

Midland Care (UK) Ltd

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Inspection report

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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?

Good 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service

Midland Care (UK) Ltd provides personal care and support to people in their own home. The agency provides care and support for older people, adults with disabilities and people who live with dementia. At the time of our inspection visit, Midland Care UK provided services to 24 people.

People's experience of using this service and what we found

People told us the registered manager and staff were very kind and caring and very good at their jobs. They said they felt safe with their care staff and trusted them. People and relatives were consistently complimentary about the kindness of the staff and the reliability of the service they received. We were told of occasions where staff had gone above and beyond what was expected of them.

The registered manager was very passionate about supporting people who lived in their own home. The leadership and culture of the service was to provide a high-quality personalised support to people. Staff were caring kind and enthusiastic about their role.

Staff had been recruited safely, well trained and supported to provide the best possible care to people. Staff were committed to delivering inclusive personalised care and strongly focused on supporting people's diverse needs and preferences. Staff spoke enthusiastically and passionately about how they provided people with high quality, person-centred care. Staff turnover was low and people told us they were supported by staff who knew and consistently met their needs. The service liaised with health and social care professionals.

People's care and support was planned in partnership with them. They told us they felt consulted and listened to about how their care was delivered. They said staff were respectful, friendly and reliable. They were happy that they received care and support from staff that they had got to know. People told us they had never had a missed call and staff attended the calls at the appropriate time and stayed for the full duration of the call.

The registered manager continued to be very passionate about supporting people who lived in their own home. They used a variety of methods to check the quality of the service and develop good practice. The leadership and culture of the service was to provide a high-quality personalised support to people. Staff had a clear vision of what was required of them and were focused on doing so.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection.

The last rating for this service was Outstanding (published June 2016)

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 effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was exceptionally well-led.

Details are in our well-Led findings below.

Outstanding ☆

Midland Care (UK) Ltd

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Midland Care (UK) LTD is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to older people, younger people with disabilities and people living with dementia.

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 48 hours' notice of the first day of the inspection visit because we wanted to speak with people using the service and the registered manager. We planned the second day of the inspection around the leave commitments of the registered manager. Site visit activity started on 27 June 2019 and ended on 10 July 2019. We visited the office location on both days to see the manager and office staff; and to review care records and policies and procedures. Calls to people and relatives took place on 01 July and 11 July 2019.

What we did

Before our inspection we completed our planning, tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports. We also sought feedback from partner agencies and health and social care professionals.

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection, we spoke with two people who received support from Midland Care UK limited and twelve relatives. We spoke with five members of staff including the registered manager, senior care and care staff. We also spoke with eight health and social care professionals.

To gather information, we looked at a variety of records. This included care plan and medicine records related to four people. We looked at information in relation to staff training and supervision records. We also looked at other information related to the management of the service including audits, surveys and meeting minutes. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with the staff that supported them. One person told us, "They [care staff] are good. I feel happy and safe with them."
- Staff were trained and knew how to recognise and report incidents of harm and poor care. A staff member told us, "If I had any concerns about a person I would go to the manager and they would do something. I know that concerns would be reported to CQC and local authority."
- The provider had safeguarding systems and staff had received training. They were aware of their responsibility to report any concerns and explained how they would make sure people were protected from harm or abuse.

Assessing risk, safety monitoring and management

- The registered manager was proactive in managing risk to ensure people were safe.
- Risk assessments provided information and guidance to staff. Staff were knowledgeable about potential risks to people and how to support people safely.
- The provider had procedures for staff to follow should there be an emergency. In addition, on call support was always available to assist and advise as needed. Staff were provided with safety guideline information to refer to when doing extra tasks. For example, when using a microwave, carrying out laundry and cleaning tasks to ensure their personal safety and the safe use of equipment.
- A relative told us about an emergency that a staff member had to deal with. The regular staff member was on holiday and another staff member was covering. When they arrived at the house they were faced with an emergency. The relative told us, "The staff member was amazing. They were calm and knew exactly what to do. I can't praise their actions enough."
- Following the initial care package assessment and with people's consent referrals were made to West Midlands Fire service for advice and support on fire safety including installation of smoke detectors.
- Staffs personal safety and wellbeing whilst carrying out their role and often working alone had been recognized by the registered manager. Staff were provided with a first aid kit and personal alarm for their safety.

