- A person's relative provided a 'five star' rating on an NHS website and said, "The care staff are all outstanding. Their skills in recognising my father's foibles and difficulties without complaint, ensuring that they were promoting his independence and liaising with others to assist the best outcome was outstanding."
- We observed three staff supporting one person with complex care needs. The agency had worked with external health and social care professionals to ensure the care they provided met the complex needs of the person and worked well for their family. There had been a number of previous care providers who were not able to accommodate the person's and family's needs. The care and support provided by Inter-County Nursing and Care Services had been very successful and the family were extremely happy with the service they received. The person's relative told us, "We feel lucky to have this agency, so we're happy."
- People were involved with the review of their care plans. The registered manager told us that when people first start to receive a service with the agency, "We have a 'review system.' We call them [people] after the first visit to check everything is ok and every three months thereafter." People confirmed this. One person said, "The manager comes to do the review she is very helpful."
- Staff responded and went the extra mile to support people's needs in relation to 'protected equality characteristics' such as visual or sight impairment. The service had taken innovative steps to meet people's information and communication needs.
- People's communication needs were identified, including those related to protected equality characteristics such as dementia or sensory loss. Staff identified, flagged, recorded, shared and met the information and communication needs of people with a disability or sensory loss, as required by the Accessible Information Standard.
- The Accessible Information Standard (AIS) was introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand. It is the law for adult social care services to comply with AIS.
- Technology was used to support people's independence. The registered manager described a positive

example of how staff had supported one person to "listen to" their television because they lived with visual impairment. Staff had provided the person with the skills to use their television equipment to switch on the 'audio description' function. This enabled the person to hear full descriptions of the programmes they were listening too which enhanced their enjoyment and enabled them to continue to engage with their chosen preferred programmes.

- The registered manager told us about a local organisation; '4sight' which they had referred people to when they lived with visual impairment. The organisation supported people to access local community social events, with support from volunteers. They said, "Some [people] feel isolated. One person said they were lonely and depressed, so I suggested it."
- Staff demonstrated compassion and understanding of people's needs when they lived with a sensory loss. Staff were often 'matched' to people when they shared common interests. The registered manager said this was how they promoted positive relationships and outcomes for people.
- We observed two staff supporting a person with visual impairment in their home. One staff member said to the person, "When I go home later I'll find a book with larger print." Staff explained how they take books to the person to read as they have a mutual interest in authors. The person confirmed this.
- Care plan records were provided in accessible formats to meet people's identified communication needs.
- One person's care plan who had a visual impairment was printed in large font on yellow paper. This was in line with nationally recognised best practice for communicating using accessible formats for people with visual impairment.
- Staff supported one person by writing a 'thank you' card for them as dictated by them. They were unable to write this for themselves due to physical disability. The staff member was patient and took the time to listen to what the person wanted to express. This was very important to them.
- During our telephone calls to people in their homes, a member of staff supported and facilitated a person who lived with a hearing impairment to be able to participate in the call. Staff answered the phone and informed us the person was "hard of hearing." Staff asked the person if the phone had a facility to increase the volume, this enabled us to hold a short telephone interview with the person to include their views of the service they received.
- The service went the extra mile for one person by establishing that they had a love of horses after owning and working with them throughout their life. A staff member arranged and supported the person to visit the 'Ferring country centre' where they were welcomed by staff and shown around the stables. The person was able to stroke the horses and watch a riding lesson. This was very much enjoyed by the person. So much so that another trip was being arranged by staff to visit the centre again.
- Staff received supervision, observed competency assessments and mentorship from a senior care team supervisor to support them in their roles. Staff felt very supported by the management.

Improving care quality in response to complaints or concerns:

- There was an open and transparent culture to complaints and people were positively supported to access the complaints policy and procedure.
- People and relatives stated that they knew how to raise a concern or complaint and felt comfortable to do so if necessary. Three people had raised a concern / complaint and were happy with how it had been handled. One person told us about their positive experience of how they had contacted the office when they had a concern and how the office staff had taken action to comply with their wishes.
- One person's relative had raised an informal complaint with NHS commissioners. This had been followed up by the commissioners who had completed a quality monitoring visit to the service. A 'provider assurance checklist' was completed. This indicated that the concerns were not founded. It was recorded that the registered manager was, "Very knowledgeable, transparent and helpful."
- People confirmed they had a complaints policy which was fully explained to them. One person told us, "There is a thing on the bottom of contract [complaint procedure] and when I started [with the agency], the

head [manager] from the office came and explained to me what to do if needed."

- Complaints were logged in a 'complaints book' in the office. This showed actions that had been taken and evidenced changes that were made to ensure satisfaction of service for people and their relatives.
- Complaints were analysed by the provider on an annual basis which provided additional oversight and feedback regarding the management of complaints.

