

Mrs Beverley Jane Tydeman

Tydemans Homecare

Inspection report

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Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Good 

Overall summary

We carried out this inspection on 29 September 2015. The inspection was announced because the location provides a domiciliary care service. We wanted to make sure the manager, or someone who could act on their behalf would be available to support our inspection. Our last inspection to the service was on 22 October 2013. During the inspection in October 2013, the service was compliant in all areas we looked at.

Tydemans Homecare is a domiciliary care agency, which provides care and support to people in their own homes

on a short and long term basis. The agency offers people support with personal care, shopping and housekeeping tasks. During our inspection, we were only inspecting the personal care element of the service.

There was 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

Summary of findings

requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was present throughout the inspection.

People's medicines were safely administered and in a person centred way. However, the medicine policy was in need of updating to reflect staff often administered people's medicines rather than prompting or assisting. Records showed staff appropriately gave people their medicines, which were prescribed on a temporary basis. The system used did not always evidence this clarity with regularly prescribed medicines.

Formal supervision, to enable staff to discuss their work with a senior member of staff in a structured manner, took place on a six monthly basis. Staff regularly visited the office and received informal supervision with the registered manager every week. Details of these meetings were recorded in the communication book and signed off when read by staff. Staff told us this worked well and they felt valued and well supported. Staff received an annual appraisal and regular observational checks to assess and discuss their performance.

Staff received on-going training to ensure they had the knowledge and skills to support people effectively. Staff had a clear awareness of how to protect people from

harm. All staff were confident about promoting people's rights to privacy, dignity, choice and independence. They were aware of the ethos of the agency and demonstrated this in their everyday work.

The registered manager was passionate about offering people an individualised service. No care packages were accepted if it was thought they could not be met by staff. Staff were given travel time, so they were not late arriving for people's support. Their visits were manageable in the time they had available, as sufficient staff were employed. Staff did not feel rushed and there were no issues with missed calls. People were generally supported by the same staff at a time which was convenient for them. This enabled consistency and enabled staff to be familiar with people's needs.

People were very happy with the service they received. They told us staff were reliable and were rarely late. They were positive about staff and the organisation of the service. People knew how to make a complaint and were regularly asked for their views about the service.

People told us they felt safe and were well supported. People had a comprehensive care plan, which clearly demonstrated their needs, preferences and support required. People were involved in developing their care plan and had regular views of their care. There was a strong emphasis on enabling people to direct their care and to be as independent as possible.

Summary of findings

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.

Staff supported people with their medicines in a safe and person centred way. However, the policy was in need of updating to show staff were administering people's medicines rather than prompting or assisting.

People told us they felt safe. There were systems in place to keep people safe from harm. This included clear risk management and effective recruitment procedures.

People were ensured consistency and a reliable service, as there were sufficient staff to cover all care packages.

Good



Is the service effective?

The service was effective.

There were arrangements in place to ensure staff received regular support and supervision.

Staff received regular training to ensure they had the knowledge and skills to meet people's needs effectively.

People were encouraged to choose what meals they wanted staff to prepare and were happy with this area of their support.

Good



Is the service caring?

The service was caring.

Staff encouraged people to direct their care and inform staff what they wanted them to do.

People received support in a caring and sensitive manner.

Staff respected people's rights to privacy, dignity, choice and independence.

Staff knew people well and were aware of their needs, the support required and individual preferences.

Good



Is the service responsive?

The service was responsive.

People received person centred support which took their needs, wishes and preferences into account.

People were involved in the development of their care plan and its review. The plans were comprehensive and gave staff clear information about the support people required.

People were aware of how to make a complaint although had not needed to do so. People were confident they would be listened to and their concerns would be appropriately addressed.

Good



Is the service well-led?

The service was well led.

Good



Summary of findings

People were encouraged to give their views about the service in a variety of ways. However, their feedback and any improvements made as a result were not clearly recorded.

The quality auditing systems were informal and did not reflect the agency's policy. The policy had not been updated in response to new legislation.

The registered manager had strong values and was committed to ensuring people received a good standard of support, which met their needs.

