

Wirral Care Services Limited

Home Instead Senior Care Wirral

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 ●

Summary of findings

Overall summary

We carried out an announced inspection of Home Instead Senior Care Wirral on 26 April and 02 May 2016. Home Instead Senior Care Wirral provides care and support to people living in their own homes on the Wirral. Home Instead Senior Care is part of a franchise that delivers care to people in many areas of the United Kingdom. The service offered includes personal care such as assistance with bathing, dressing, eating and medicines. At the time of our visit, the service was providing support for regulated activities for 81 people.

The service had a registered manager who had been in post since 2007. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Home Instead Senior Care Wirral refer to all care staff employed by the service as CAREGivers, this is a trademarked term and used throughout the providers services. People spoke highly of the quality of care provided by the CAREGivers. Nobody expressed any concerns about any of the care provided. People received their medicines on time and in a safe way.

The provider had systems in place to ensure that people were protected from the risk of harm or abuse. We saw there were policies and procedures in place to guide staff in relation to safeguarding adults. All CAREGivers said they were confident enough to be able to whistle blow within the organisation due to the open culture promoted by the service.

The care records we looked at contained good information about the support people required and recognised people's needs. All records we saw were complete, up to date and regularly audited. We found that people were involved in decisions about their care and support.

We found that good recruitment practices were in place which included the completion of pre-employment checks prior to a new member of staff working at the service. CAREGivers received a comprehensive induction programme and had regular training to enable them to work safely and effectively.

Staff were supported and had opportunities for development. All staff said they were fully supported and valued by the management and office based team. They spoke positively about communication and how the management team worked well with them, encouraged team working and an open culture. There was a programme of training and one to one supervision that enabled staff to keep their skills up to date in order to support people appropriately.

The provider had developed four different initiatives, these included delivering dementia workshops in the local community for family and friends of people with dementia and had developed a one day end of life training session for all health and social care workers across the Wirral. This was to ensure that those living

with dementia were able to live their life to their fullest potential whilst being supported in their own homes. They had also worked closely with a Teaching Hospital and a hospice and were in the process of developing a fraud awareness initiative.

The providers demonstrated an excellent understanding of the importance of effective quality assurance systems. There were procedures in place to monitor quality and understand the experiences of people who used the service.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good 

The service was safe

CAREGivers were able to demonstrate a good understanding of what constituted abuse and how to report concerns if they were raised.

Recruitment processes were safe and thorough.

CAREGivers managed people's medication safely when required.

Is the service effective?

Good 

The service was effective

CAREGivers were provided with regular supervision and an annual appraisal of their work performance.

CAREGivers were acting in accordance with the Mental Capacity Act 2005 so that people's rights were being promoted.

CAREGivers recognised changes in people's health, sought professional advice appropriately and followed that advice.

Is the service caring?

Good 

The service was caring

Without exception, people were treated with compassion, respect and dignity by CAREGivers who built meaningful relationships with them. CAREGivers protected people's privacy and supported them sensitively with their personal care needs.

All levels of staff were committed to a strong person centred culture.

CAREGivers spoke confidently about people's specific needs and how they liked to be supported.

The provider had liaised with a hospice to develop an End Of Life one day training course that was available to all health and social care workers.

The provider had developed Dementia Workshops that was delivered to families of people who had been diagnosed with dementia.

Is the service responsive?

Good ●

The service was responsive

People's needs were assessed before their care commenced and care plans were regularly reviewed and updated as their needs changed.

Suitable processes were in place to deal with complaints appropriately.

People received individualised care and support that met their needs.

Is the service well-led?

Good ●

The service was well led

Staff felt very supported in their role.

The leadership and management of the service was outstanding. There was a well organised office team that had clear responsibilities.

There were robust systems to assure quality and identify any potential improvements to the service meaning that people benefited from a constantly improving service.

The service worked in partnership with other agencies such as hospices to deliver a quality service.

The provider has developed a charitable foundation for the benefit of the wider community.

Home Instead Senior Care Wirral

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 26 April 2016 and this was followed with telephone calls to people who used the service and their relatives on 02 May 2016 and was announced. The provider was given 24 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be available.

An Adult Social Care inspector visited the office on 26 April 2016 and looked at records, which included ten people's care records, ten staff files, and other records relating to the management of the service.

The visit was followed up with telephone calls to 13 people who used the service carried out by 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. The expert by experience spoke with nine people who used the service and seven relatives of a person who used the service.