Staffing and recruitment

- There were sufficient, suitably recruited staff to meet people's needs. The provider followed safe systems for the recruitment of staff. New staff had checks carried out on them before they were employed. This reduced the risk of appointing somebody unsuitable.
- There was low staff turnover. Staff were positive about the management team and their role. A staff

member told us, "I really love my job."

- People and relatives told us there were enough staff to provide safe care at the time agreed. Staff told us they had enough time to support people safely, without rushing people's care and there were sufficient times to travel between calls.

Using medicines safely

- Medicines were managed safely and in line with good practice guidance. People felt staff knew how to support them with their medicines. One relative told us, "They [person] always get their medicine on time."
- Staff had gone over and above their role on occasions. A person had received a visit from the GP and was unable to pick up the medicines that had been prescribed for them. With the registered manager permission, the staff member went over the allocated time and picked up the medicines, so the person could start the course of medicines promptly.
- We looked at a sample of medicines records and audits. These showed medicines were given as prescribed.
- Staff told us they received medicines training and had regular checks to ensure they had the skills and knowledge to give medicines safely.

Preventing and controlling infection

- Staff had received training and followed infection control practices to reduce the risk of cross infection. They understood their responsibility in this area and were provided with supplies of disposable gloves and aprons, personal protective equipment (PPE)
- People confirmed staff used PPE when providing support. This helped reduce the risks of cross infection.

Learning lessons when things go wrong

- The registered manager reviewed accidents and incidents, so lessons could be learnt, and the risk of similar incidents reduced.
- The registered manager was aware of their responsibility to report any concerns to the relevant external agencies.
- Staff learnt from situations that did not go as well as they should. Staff told us they discussed situations as a team and were always thinking about how to do things better for people.

Is the service effective?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- The registered manager recognised the importance of investing in the personal and professional development of the staff team and was committed to ensuring that this would be provided. They told us, "People will have better outcomes when they have well trained staff with updated training."
- Staff were provided with training relevant to their role and continually improve their skills and knowledge. Some care staff had progressed to achieve qualification and credit framework (QCF) level five in care. A staff member told us, "As a staff member you are supported to do your best, [registered manager's name] wants you to strive in your work and be the best you can be in your role." A staff training and development programme by an external provider was due to commence in August 2019 with a focus on owning and driving performance.
- The registered manager and senior staff provided support and supervision to staff to help them provide effective and up to date care. Staff told us the managers were approachable and available for advice. All staff spoke highly of the excellent support they received from the registered manager. A staff member told us, "The registered manager is so supportive we can go to them at any time, about anything."

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

- The registered manager carried out assessments of people's needs, fully involving the person and their representatives. The pre-admission process was person-centred and made sure the service could meet the person's needs.
- The registered manager reviewed care records and updated them with people when changes occurred, so they identified people's current needs. People's care and support was planned proactively and in partnership with them. They told us they felt consulted and listened to about how their care was delivered. One person told us, "They [care staff] always talk to me about my care and ask me what I need."
- A health care professional told us that during a care review, a family member spoke very positively about the service and staff worked well with the person and at their pace. Another health care professional told us, "I have had several packages of care set up through Midland Care UK. The registered manager always visits people with their carers and has the ability to match carers to people. They are always very thorough in the assessment process and will always come back to me if they feel the carers would be able to meet the persons care needs within the time we have given to the company. However, they are always happy to try things for a few days and will come back to me again if extra time is needed. All the families who have used this agency express how professional the company is."

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat a healthy diet. Staff supported some people to prepare their own meal and

reheated prepared meals for some people.

- Care staff knew people's specific dietary requirements and records were kept of the support provided at meal time.