Staff had a clear understanding of the agency's ethos and implemented this effectively when providing people's support.

Tydemans Homecare

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 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.

This inspection was announced and took place on 29 September 2015. 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.

In order to gain people's views about the quality of the care and support being provided, we spoke with eight people and two of their relatives on the telephone. We spoke with seven staff and the registered manager. We looked at people's care records and documentation in relation to the management of the agency. This included staff training and recruitment records and quality auditing processes.

Before our inspection, we looked at previous inspection reports and notifications we had received. Services tell us about important events relating to the care they provide using a notification. We asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The PIR was received on time and fully completed.

Is the service safe?

Our findings

The medicine policy was in need of updating to reflect staff often administered people's medicines rather than prompted or assisted. Records showed staff appropriately gave people's their medicines, which were prescribed on a temporary basis. However, the system used did not always evidence this clarity with regularly prescribed medicines.

People were given their medicines safely, in a way which they preferred. Staff said some medicines were given one at a time, with a space between each, for the person to take and swallow them. Others were placed in the person's hand or tipped on to the table for the person to pick up. Staff said they always signed the person's medicine administration record after the person had taken their medicines. Staff confirmed they would call the registered manager if there was a problem. This included if the monitored dosage system or dosette box had been tampered with or if any medicines were missing. The registered manager told us staff were very good at recognising if there were any changes in the medicines such as an additional tablet. They told us all staff received training in the safe administration of medicines and were assessed in their competency of administering ear and eye drops. It was a stipulation of the agency that people's medicines had to be in a monitored dosage system (MDS) such as a dosette box, before staff could give support. A monitored dosage system is a storage system, designed to simplify the administration of solid, oral dose medicines. The medicines are usually dispensed into the MDS by a pharmacist, which reduces the risk of error.

People told us they felt safe. They said this was generally because the service was reliable and gave them confidence. Comments included "I've never had a missed call. They are very reliable" and "if I'd had any missed calls, I'd of been straight on to the agency to complain, but I never have thankfully". One person told us "unfortunately I'm prone to falling over. I have a carer twice a week so they can help me with my showering. I wouldn't feel safe to try this on my own if they weren't here to help. They have been a godsend".

Staff told us they promoted people's safety in a variety of ways. This included adhering to risk assessments, reporting any unsafe equipment or appliances and following procedures such as moving people safely. Staff said they

had undertaken training in relation to protecting people from abuse. All staff told us they would immediately report any suspicion or allegation of abuse to the registered manager. Staff told us they would listen carefully to the person so they could give any accurate description of the allegation. They said it was important to remain objective and not to be drawn in to the emotion of the situation. Staff told us if the allegation was about the registered manager, they would inform other agencies such as safeguarding or the Care Quality Commission. Staff were confident that any allegation would be dealt with appropriately by the registered manager.

The registered manager told us potential risks to the person's safety and that of others were discussed during the initial assessment. Records showed assessments considered areas such as the person's environment, moving around safely, the risk of pressure ulceration and falling. All assessments were revisited at the person's care review or before if necessary. They said people were encouraged to have key safes if they could not open the door to staff independently. They said this had increased people's safety, as keys to people's property were no longer carried. Staff told us in addition to promoting the safety of people using the service, management also promoted the safety of staff. This included being given personal alarms, circuit breakers, first aid boxes and hand wash/sanitiser.

People told us staff were generally on time and they received their visit at similar times each day. One person said "they usually arrive on time, if the traffic isn't causing problems and they never rush me. I usually see the same two carers and they are lovely". Another person said "I've never had a problem with them running really late. Sometimes the traffic round here can get a bit congested but that will only mean five or ten minutes delay for the girls." Another person told us "I was asked which days of the week I would prefer to have the help with my showering and also what time I would like. I have my husband here at home but he goes for respite and I needed to fit my carers visits around these".

The registered manager told us they had sufficient staff for the number of care packages currently provided. Staff confirmed this and said they were rarely called to cover additional shifts or to support people they did not know. The registered manager told us they were looking to

Is the service safe?

increase the number of people using the service but did not want the agency to become too big. They said they would not take on new care packages unless they had sufficient staff to do so.