Before the inspection, the provider completed 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. We looked at information the Care Quality Commission (CQC) had received about the service including notifications received from the registered manager. We checked that we had received these in a timely manner. We also looked at safeguarding referrals, complaints and any other information from members of the public.

We spoke to 12 staff through the course of the inspection including the registered manager, training staff,

supervisors and CAREGivers.

We checked with the local authority quality assurance team and the local Healthwatch organisation to see if they had any concerns or information about the service, all gave positive feedback about the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We spoke to organisations that had collaborated with Home Instead Senior Wirral and other health and social care professionals such as social workers and educators.

Is the service safe?

Our findings

People who used the service said they felt safe when supported by the CAREGivers. One person who used the service told us "Very safe always" another person said "Absolutely, if I didn't I would say". We received no reports of missed visits and were told that CAREGivers arrived on time one person told us "Staff are always on time".

All the people we spoke to told us they were very happy with the CAREGivers who supported them with their care and that the service worked with them when introducing new CAREGivers, one person told us "New staff are put with someone I already know until they get to know me". We saw how CAREGivers schedules were operated on regular recurring shifts, this meant the people receiving the service would receive care from the same CAREGiver at the same time for every visit. This meant people received continuity of care.

We looked at ten CAREGivers files and we saw records showing that full recruitment and checking processes had been carried out when these staff were recruited. This included a Criminal Records Bureau (now Disclosure and Barring Service) disclosure and two written references. This helps to check staff are suitable to work with people who may be vulnerable and suitable for the role in which they are being employed.

Records showed that all CAREGivers had completed training about safeguarding adults. The provider had a policy on safeguarding and this was regularly reviewed. The registered manager fully understood their responsibility when reporting safeguarding issues and was able to show they followed their own policy and the requirements to report to the Care Quality Commission. CAREGivers were all aware of the need to report any concerns to a senior person and they had knowledge of their own responsibility to report any concerns about their workplace to an outside body if necessary. We were able to see a successful safeguarding referral Home Instead Senior Care Wirral had made to the local authority and how they had worked with other professionals so that the person who used the service was able to stay in their own home.

A CAREGivers was able to show their knowledge of safeguarding processes by discussing the role of the wider care team such as the local authority and the importance of following up the reporting of safeguarding concerns. We saw how the provider gave staff information on how to whistle blow and all staff we spoke to were aware of their responsibilities and told us they would have no hesitation following the guidance. One CAREGivers told us "I'm 100% confident on what to do if I see anything wrong and we've got the information cards too, I wouldn't hesitate".

We looked at ten care plans and we saw that risks to people's safety and well-being had been identified and plans put in place to minimise risk. The risk assessments had been updated regularly and all had been up dated in the previous three months. Risk assessments had been completed with regard to moving and handling, the environment, handling medicines and people's physical health. One person told us "There is always two staff that support me", this was in accordance with their risk assessments. We saw that people receiving the service and families had been included in the reviews. We saw how a person had wanted to take a risk that could have had a detrimental affect on their health because of an impact on medication. We saw how this was discussed with both the person receiving the service and their G.P. The outcome was that

the service agreed to support the person to take the risk. This allowed the person to have control of their own lives with full awareness of possible consequences of their risk taking.

Technology was also used to help reduce risk, examples being one person who used the service had dementia and liked going for a walk. A GPS tracker was used that had a 'geo fence' that allowed the person freedom to walk but maintained their safety and raised alerts to Home Instead Senior Care Wirral and family if the person moved out of a specific zone. This meant their freedom of choice and liberty was maintained whilst reducing risk. Home Instead Senior Care Wirral were also able to show how they worked with assistive technology companies with the aim for people to be able to experience continued independence.

Those people who used the sleeping night service were given a listening device with the receiver placed at the CAREGivers bedside, this meant the CAREGiver was immediately alerted if assistance was needed.

We looked at how the service supported people with their medication. Some people were prompted to take their medication, whilst other people needed support with administration of their medication. Medication Administration Record sheets (MARs) were available within the care files and we saw these had been completed appropriately. People who required support with medication were encouraged to use blister packs, a "blister pack" is a special method of packing medications, where each dose of medication is placed in a small plastic bubble and backed by a sheet of foil. When it is time to take the medication, you simply push the pill through the blister packing. This way, you can see which doses you have taken. We were told by everyone we spoke to that there were no problems with medicines.