End of life care and support:

- The registered manager and staff displayed an exceptionally compassionate and empathetic approach towards people and their loved ones at the end of their lives. Staff were supported by the service with compassion and understanding when people they had cared for had passed away.
- The registered manager wrote individualised 'thank you' letters to staff to acknowledge their personal contribution when they had supported people at the end of their lives. One letter said, "I [registered manager] am writing to thank you [staff] personally for the excellent care you gave to [person] during her illness and particularly over the past few weeks of her life." They also said, "the standard of care [person] received was of the highest quality and sets a precedent in all we aim to achieve." They ended the letter telling the staff member how they were "extremely proud" to have them as part of their team.
- People's relatives left five-star ratings of a service that provided, "Excellent care, professionalism and compassion." We reviewed the feedback on the NHS website regarding Inter-county nursing and care services Rustington. One person's relative said they, "Would love to thank Inter-County for all the care and love given to our mum while going through the last stages of cancer. Every day mum was greeted with a warm and caring carer who looked after her as if they had known her all their life and mum felt at ease and cared for. My biggest thanks are to one member of staff who for most of mum's care was there and personally for us on the day she died and looked after us and gave support when we were so scared. Words are not enough to thank you."
- A further relative who had experienced compassionate support at the end of their relative's life left a five-star review on the NHS website which said, "The care staff that attended my mother were exemplary at all times." They also said, "Anecdotal reports of care services do not reflect the high standard of professionalism and competence we have experienced as a family from Inter-County Nursing & Care Services. I would highly recommend them."
- Staff received training in death, dying and bereavement. End of life 'champion' roles were being developed by the registered manager. These 'champions' would have lead roles and specific training and expertise to support staff and people at the end of life. They would support and develop appropriate advance care planning and have understanding of pain management and other symptom relief.
- The registered manager had attended an end of life 'symposium' which helped them to better understand palliative care services available for people. This included the 'end of life care hub' ['echo'] service. The 'echo' service supported people, their relatives and professionals regarding end of life care guidance and advice. How to avoid hospital admission, when people had expressed their wishes not to be admitted to hospital to die and advance care planning for the end of life was also addressed.
- People's wishes for their end of life care were recorded, including whether it was in their best interests to be resuscitated or not. This meant that people could die with dignity. This is known as a 'DNACPR' which means; Do Not Attempt Cardio Pulmonary Resuscitation.
- Staff knew which people had DNACPRs so that people's wishes were known and respected.
- The agency received very positive feedback from relatives of people who they had supported at the end stages of their lives.
- The registered manager told us, "We have started a bereavement support service. We phone relatives who are left, a couple of weeks after the funeral to see if they are ok. We have sent information leaflets through to people [about bereavement support]." We saw an example of this. This provided those who were bereaved following the death of a loved one with compassionate support and empathy which helped them to access

other services that could provide them with help or advice.

- When people received care at the end of their lives, their care plans clearly detailed their emotional and psychological needs and wishes as well as physical needs and any pain management required. People's preferences were clearly noted. For one person, this included the importance of staff not talking about the war, as this may cause distress and anxiety to them.
- Specialist palliative healthcare professionals' assessments completed by continuing healthcare nurse assessors were used by the agency to develop appropriate end of life plans for people. This showed that the agency worked closely with appropriate end of life specialists to ensure people received the care they needed and wanted at the end of life.
- The registered manager worked proactively and in partnership with external healthcare professionals at the end of people's lives. A palliative care nurse from a local hospice told us that the staff were always, "Courteous, polite and helpful" and "Have the patients best interests at heart."

## Is the service well-led?

### Our findings

Well-led – this means that service leadership, management and governance assured high-quality, person-centred care, supported learning and innovation, and promoted an open, fair culture.

The service was consistently well-led. Leaders and the culture they created promoted high-quality, person-centred care. At our last inspection we rated this key question as 'Good.' At this inspection we found that the service had improved to 'Outstanding.'