The registered manager told us they were always looking for new staff. They said it was important to have the “right staff with the right skills” so were always “on the lookout” for staff of the right calibre. Two staff told us they had called in to the office on the off chance of the agency having vacant positions. They said the recruitment procedure was thorough and involved completing an application form, providing information of identity and the names of two referees who could be contacted for a reference. Staff told us they could not start their employment with the agency until the references were returned and they had undertaken a DBS check.

Records confirmed what staff told us about their recruitment process. However, there were no records of the applicant’s interview in any of the files. The registered manager told us they always held a formal interview but records were not maintained. This did not evidence the areas of discussion which demonstrated the applicant’s knowledge and suitability for the role. One candidate’s application form showed a gap in their employment history of a number of years. The member of staff told us the reasons for this. Whilst discussing the application form with the registered manager, they explained the staff member’s employment history. This corresponded with what the staff member had told us. However, there were no details in the staff member’s records, which indicated the gap in their employment history had been explored.

Is the service effective?

Our findings

Staff told us they felt supported by the agency. They said they felt valued and appreciated the manager being flexible and responding to difficulties which arose outside of work. The registered manager told us they believed this flexibility was essential, as they needed staff to be fully focused on their work and not pre-occupied with other things. Staff told us they were encouraged to “pop” in to the office at any time and regularly met with the registered manager on an informal basis.

The registered manager confirmed this and said all staff visited the office on a Friday to collect their timesheets. They said they met with each member of staff during the day, to discuss their work and whether there were any particular issues. As this was routinely undertaken, the registered manager told us that structured supervision, where staff could formally discuss their work was undertaken on a six monthly basis. There were records of an annual appraisal and observational monitoring visits. The registered manager told us information about the meetings held on a Friday, were recorded in the communication book and 'signed off' when read by staff.

Staff told us they had undertaken a high level of recent training. This included person centred care, moving people safely, nutrition and hydration, protecting people from abuse and infection control. Staff told us if they were not sure about any aspect of their work, they could ask and they would be supported in a way, which worked for them. One member of staff told us “they always say “no question is stupid or too small”, we just need to say and they help us”. Staff told us the majority of their training was undertaken “on line” or by watching DVDs. The training was then discussed, usually in small groups with the registered manager. The registered manager said this ensured staff understood the content of the training, rather than just looking at a screen. Some training sessions involved a work book, which was sent away to be verified. The registered manager told us more specialised training such as first aid, which required a greater depth of understanding, was undertaken by external trainers.

There was a training matrix which identified all training staff had completed. Any refresher training required was highlighted in red so it was easily identified. The registered manager told us they were passionate about training and felt it essential when ensuring a competent work force.

They explained they had undertaken certain training courses to facilitate staff training. This included moving people safely. The registered manager told us staff learnt about equipment such as hoists and their competency was then assessed. The registered manager told us if a person received any new equipment, staff would not be able to use it until trained to do so. The training was arranged quickly to minimize any disruption to the person.

The registered manager told us they had a special interest in dementia care and it was “close to their heart”. They said they had completed training to enable them to become a dementia champion and a dementia friend. These were initiatives to enhance awareness and the improvement of dementia care. The registered manager showed us information they were using, to develop a dementia training programme for staff. They were also working on staff training sessions in relation to our regulation. They said they wanted staff to understand why they were asked to do certain things and why they were important.

People told us they were usually supported by the same staff, who were competent in their role. One person told us “I don't have any problems with my carers. They seem well trained and I never have to explain very much to them, other than how I like things to be done”. Another person told us “I think compared to other agencies, the training is adequate for what I need them to do”. Other comments were “I have two regular carers, who I really like” and “my carers are lovely. They are like my friends now, as I usually see the same regular carers”. One person told us they had a variety of staff supporting them but said “I don't mind this really, as they are all lovely and they all know me by now.” People told us the consistency of their visits enabled staff to be aware of their needs and the support they required.