One person who used the service told us "Staff are on time with my medication and careful". CAREGivers had received training in medication administration and the service had a medication policy and procedure available for staff to refer to. CAREGivers competencies were checked throughout the year.

We saw that personal protective equipment such as gloves and aprons were available to CAREGivers. One person who used the service said "Staff understand hygiene and infection control, they wear pinnies and gloves".

We were shown the initial resources provided for new CAREGivers, this included what was known as a 'boot box'. This was kept in the boot of the car and it included personal protective equipment, a diary, safeguarding and whistleblowing information, lone working policy and documentation essential to the delivery of the service. These resources were regularly replenished by the provider.

The provider had a policy on accidents and this was regularly reviewed. We saw that the registered manager ensured that accident records were completed in full.

Policies and procedures were in place to ensure the safety of people who used the service. The registered manager had taken following the identification of disciplinary issues within the service. The action was taken in accordance with their policy.

Is the service effective?

Our findings

People who had regularly received care told us that they felt the CAREGivers were suitably trained to meet their needs. One person told us "Staff know their job, very experienced" another person told us "Staff definitely know what they are doing".

A diverse range of training was undertaken by the staff team and this was confirmed by the CAREGivers we spoke with. Records also supported this. The registered provider employed 107 CAREGivers, the majority of whom had completed moving and handling, medication, dementia, infection control and CPR training this is an emergency lifesaving procedure that is done when someone's breathing or heartbeat has stopped. Resources for the training included a moving and handling room that gives the CAREGivers the opportunity to use equipment they may come across in people's homes, this included slide sheets, hoists, trolleys and electric raising beds.

A total of 55 CAREGivers had achieved or were in the process of achieving their Health and Social Care Diplomas, including Level 2, Level 3, Level 4 and Level 5. The registered manager led by example and was in the process of completing their Level 7 management qualification. Home Instead Senior Care Wirral also had access to an Alzheimer's care programme that is accredited by City and Guilds and is unique to Home Instead on a national level. This demonstrated the provider valued the importance of providing CAREGivers with high quality training in order to best meet people's needs. One CAREGiver had been awarded learner of the year by the training provider.

The registered manager had recently identified the training that was being delivered wasn't always appropriate for the CAREGivers and did not meet the knowledge and practice training needs for the service to provide good and effective care. The service had been very proactive in identifying training that was tailored to their needs. Staff feedback regarding the training was central to in the choices the provider made regarding the training provider.

The provider employs a specialist dementia trainer who delivers training to families and other health professionals. One CAREGivers told us "You can have on-going training if you want it" another CAREGivers told us "Before I wasn't very dementia aware but I went straight on the training, it was really good".

On speaking to CAREGivers they felt they were receiving training which enabled them to feel confident in meeting people's needs and recognising changes in people's health. They recognised that in order to support people appropriately, it was important for them to keep their skills up to date. One CAREGivers told us "The training makes us very aware of the empathy needed. Every client is different. It's having those tools in your toolbox to know how to work with people".

CAREGivers were able to show an awareness of the Mental Capacity Act 2005. This meant staff had guidance when providing care for people who may not have capacity to make some of the decisions needed in relation to their support. All staff receive a dedicated training session on induction about Mental Capacity Act 2005, this training was delivered by a registered mental nurse who had extensive experience working

with people who were living with mental health conditions.

All of the care plans we looked at showed care delivery had been agreed to by the person receiving the service. We saw that people who used the service had signed to say they were giving their consent to receive the care outlined in their care plans. One person told us "Staff ask me what I want to do when I want to do it". CAREGivers were able to speak confidently about the care they delivered to the people they supported and understood how they contributed to people's health and wellbeing. This included how people preferred to be supported with personal care.

We saw how communication was supported by Home Instead Senior Care Wirral, an example of this was when a person's hearing aids required maintenance the service contacted the hearing aid company who attended the person with a senior staff member. The hearing aid company was then invited to attend a CAREGiver meeting with the aim to improve future maintenance of people's hearing aids. This meant that communication with hearing impaired people was improved and the CAREGivers had gained additional skills and training.

We reviewed ten files in relation to CAREGivers employed and saw evidence that CAREGivers had received an induction when they first started working at the service. The provider had their own four day induction that covered specifics to Home Instead Senior Care Wirral and this was followed by a further 12 week induction process. The provider demonstrated they were transitioning over to the Care Certificate for the 12 week induction process for new employees which was accredited by 'Skills for Care'. This is a nationally recognised set of standards that health and social care workers adhere to in their daily working life which came into effect in April 2015. The induction required new CAREGivers to be supervised by more experienced CAREGivers to ensure they were safe and competent to carry out their roles before working alone. During induction CAREGivers used Home Instead Sensory Packs to aid understanding of sensations that may be experienced by people who use the service.