Planning and promoting person-centred, high-quality care and support and how the provider understands and acts on duty of candour responsibility:

- Without exception everyone we spoke with considered the service to be well-led and the manager to be very pleasant and approachable.
- The registered manager continuously went above and beyond in their role to make a real difference to people's lives. They ensured they maintained their knowledge and skills in their role.
- The registered manager worked openly and exceptionally transparently. They understood their duties in line with 'Duty of Candour.' This Regulation aims to ensure that all providers act honestly and openly in their daily practice. It was evident that the registered manager took this very seriously and ensured they fulfilled this duty.
- Since our last inspection, the registered manager had been nominated for and won a 'Registered Managers Award' presented by the West Sussex Care Accolades. Award recipients included people who go above and beyond in their work by planning activities for their residents and providing the best level of care possible.
- People and their relatives consistently said that the service was very well-run and well organised. People felt they received a high-quality service. One person's relative said the care provided was, "exactly what she [person] requires."
- People's relatives said, "It [agency] is well run and the schedule is very well organised" and "I feel it is a very good service which is very well managed."
- One person's relative said that the, "[Registered manager] does an exceptional job of recruiting and retaining high quality careers. Their experience has been invaluable. They even identified that my father's support socks were too tight. Something not identified by the doctor."
- One person told us, "It is very good in the organisation of the service." Another person said, "I think it is very well run, I am satisfied with the service." A further person said, "They are very well organised."
- People were so positive about the service they received that they said they would recommend the service to others. One person told us, "I would recommend the service. I would say you will find they are very good in organising and the attentiveness of the ladies who come here. They are very good."
- The aims and objectives of the service people received were clear at management and staff levels across the organisation.
- People consistently received a well managed and reliable service that met their expectations.
- The management team worked professionally and openly with external agencies to coordinate positive outcomes for people.
- Staff demonstrated a very strong level of commitment and dedication in their roles and were very happy

working for the agency.

- In a recent staff satisfaction survey, staff stated that the agency was, "professional", "caring", "excellent" and "engaging."
- Staff were appreciated and valued in their roles. The registered manager sent 'thank you' letters to the staff for particular work completed.
- In one letter the registered manager had taken time to write to a member of staff, "You are a valued member of staff and I am extremely proud to have you as part of the Inter-County team!"

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements:

- The management team had very effective oversight of what was happening across the service. When we asked questions about the service they replied promptly with very in-depth responses. This demonstrated a thorough and very thorough knowledge and understanding of the business.
- Governance arrangements were very organised and effective. Themes and trends were clearly identified and corrective actions taken proactively when this was required.
- The provider also reviewed the quality and safety of the service on a monthly basis via a report sent to them by the registered manager. The report provided clear oversight of any accidents, incidents and other key areas of service monitoring.
- A full annual audit of quality and safety was completed by the provider, with a detailed report and recommendations for ongoing improvement shared with the registered manager.
- The registered manager had completed a very detailed action plan "to improve the service" which contained innovative service developments they planned to introduce over the coming year. This included improved links with local health commissioners and ambulance services to reduce hospital admissions for people. Additional methods for obtaining feedback from people and ways of accessing the community and local resources available, which included 'talking books' were also recorded within the plan. The action plan had been structured under the Care Quality Commissions [CQC] key questions of Safe, Effective, Caring, Responsive and Well-led. This demonstrated their clear understanding of regulatory requirements.
- Without exception, people and their relatives spoke very highly of the management and staff at the agency. One person said, "The manager has been there for a very long time. She is very efficient and approachable."

Engaging and involving people using the service, the public and staff and continuous learning and improving care:

- People's views of the service they received were sought regularly. This was done during structured care plan reviews, surveys and meetings.
- Staff were encouraged to voice their opinions using staff surveys and an 'open door' management approach. Staff came to the office unannounced and the registered manager ensured they were available to listen to any staff concerns and to provide solutions to address these.
- Staff felt very supported by the management team and enjoyed working as part of a dedicated team.
- Staff comments within the recent survey [September 2018] included, "Simply excellent" and "The service is excellent, improvement not required" and "I am very proud to have worked alongside [registered manager] for 19 years." Another staff member said, "I have recommended a friend [to work for the agency] as I know she will get support."
- A further member of staff said, "I love working for Inter-County Rustington. We have a great manager. She is always around if you need to have a chat and is very encouraging and always gives her best and highest commitment."
- A new member of staff said, "I am very happy in my new job role. All lovely, kind and caring. Enjoy being part of this team."

- There was a strong, positive culture of continuous learning and development. The registered manager had introduced reflective learning sessions. These were used as opportunities to reflect upon any incidents and to ensure that key learning points were captured.
- The registered manager had made strong links with the community and ran charity and fund raising events which they used technology and online social media sites to advertise. This ensured that information was shared more widely across the local community.

Working in partnership with others:

- The registered manager worked exceptionally well with external health and social care professionals to ensure that people received a seamless service.
- There was a very open and transparent approach across the service and management team.
- Multidisciplinary [MDT] meetings were organised in an open and transparent manner by the management team when these were required. This ensured that communication was clear between the agency, the staff, people who received care and commissioners.
- Minutes of an MDT meetings were provided to us during the inspection which showed clear actions arising from MDTs to ensure that the best possible care was provided to people in a joined up way.