People were happy with the support staff gave in terms of meal preparation. People told us they were encouraged to choose what they wanted staff to prepare. One person told us “I always decide what I would like them to cook me for lunch. They always make sure I have everything ready before they leave me. If they have time, they will usually make me a hot drink for the afternoon, as well”. Staff told us they always offered people a choice in relation to what foods were available and the time they had. They said most people, purchased frozen ready meals which were then heated in the microwave. Other people chose snacks such

Is the service effective?

as bacon and eggs or something on toast. Staff told us they often made sandwiches for people to have later in the day. They said they would inform the registered manager if a person did not appear to be eating well.

Is the service caring?

Our findings

People were very positive about the qualities of staff and the service they received. One person told us "oh, they are really like good friends and I know I can say anything to them. We have a good laugh and it brightens my day to see them". Another person said "I'm a bit hard of hearing so they do sometimes have to shout to make me hear, but they make it a bit of fun and that helps us all have a good laugh, when I completely miss hear what they've said". Other comments were "my carer always makes sure the water is nice and hot for me when we are organising my wash" and "they are always well presented and always make sure they change their gloves between different jobs. They are good at making sure I'm not wearing dirty clothes".

The registered manager told us there was a "Customer's Charter of Rights" at the start of each person's care file. This described the organisation's values and what people could expect from the agency. The registered manager told us this was discussed with people when they first started using the service. They said it was important for people to direct their care and be in control of their lives. People told us this took place and said they had an initial visit to discuss what they wanted from the service. They said they were involved in the development of their care plan and were always asked what they wanted staff to do during each visit. People told us their wishes were respected and staff interacted with them in a friendly manner.

Staff spoke about the people they supported with fondness and respect. One member of staff told us about their admiration of the older generation and how they felt privileged to be involved in their care. They told us how they enjoyed enabling people to maintain their independence. Another member of staff spoke about the importance of enabling people to make decisions and remain in control of their daily lives. They said they enjoyed being able to be part of maintaining the person in their own home.

Staff told us they always asked people what they wanted them to do and gained their consent. They said they

respected people's property and only went into other rooms, if needed and with the person's approval. Staff told us they generally visited the same people so got to know them well. They said they knew how people liked tasks to be done and in what order. One member of staff told us "I always remember I'm a guest in the person's home. I would hate someone coming in to my house". They told us they liked to make the person feel comfortable with them especially when providing intimate personal care. They said they did this by "being friendly and chatty, listening well and giving time and reassurance". The member of staff told us they had to gain the person's trust and establish a relationship otherwise the visit would get the tasks done but not in an individualised way.

The registered manager told us they were very lucky, as the staff team were "caring", "committed", "hard working" and "put people first". They said staff often "went beyond the call of duty". The registered manager gave an example of a person appearing to struggle with their mobility whilst in the town during an evening. They said the member of staff stopped to help the person and gave them a lift home, despite not being on duty. The registered manager told us all staff were concerned about the people they supported.

Staff told us they enjoyed the small, focused approach of the agency. They said it was intimate and built around people's wishes and preferences. All staff told us the agency was very person-centred with an emphasis on individuality and enablement. They were confident when discussing people's rights to privacy, dignity, choice and independence. One member of staff told us "I supported a person who had just come out of hospital. It's not something they usually want me to do but they wanted help to wash their hair. It made such a difference to their dignity". Another member of staff told us "when helping with personal care, I always make sure the person is fully covered and doors are shut, as often families have keys and it would be awful if they just walked in and saw their mum or dad in a state of undress". Staff told us they discussed people's rights during their induction and on an "on-going basis". They said it was an area, which was central to their work.

Is the service responsive?

Our findings

People told us staff were aware of the help they needed and supported them well. One person told us "it's only a few months since I started with the agency, and I remember meeting a very nice lady who sat down with me to talk about what help I needed. She listened to what I said and I felt like I could trust her". Another person said "I've had a review this morning and as part of this the manager is going to organise some extra rails for me in the bathroom. This should help me feel more secure when I'm taking a shower and we hope I should be able to manage this on my own in the future". Other comments were "I was asked if I preferred a man or female carer, to be honest I didn't mind. I certainly have no problems with any of them" and "as well as helping me with the housework, their main role is to cream my legs as I cannot reach them anymore. They are very gentle with me". Another person told us "they have been really helpful because they noticed I was struggling to move around the house without tripping over and they organised for me to have a Zimmer frame. They also then managed to get me a commode so that if I need the toilet in the middle of the night, I just have to get out of bed and not struggle to get all the way to the bathroom. I haven't fallen since they organised these for me."