CAREGivers had an individual supervision meeting, direct observation of practice and appraisal. We saw that the appraisals were up to date. These were used as an opportunity to inform CAREGivers of any changes or issues and it gave them an opportunity to discuss their work and any concerns they may have.

The provider employed a staff counsellor who was there to support staff in their work, this was a free service and was actively promoted to the staff group. One CAREGiver told us about the support she received from the counsellor following a person's death.

We spoke with people who had food prepared for them by CAREGivers from Home Instead Senior Care Wirral. Everyone we spoke to said they were very happy with everything that was done for them. One person told us "Staff cook me what I want if I have it in". The care files we saw for each person held information that included allergies, meal preferences and dietary requirements.

Is the service caring?

Our findings

People told us that CAREGivers had always been kind and compassionate when attending to them. One person said "Very very caring, lovely girls" another person told us "Very kind all of them and to my dog who is very important to me".

We observed that confidential information was kept secure whilst we were in attendance in the office because we saw that records were kept locked and only accessed by staff.

People supported by the agency and their relatives were well informed and were also involved in the care being delivered. For example one family member had been involved in arranging and reviewing a care package for their relative and how the provider had included them in the process. Each person had a client journal that included information regarding advocacy, information about Alzheimer's Society and guidance regarding financial benefits.

We were also told by another professional how responsive staff were with the people who received care and that communication between the services was excellent.

People felt that CAREGivers respected their privacy and dignity when supporting them with their daily tasks. We asked people if they were able to make their own choices, all the people we spoke to said that they were. One person told us "They are respectful at all times to me, they treat me like a human being".

CAREGivers were able to give us examples of how they maintained people's privacy and dignity when assisting with personal care. These included, ensuring doors were shut, curtains were closed if appropriate and by asking what support people wanted before providing care and explaining what needed to be done so that the person knew what was happening.

People said they usually received care and support from a consistent team of CAREGivers and that they had been able to build trusting relationships with them. We looked at the records for ten people and there was consistent CAREGivers recorded.

CAREGivers demonstrated empathy in their discussions with us about people and showed an understanding of the need to encourage people to be involved in their care. One person told us the service was "Very tailored to my needs, good 1-1 support". CAREGivers were motivated and inspired to offer care that was kind and compassionate. One CAREGiver was able to tell us how they were able to find a way to effectively interact with a person with communication difficulties and the sense of achievement and job satisfaction it gave.

People who used the service and relatives were asked to complete a satisfaction survey compliment forms were in place. The following comments had been made by a relative of someone who had been cared for "We have received two years of excellent care" and "Although I only needed you for a short time, it was outstanding". One family member told us the support that had been given at the end of their relative's life

was "Responsible and professional, I'd use them again". One CAREGiver talked about her pride of working at Home Instead Senior Care Wirral, especially regarding the end of life care that had been provided to a specific person. They explained "She got what she wanted, to have her end of life at home, I think it's amazing what we do".

We were also able to see thank you cards and letters that the service had received from families following end of life care, one letter stated 'a heartfelt thank you' and 'They [staff] treated [person] with such care that he kept his dignity and was able to spend his last days at home. Your girls are girls in a million and no praise is high enough'. Another person had written 'We are very grateful for your personal attention, and appreciate all the care, kindness and consideration which your staff proffered and demonstrated during their time in looking after [name] especially during their last days'. One other person had written 'They(staff) have been so caring and kept them all safe. Although we understand that your services are paid for, your staff all have been responsive to their needs, my dad and auntie look upon them as friends who care. They have run errands, listened and been so positive'.

We were also able to see how the agency had liaised with a hospice to develop an End Of Life one day training course that was available to all health and social care workers across the Wirral at no cost.

There was a strong ethos by the provider's and registered manager that if you care for staff they will care for people using the service. This was demonstrated by specific letters sent out to staff, if they were caring for a person at end of life. These letters gave in depth support for staff to be able to carry out their role and the offer of a support network through the office.