Adapting service, design, decoration to meet people's needs

- The registered manager carried out risk assessments of the person's home environment to make sure everyone was safe. The registered manager told us that people and staff safety was a high priority of the service.
- The registered manager made referrals to health care professionals for advice and support on equipment in the house to promote people's safety and independence, for example, where appropriate referrals were made to the occupational therapy service so that aids and adaptations could be installed for people to promote their safety and independence. Healthcare professionals we spoke with confirmed this.

Supporting people to live healthier lives, access healthcare services and support; Working with other agencies to provide consistent, effective, timely care

- We saw people were supported to access health and social care professionals in a timely manner to help support their health needs. Staff told us they would call the GP or district Nurse on a person's behalf if needed. They also supported people where they needed assistance with equipment or other issues. Relatives confirmed this.
- The agency offered a service where they could support people to attend medical appointments if needed.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

- We checked whether the service was working within the principles of the MCA. The staff team provided care that was following the MCA principles.
- People had been asked for consent to decisions where they were able to give this.

Is the service caring?

Our findings

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

At the last inspection this key question was rated as outstanding. At this inspection this key question has remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- The registered manager was passionate about providing an outstanding service. Their enthusiasm and drive were effectively shared with the staff team. Staff were very caring, compassionate and kind. There was a strong person centred culture throughout the service.
- Staff had built open and honest relationships with people. People and relatives consistently spoke highly of the care and support they received. One person told us, "They are like family I can't fault the care I get." A relative told us, "The manager goes over and above in their role. They are very caring, and they follow up on things very quickly." Another relative said, "They [staff] are truly marvellous they are kind, patient and considerate. I don't know how I would manage without them. They always go over their time and do the little extras that makes [person's name] happy. They will put the vacuum around, put the washing in the machine. They seem to be able to see what needs doing and they do it."
- People told us about when staff had exceeded what was expected of them and carried out extra, thoughtful acts, not part of the persons care package and had improved the persons well being. For example, one person told us, "I wanted some clothes from the shop and I wasn't able to go out. [care staff members name] told me to show them what I wanted from the catalogue and they picked up all the clothes I wanted from the shop, and they did this for me in their own time. I was so pleased."
- Staff were able to give us many examples of where they had exceeded what was expected of them and had improved people's quality of life and well being. A staff member told us about a person who really wanted to go out to a restaurant for a meal and this was arranged. The staff member told us, "We took [person's name] them out for the meal this was not part of their care plan, it was something they had requested for a while and we made sure that they were able to fulfil this wish." Another staff member told us "One person I support really wanted a 'full English' breakfast cooked for them. There was not enough time in their care call to do this. However, the registered manager told us to do this when the person requests it and the provider pays the additional staff cost to do this. Staff told us the person was truly delighted with this and it was so important to them. Staff described how they had supported a person who had not been outside of their home for several months to go outside and experience the fresh air and garden and that this had greatly improved the persons sense of well-being and confidence.
- Staff demonstrated compassion and understanding towards people. A person had family overseas and had not seen their relative for over 30 years. Staff made contact through social media and a video call was arranged so they could speak with and see their family member. Staff helped another person with some research so they could reconnect with a friend that they had lost contact with. Staff carried out visit to people who had been admitted to hospital in their own time.
- Staff explained in detail how they supported a person living with dementia and the steps they took to

reassure the person and reduce the person's anxiety. They had developed a life story book with the person's family support to gather their memories, so staff could talk to them about their past, likes and interests. This showed great understanding of the needs of people living with dementia.