The registered manager was passionate about providing people with a good service, which met their needs. They said when a person started using the service, they or the deputy manager, always undertook the first visits. This was to ensure the support was effective in meeting the person's needs before it was continued by staff. Staff told us they were always introduced to a person before supporting them. They never supported people they had not met before. Staff told us they visited with another member of staff to become familiar with how the person liked their care to be given. They said this enabled a "familiar face" and continuity for the person.

Staff told us they were given travel time so they were rarely late arriving to support people. One member of staff told us "travel times are even adapted if it's known there may be road works. We get ample time to get to people so we're never stressed or rushing to the next person". Another member of staff told us "it's really good because the travelling time means that the person gets the full length of their visit. If we've finished what the person wants us to do,

we sit and have a chat until it's time to go. It works really well". Another member of staff told that having time to talk to each person was important as people "appreciated staff bringing the outside world in".

The registered manager told us the consistency of visits meant that staff knew people well. They said they had developed good relationships with people and knew their likes and dislikes. In addition, staff were able to identify any small changes in the person's health and wellbeing. The registered manager told us "if a person is a bit off colour, staff will notice and we can ring the family or ask the person if they want a doctor. Staff can also assess them a bit later or the next day. It works well as things don't get missed".

The registered manager told us staff were good at recognizing potential triggers and reducing certain behaviours, which some people portrayed. They said they were currently working with one person who found intimate personal care difficult. To help the situation, the registered manager had asked for a member of the person's family to be present, when intimate personal care was being given. This enabled the person to become familiar with the support required whilst gaining security from their family member. The registered manager told us once the person's confidence had grown, it was expected the family member's support would be reduced and then stopped completely.

Each person had a plan of their care, which they said they helped develop. People said they had time to review their care plan before it was finalised. The care plans were comprehensive and person centred. In addition to the support people required, information detailed areas such as religion and culture, nutrition and hydration and the prevention of pressure ulcers. This enabled staff to have a comprehensive account of the person so they could provide effective support.

People told us they had their care reviewed to ensure it continued to meet their needs. One person told us "funnily enough, I only had a review this morning". Another person told us "I know I have had a review meeting but it's hard for me to remember when. I don't think there were any problems and it may have been around the time that they organised my Zimmer frame and commode for me". Another person told us "I have never had to speak with the manager although I see someone from time to time who comes to do my review meeting. Whoever they are, they spend time with you as a client trying to get to the bottom

Is the service responsive?

of what help you need". Staff told us people were able to choose the frequency of their review although most people had a monthly meeting. This ensured any issues could be addressed without delay.

People told us they knew how to complain about the service although had never needed to do so. One person told us "I've never had to complain because as far as I'm concerned the service is very good". Another person said "I've never complained, however I know who to contact if I did have a problem and I think they would listen to me and hopefully sort my problem out". Another person said "all the information about the agency is in my folder and I have all the telephone numbers if I need to call anybody." Another person told us they had never had the need to contact the manager but they had their details in their folder, if needed.

Staff told us people rarely raised any issues of concern. They said if they did, they would try to sort the difficulty out straight away. Staff told us if this was not possible or if the issue was more serious, they would inform the registered manager. The registered manager told us people were given a copy of the complaint procedure when they started using the agency. They said "we haven't had any complaints and any grumbles, are usually misunderstandings, which can be quickly sorted". The registered manager told us it was important to address issues quickly so they did not unnecessarily, escalate further.

Is the service well-led?

Our findings

There was a file which contained a large number of policies and procedures for staff reference. Whilst the policies were detailed, they did not show they had recently been updated. This presented a risk that staff could be given inaccurate information. The quality assurance policy related to four modules including the person's support, health and safety and management. All information however, targeted the National Minimum Standards which are no longer operational.