The registered provider employed a dementia specialist and as an organisation had developed a 'Dementia Workshop' for family members of people living in the community suffering with dementia. This includes information about Alzheimer's Disease and other types of dementia, techniques on managing behaviours and how to preserve family memories. This was seen to be well attended by families and feedback was all positive about the impact on people's understanding of dementia. Comments included 'This was very informative, The most useful advice I have received' and 'This has been very helpful for me and my dad'. These workshops were provided free of charge and at regular intervals.

The registered provider had developed a project with a local University Teaching Hospital to help student nurses understand the caring needs of older people once they have left hospital. This gives student nurses an insight into the process for older people when transitioning back into their own homes. This project has been nominated for the HRH The Prince Of Wales nursing award and has been used as a good practice case study on collaborative working. This project benefitted the student nurses by enhancing their knowledge of community care, the care staff as it gave them a sense of pride in their role and the people who used the service as they were able to inform professionals of the future how they perceive their care and inform on what's important. There are now plans for this project to be nationally available due to its success.

Is the service responsive?

Our findings

All the people who we spoke with were satisfied with the way care was provided, could not fault the approach of the staff, and felt listened to. They told us that they would certainly be able to express concerns about the service if they had any. All of the people spoken with were sure they would know how to complain if it became necessary and most people had not, so far, made any complaints. One person told us "If I have got a problem I tell the carers and discuss it, if not I have a phone number in my book" another person said "It's very good, I have no need to complain" and a third person told us "If I was not satisfied I would say, I know who to speak to".

The service had a clear written complaints policy and this was included in the information pack and service user guide given to people when they started using the service. The complaints procedure advised people what to do regarding concerns and complaints and what to do if they were not satisfied with any outcome. It gave contact details for the local authority complaints service and for CQC.

Health and social care professionals said they felt the service was responsive to people's needs. Comments included, "I think they are excellent. I've used them for my father".

We spoke with the four supervisors who told us the processes followed when a referral was received. This included making appointments with people and family for initial assessments, developing care plans and risk assessments. Each person who received the service had their background explored and recorded in depth and then people were matched to CAREGivers based on this information. We saw records of these assessments in people's care files, this showed the service was person centred. The assessment forms had been completed in detail and recorded agreement for the service to be provided. The forms were signed by the person requiring a service or a family member. One person told us "It's a new experience to me having carers, I have found this service to be very good" another person told us that "If my family are here when staff come we all talk together not separate". This showed that CAREGivers have a wider relationship in the person's life and are able to interact in a meaningful manner with both the people who receive care and their families.

Care plans were in place for the care people required. The documentation was clear and had been completed in full. CAREGivers completed a visit log after each visit and we saw that entries were detailed and described the care that had been given and that it matched what had been agreed in the care plan. One CAREGiver told us she had reported the deterioration of a person's health to the office and this was immediately acted on. Care plans had been reviewed with clear changes documented where needed. We were also able to see how the care plans identified a person's activity and socialising needs.

We were also able to see, following a report from CAREGivers of the deterioration of a person's health using the service, the management of the person's care including communication with health care and social care professionals up until the person was admitted to a residential home. This showed how the service ensured good communication between health and social care services so that the person's transition to residential care was smooth.

All the people we spoke to told us that their individuality and choices was respected by the service, one person told us "I do what I want, not treated as if I'm in a nursery" another person told us "They listen to me, hear what I have to say".

Is the service well-led?

Our findings

The service benefitted from strong leadership and oversight at registered manager and provider level. We received positive feedback about how they managed the service. One person told us "The lady in the office speaks to me if I need her", another person said "The manager is very good, I can talk to her if I want".

Even though Home Instead Senior Care Wirral is a franchise and part of a larger organisation, the initiatives the provider had taken were in response to local need and not set by the national organisation. This meant that action could be taken quickly and effectively to improve services for the local community. The management team had a clear vision about the values the service had. This included ensuring people could remain at home where they were most happy and comfortable and giving families the knowledge that their relatives were safe and happy. The registered manager told us that the service were like family, and that "family look after family".