- People were consistently supported by the same members of staff, so they gained an understanding of people's strengths and needs. People told us this was important to them. One person told us, "I know who is coming each day, the staff are wonderful."
- Staff respected people's human rights. Staff received training in equality and diversity and as a result people's needs were respected and met. Staff had genuine and meaningful relationships with people they supported. People's preferences and the support needed to maintain their individuality, diversity and independence were recorded in their care plans and helped staff to deliver the right support consistently.
- The ethos of the service was about improving people's well-being and this was led by the provider. The registered manager supported people to enjoy leisure time and day trips out. Staff supported some events on a voluntary basis and the provider funded the transport. For example, a visit was arranged to the Lord Mayor parlour. The registered manager had also forged links with a local day centre where people could attend activities and day trips.
- The PIR told us about the ways the service promoted accessible ways of communication. This included employment of a multi lingual staff team and supporting people who were hearing impaired to use a text phone to communicate with family members.
- The registered manager offered a service [in addition to people's care package] that was advertised through their newsletter offering help if people had run low on shopping or medicines or needed support to attend a religious activity. They could contact the agency who would provide this support.
- People were also informed about the European Elections taking place and were offered care staff support to attend the polling station to cast their vote. This service was offered free of charge.
- People told us that their birthdays and religious festivals were celebrated by the agency and they had received a gift and a card. A person told us that this thoughtfulness on their birthday made them feel important and valued. Staff told us everyone was provided with a birthday card and present and a variety of religious festivals were celebrated including Eid and Christmas.

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

- The service had taken exceptional steps to ensure that people were supported to express their views. The agency was situated in the heart of a multi cultural area. The registered manager had ensured that people's whole care plan was transcribed into their own spoken language. For example, Urdu and Gujarati. Relatives said how important it was for their family member to be able to have their own care plan written in their spoken language and something that they had not experienced before. A relative told us that their family member had never experienced this before and they told us it made their family member feel valued. They told us, "We are very impressed with this aspect of the service." A person told us, "Every single day they [care staff] read my care plan to me and they also tell me what they have recorded in the records."
- The registered manager went over and above in their role to ensure that people were fully involved in their care. They carried out a face to face monthly quality home visit to all people in receipt of the service to proactively ask about their care, so that any issues arising were dealt with promptly.
- A health and social care professional told us they received very positive feedback about the service from family members. They told us that staff had involved [person's name] fully in their care and that care staff had the ability to see what needed doing and described a staff member as a, "Proactive carer."
- A newsletter was published quarterly for all people to keep them informed about the service for example, the outcome of the quarterly satisfaction survey. It also provided information about recruitment taking place and people and their family members were invited to be involved in the recruitment process.
- People could contact independent advocacy services if they wanted guidance and support or for an advocate to act on their behalf. The registered manager informed people about this in the service user guide

and stated that if needed, information would be provided on local advocacy groups and other support networks. This enabled people to have an independent voice.

Respecting and promoting people's privacy, dignity and independence

- During quality visits people were asked for feedback about how staff are respecting their privacy and dignity. The registered manager told us and staff confirmed observations of their practice ensuring staff were providing care with dignity and respect, were completed during this visit.
- Staff were passionate about respecting people's privacy, dignity and independence. They were supportive and sensitive to people's needs. People spoke positively about the way they were supported. Comments included, "I am very happy with the staff. They are very kind, and they are very respectful towards me when helping me have a wash."
- Staff were sensitive and respectful when talking about the people they supported. People's care records were kept securely, and their confidentiality respected.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People had a personalised care plan in place. People, their relatives or representatives played a key role in setting up the care plan. The registered manager met with people to discuss their care plan and kept information up to date.

- A relative told us that the monthly reviews were very good and ensured that any queries were quickly addressed. For example, they wanted a slight change in the time of the care call and this was promptly dealt with. A health care professional commented in a feedback survey, "Staff involve the person in their care and staff see what needs to be done."

From August 2016 onwards, all organisations that provide adult social care are legally required to follow the Accessible Information Standard (AIS). The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with a disability, impairment or sensory loss and in some circumstances to their care staff.

- The registered manager was aware of the accessible information standard. Staff knew the way each person communicated, and this information was in people's care plans. Care plans and service user guides had been translated into different languages
- People using the service did not always have English as their first language and the provider ensured they had care staff to support them that were able to speak and understand their first language. The provider was able to produce documents in languages other than English. We saw that care plans and service user guides had been translated for people into their first language. Relatives spoke very positively about this and it was an important aspect of the service.
- People told us communication from staff and management was very good and very frequent.