As a way of auditing the service, all staff carried a probe. Staff linked the probe to a tag in each person's home when they arrived and when they left. The probe stored this information and on a Friday, when staff visited the office, it was downloaded to the computer. The registered manager analysed the information with the staff member and any concerns were discussed. The registered manager told us the system was really useful for identifying issues but could also be used to assess whether people's care remained appropriate. They gave an example of the probe identifying shorter visits, which when investigated, showed the person was sending the staff member away early each time. The registered manager told us they checked the reasons for this with the person and the visits were reduced. They said the tag system had been introduced as they did not like people signing staff's time sheets. They thought this was open to abuse so wanted a more structured system.

People's care plans were reviewed on a monthly basis to ensure the service continued to meet their needs. Regular observational checks of staff were completed. These monitored each staff member's appearance and professionalism, their attitude and practice. The registered manager told us any issues or learning points were addressed. They said additional supervision or training was arranged if needed. There was a staff training matrix which showed when staff required any training to be updated. This enabled management to see at a glance, if staff were not up to date in any areas of the training provided.

People were encouraged to give their views about the service in a variety of ways. This included giving views informally when required, during care review meetings or by completing an annual questionnaire. One person told us "I don't think I was asked to fill in a survey, but in the review meetings I am asked, is there any improvements that could

be made? Mind you, I wouldn't know what to say to this question anyway". There were a high number of cards in the office from people showing their appreciation of the service.

Whilst people were asked their views about the service, an overview of their comments and any improvements made as a result, were not clearly recorded. The feedback from care reviews was documented on a review form and placed in the person's records. This information was not captured, as it became 'lost' in the file. There was not an overview of the feedback from review meetings, which enabled potential trends to be identified and addressed.

Feedback from the questionnaires was coordinated and given a score, which was portrayed visually into a graph format. The registered manager told us they gained further feedback from the person if any of their answers were 'less than good'. This ensured improvements were made and the person's full satisfaction was gained.

There was a registered manager who was also the owner of Tydemans Homecare. The registered manager told us they originally started the business in 1990 from their family home. They said the business developed over the years and was now run from an office in the centre of town. The office was in a prominent position and easily accessible. During our visit, people walked by the office window and waved to the registered manager. The registered manager explained they were people who used the service or family members and responded in a friendly manner. They said the positioning of the office was ideal, as people often called in for a chat, whilst doing their shopping. The registered manager told us they considered the agency was very much part of the community.

The registered manager told us they started thinking of starting the business after being upset by a person who was in hospital, considering the sale of their house. The person was deemed no longer safe to live on their own, so was being discharged to a care home. The registered manager told us this spurred them on to start the business and they have "never looked back". The registered manager demonstrated strong values with an emphasis on people's rights to good care and enablement. They said the ethos of the agency was to enable people to live independently, doing what they wanted to do. They explained people's choice, dignity and respect was at the centre of people's support. This ethos was shared and evidenced within the

Is the service well-led?

staff team. Staff told us the agency's aims was to "do what people want to support them with whatever they need", "give people good care", "enable people to remain at home" and "respect people as individuals".

In order for people's support to be successful, the registered manager told us they only accepted care packages, they knew staff could deliver. They never scheduled "back to back" calls, as they did not want staff running late, causing people disruption and frustration. The registered manager said they undertook all scheduling of people's visits by hand instead of using a computer programme. They said this ensured all visits were suitably planned, in accordance with people's wishes. The registered person told us they or the deputy manager regularly visited people to ensure the service was working well. During 'out of office hours', they were always available for help or advice.

People told us the agency was well managed. One person told us "I don't have any reason to not think they are well organised. I've certainly never had any problems". Another person said "I don't think I've ever had a problem with the office but to be honest everything is organised very well so I don't need to ring very often". Another person said "I have only had to call the office occasionally and every time I have, the staff have been friendly answering the phone and always calling me back if they have promised to do so". Two people told us they would recommend the agency. They said "I think they are all lovely and would be happy to tell anybody about the service" and "I have already told a neighbour of mine about the service and she is thinking about having carers from them, as well".