Additional to the operational management of the service, Home Instead Senior Care Wirral employed a community development team, one of whom was able to tell us how their role had helped build relationships within the community such as charities, community organisations, churches and services that offer coffee mornings and support. This had led to Home Instead Senior Care Wirral being part of a national initiative developing a Senior Fraud Awareness programme with Trading Standards Department that will educate those in the wider community about being at risk of scams. During the previous year the Senior Fraud Protection and scam awareness presentations have been delivered to 23 separate venues, to 369 members of the public

The provider employs a specialist dementia trainer who is a registered mental nurse and this person delivered Dementia Awareness Seminars and Dementia Training workshops. We spoke to the organisation that had the training delivered to their staff and we were told that the staff feedback was all positive and enhanced people's knowledge. In addition training was delivered to other health professionals such as G.P.'s and social workers. This training was free of charge and raised local awareness of understanding dementia and the support people living with dementia needs as individuals. We were able to see feedback from these sessions and comments included 'I wish someone had explained this to me two years ago whilst my dad was going through dementia as it would have helped me support my dad better'. This meant that the wider care team involved in the support of a person with dementia in their own home would have a greater understanding of a persons needs and so would be better supported and treated.

Home Instead Senior Care Wirral has also developed a charity The Wirral Care Foundation. This was founded by the owners who are also the managers of the service to help the Wirral community by providing advice and education about Alzheimer's Disease and Dementia. Funding had been provided for a new service that had been developed to support the families of those who live with dementia. This meant that the people who use the service with dementia were able to have a longer positive relationship with their family members, this enriched the lives of both the family's and the people living with dementia. New projects that had been initiated included end of life care for people with dementia. This was with the aim of ensuring CAREGivers and the wider care team were able to support people to stay in their own home until the end of

life with care and dignity.

Within The Wirral Care Foundation there is a separate community fund where people were able to apply for funding to support community based projects. Following our inspection five community was successful in their application for funding and attended a presentation evening.

There was a well organised and structured office where office staff with well-defined roles worked together. The registered manager was supported by four supervisors known as care quality compliance leads who were responsible for their own area of the Wirral, additionally there were people whose roles were to deal with staff rotas, training, administration and finance.

In order for there to be a good understanding and overview of the service the supervisors held a weekly meeting that covered all the findings of the week and had a meeting each morning where they could get up dates from the on call system. Once a person started receiving care from Home Instead Senior Care Wirral a review system was put into place that happened in the first, second, fourth and sixth weeks and then a three monthly review meeting. We were told by one person who uses the service "They came not so long ago to ask me if everything was OK".

The supervisors liaised with the local authority and other professionals such as occupational therapists, district nurses and mental health teams. They were able to tell us of the support and advise they were able to give each other. We asked if they felt supported in their roles and each person said yes. One person told us "We're very much supported, they're [provider] contactable all the time and treat us with respect".

We were able to see positive feedback from other professionals, these included a G.P, social worker, a lecturer from Chester University and an education lead in palliative and end of life care. This feedback showed how Home Instead Senior Care Wirral had worked closely with other professionals to ensure the care service delivery was the best it could be.

CAREGivers said that the office support they received was excellent. Comments included, "I can call any time, they're really lovely, like a family" and "Totally supported. The manager noticed I've not looked quite right and rang me to see if I'm ok". We saw that CAREGivers received both office and work based support. There were also regular team meetings held where the provider sometimes were able to have guest speakers for the benefit of the CAREGivers, we saw evidence that CAREGivers were comfortable speaking out and airing their views.

The provider had invested in a resource for staff to be able to go on holidays by purchasing two static caravans for the sole purpose of offering these to staff for family holidays. This showed how the provider invested in their staffs well-being leading to staff who were happy in their role and so ensuring there was a high level of staff retention.

The provider had recently devised an 'Exchange Council' that was specific to Home Instead Senior Care Wirral, this was to give the CAREGivers the opportunity to exchange ideas on improving and developing the service. This idea had been put forward in a staff meeting meaning the staff group were fully involved in ideas for new ways of working. This was an example of how the service had a positive and sustained culture that was open, inclusive and empowering.

People who used the service said they knew the office staff team and who to call if they needed support, we were told by one person "If there was anything wrong I can ring the office I know that".

To ensure the quality of the service being delivered the provider had commissioned an external service to undertake an anonymous PEAQ survey (Pursuing Excellence by Advancing Quality) on Home Instead Senior Care Wirral's performance and the customer's experience. We saw quality assurance questionnaires that had been received from both people who used the service and staff. The results from these were over 98% positive and the agency had plans in place to improve performance.

The provider and registered manager were meeting their legal obligations such as submitting statutory notifications when certain events, such as injury to a person occurred. They notified the CQC as required, providing additional information promptly when requested and working in line with their registration.

We were able to see how Home Instead Senior Care Wirral had consistently been nominated for and achieved multiple awards for their work, this included specialist care awards for early intervention and prevention, integrated approaches to care and effective approaches to integration and new models of care.