Improving care quality in response to complaints or concerns

- Complaints information was available for people and their representatives. People told us they could share any concerns with the registered manager and were encouraged to discuss any issues.
- A relative told us, "The manager is very good at communicating and gets back to you straight away if you have any queries about anything."
- Staff encouraged people to discuss any concerns, however minor so they could be responded to quickly.

End of life care and support

- Staff understood the importance of supporting people to have a comfortable, pain-free and peaceful end of life. At the time of our inspection no one was in receipt of end of life care. A relative had written to the registered manager following the passing of their family member, in their letter they stated, "Your staff should be proud of what they do and how they conduct themselves."

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as outstanding. At this inspection this key question has remained the same. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- At our last inspection the service was rated as outstanding in caring and well-led. At this inspection they continued to provide an outstandingly well-led service. The service had sustained their standards of excellent care over a period of time. Additional developments had taken place, for example, peoples care records were translated into their spoken language ensuring their full involvement in how their care is provided. People and their individual needs were at the heart of the service.
- The registered manager of the service (who was also the owner of the service) was an excellent role model for staff. The service had only grown slightly in size since our last inspection and the registered manager told us this was because people were at the centre of the service and they had wanted to maintain a personalised approach to care. They had continued to maintain excellent oversight of the service.
- The registered manager was passionate about supporting people living in their own homes. They had several years' experience of providing hands on care and had created and maintained a positive culture which placed people at the heart of everything the service delivered. When we spoke with the registered manager they told us that the culture of the service was to provide excellent services to people whilst also supporting other family members to ensure their rights to receive services were maintained.
- The registered manager was fully involved in all aspects of service delivery. They knew the needs of all the people that received a service and had regular contact with people and their family members. It was the providers policy to assess people's needs when they joined the service and ensured that they reviewed people's care each month. A relative told us, "The registered manager knows and fully understands my family members needs really well. They are completely on top of things."
- People and their relatives spoke highly about the care that was provided. A relative told us, "The agency is excellent at what they do, and they use their intelligence if something needs doing. Their job is not just about ticking all the boxes, its more." Another relative told us, "They truly are marvellous in what and how they do things and I really don't know now how I would cope without the support they provide. They are reliable and really understand [persons name] needs"
- The registered manager recognised the importance of having a team of enthusiastic and dedicated staff and had invested in staffs training and development. They encouraged and rewarded high performance and developed an open and supportive working culture. For example, staff were recognised for the extra effort they made to carry out their role and this was recognised with awarding certificates of achievement. Staff received financial bonuses for working public holidays and social events and festivals were celebrated with the staff team.
- Staff were motivated and enthusiastic about their jobs. They spoke highly of the registered manager and

told us they were provided with opportunities to grow and develop as a staff member. It was clear that the registered manager was a positive role model and inspired the staff to do their job well. A staff member told us, "We care for people how we would want our own family members cared for, that what the agency is about."

- Health and Social Care professionals spoke very highly of the service. One social care professional told us, "We found Midland Care (UK) Ltd, to be a very caring well led company, as a company they are always looking for better ways of delivery, most recently, in the way they translate, care plans, risk assessments, into the native language of the service user, this is a first, for me as an Assessor to observe."
- The registered manager understood the duty of candour responsibility.

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

- The service was very well organised. There was a clear and supportive staffing structure and lines of responsibility and accountability. Staff were competent and experienced. There was very low staff turnover and staff were highly motivated.
- The service had effective systems of structured internal audits and checks. These systems assisted staff to provide people with high-quality personalised care which met their needs and preferences.
- The service had effective systems in place to ensure robust oversight of their dispersed workforce. This included spot checks on staff, observations of staff providing care, reviews meetings, customer surveys, staff meetings and an electronic monitoring systems of care calls.
- The registered manager provided excellent leadership and staff were clear about their role. Staff felt included, confident and supported in making suggestions. A staff member told us about how they had been supported to learn and grow as a staff member and were provided with ongoing training and development opportunities.
- The management team followed current and relevant legislation along with best practice guidelines. They understood legal obligations, including conditions of CQC registration and those of other organisations. Staff were issued with pocket size information booklets to remind them of the principles of Mental capacity, Equality and Diversity and Safeguarding. This meant they had the information they needed to support them in line with best practice.
- Ratings from the previous CQC inspection were displayed in the office.

Continuous learning and improving care: Working in partnership with others.

- An adult social care professional told us, " The registered manager fully demonstrates and portrays the attributes of an excellence registered Manager, they are always willing to help other managers, shows full demonstration of how they support and develops their team and is always seeking further development opportunities for themselves and their workforce.
- The registered manager was shortlisted for a local area Excellence in care award category 'manager' and a staff member was a finalist in the award for best staff member.
- The registered manager focused on continuously reviewing and improving the service through monthly face to face reviews with all people. They were extremely proactive in encouraging people to discuss how their support could be improved and to make comments or raise concerns or complaints and this was promoted during the monthly reviews they completed for each and every person. A relative told us, "I never have a problem because the reviews keep on top of everything and we are always asked by the manager if we have any concerns at all, and I haven't because they are on top of things."
- The systems to monitor the quality of the service were robust and effective. The registered manager acted on any errors or areas for improvement to help further improve people's care.
- Following the achievement of outstanding rating by CQC in 2016 the registered manager was appointed Chair of a local authority group to develop a quality framework for providers. The registered manager shared

their experience with other care providers to improve quality rating of CQC reports. A health care professional told us, "The registered manager is a positive role model for other care providers, they have shared their knowledge and experience to inspire other providers." Another professional told us, they [registered manager] are engaging, helpful, proactive and supportive.

- A member of parliament from another European country had visited Midland care (UK) Ltd and emailed following the visit to say thank you for the opportunity to visit Midland Care (UK) Ltd and the visit had inspired them to provide outstanding services and they had invited the registered manager to visit their country and share their knowledge and experience.
- The registered manager was involved with Skills for Care [resource for organisations to help create a skilled adult social care workforce] in the development of a good and outstanding provider book. The registered manager also worked with The Learning and Development Pool [Learning resource for providers of care] to develop care staff training needs and to discuss skills gaps and how to address these.
- The provider had achieved accreditation with other recognised schemes. They had recently been awarded the gold in investors in people [IIP]. When we contacted IIP they told us that the service had demonstrated that people practice had been imbedded in their practice and was regularly reviewed. The gold award placed them in the top 24 % of care providers nationally who had applied for this award.
- The registered manager was involved with other organisations to ensure the service continued to provide a service based on current best practice. They were an active member of West Midland Care Association and attends all their events, meetings and training activities and takes part in local providers forum groups and attends meetings and leads some projects.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager was committed to engaging with people who received care from Midland Care UK Ltd. They had actively sought to create stronger links with the community to benefit people using their service.
- The service was involved in promoting community activities including fundraising events and social events. This encouraged people to enjoy companionship and reduce any feelings of isolation. For example, people were invited to events at Midland Care UK office and events in the community.
- People and their relatives were invited to be part of the staff recruitment interviews. A local college governor and ex councillor have also been involved in this process.
- People told us the management team proactively sought, listened to and promptly responded to the views of those involved with the service. This included using informal discussions, events, reviews, face to face and telephone checks and questionnaires.
- Staff told us the registered manager had an open door and listened to any suggestions, requests or concerns. They said they had regular newsletters, team and individual meetings and other opportunities to share ideas and updates on changes in people's care needs. Staff members related instances where the registered manager had gone over and above in supporting people in work related and personal issues. A staff member told us that when the weather was bad the manager arranged for staff without transport to be picked up and dropped off at people's houses. Staff told us they felt valued and they worked well as a team.

