

Greenwich Care Limited

Home Instead Senior Care, Greenwich & Bexley

Inspection report

The Gateway 2A Rathmore Road London SE7 7QW

Tel: 02037718424

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Ratings

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

Summary of findings

Overall summary

About the service: Home Instead Senior Care Greenwich and Bexley is a domiciliary care agency that provides personal care and companionship and domestic help to people in their own homes. The service was providing personal care to 23 people at the time of the inspection.

People's experience of using this service:

- At this inspection we found that the service was outstanding in empowering people to have as much control over their lives as possible and to achieve their maximum potential.
- People's care was consistently personalised to their needs. We found multiple examples to demonstrate the staff and management team were passionate about providing an innovative, responsive and excellent service to people.
- Relatives felt the care was highly personalised and that the staff team worked well to deliver an excellent level of care. The feedback we received from people was extremely positive throughout. People expressed great satisfaction and spoke highly of all staff and services provided.
- People were supported in making healthy lifestyle choices for themselves and to maintain good health. Staff supported people to access healthcare services and liaised with health and social care professionals promptly when required.
- The service had established excellent links in the local community and had worked in partnership with key organisations including local authorities and other agencies that provided social care services to improve people's opportunities and experiences.
- The service had an open approach to feedback and encouraged people and staff to be actively involved in service development. The provider had a robust quality assurance system in place and lessons learnt from audits or accident and incidents were used to continuously develop the service.
- People benefitted from a service that was well led. The vision, values and culture of the service were clearly communicated to and understood by staff. There was a registered manager, director and nominated individual in post who understood their role and responsibilities and at the same time empowered and developed staff. Staff understood their individual roles, responsivities and the contributions they made to the service.

Rating at last inspection: Good (Report published 25 June 2016)

Why we inspected: This was a planned inspection based on the rating at the last inspection. We found the service continued to meet the characteristics of Good in Safe and Effective and were Outstanding in Caring,

Responsive and Well Led. Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

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	
Details are in our Safe findings below	
Is the service effective?	Good •
The service was effective.	
Details are in our Effective findings below.	
Is the service caring?	Outstanding 🌣
The service was exceptionally caring	
Details are in our Caring findings below.	
Is the service responsive?	Outstanding 🌣
The service was exceptionally responsive	
Details are in our Responsive findings below.	
Is the service well-led?	Outstanding 🌣
The service was exceptionally well-led	
Details are in our Well-Led findings below	



Home Instead Senior Care, Greenwich & Bexley

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

This inspection was completed by an 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.

Service and service type:

The service is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to older adults. Not everyone using Home Instead Senior Care, Greenwich & Bexley receives a regulated activity. CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do, we also take into account any wider social care provided.

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

Notice of inspection:

The Inspection site visit activity started on 8 March 2019. We visited the office location on 8 and 15 March 2019 to see the manager and office staff; and to review care records and policies and procedures.

What we did:

Before the inspection, we reviewed information we had received about the service since the last inspection.

This included details about incidents the provider must notify us about, such as abuse and accident and incidents. We sought feedback from the local authorities who commission services from the provider and professionals who work with the service. The provider completed a provider information return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection, we spoke with three people that used the service and 12 relatives to ask their views about the service. We spoke with four members of staff including the registered manager, the nominated individual and a company director. We also spoke to two healthcare professionals.

We reviewed a range of records. This included five people's care plans, risk assessments and medicine records. We looked at five staff files in relation to recruitment, training and supervision. We also looked at records relating to the management of the service and a variety of policies and procedures developed and implemented by the provider.



Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems. All caregivers had completed safeguarding adults training and knew of the types of abuse and reporting procedures to follow if they had any concerns of abuse. Where there were concerns of abuse the registered manager had notified the relevant healthcare professionals including the local authority and CQC.
- •People and relatives told us they felt safe using the service. They told us "I feel [person] is very safe in their hands" and "Very professional carers 100% safe."

Assessing risk, safety monitoring and management

- Risks to people had been identified and assessed. Risk management plans were in place to prevent or reduce the risk of people being harmed and included guidance for caregivers to keep people safe.
- •Caregivers we spoke with understood where people required support to reduce the risk of avoidable harm. A caregiver told us "We are protecting the clients and make sure they are safe in their home."

Staffing and recruitment

- There was a system in place to review and monitor staffing levels to ensure there were sufficient numbers of staff to meet people's needs. One person told us "Home Instead are brilliant in terms of time keeping, compared to other companies we have had and "I have two carers and no problems with time keeping."
- Caregivers told us they received details about their shifts on time and they had regular people they supported and cared for.
- The provider followed safe recruitment practices and had ensured appropriate pre-employment checks were completed satisfactorily before staff were employed.

Preventing and controlling infection

- The service had an infection control policy in place. Caregivers had received training and were aware of infection control practices and told us they had access to gloves, aprons and other protective clothing which was kept securely in the office.
- People using the service and relatives raised no concerns with regards to the infection control practices demonstrated by staff. A relative told us "The carers keep everywhere nice and clean".

Learning lessons when things go wrong

•. There were systems in place to record and respond to accidents and incidents in a timely manner. The registered manager used accidents and incidents as learning opportunities to improve the quality of service which were relayed to caregivers at staff meetings and training.

Using medicines safely

- There were procedures in place to manage medicines safely. Medicines administration records showed people received their medicines as prescribed. Management staff completed monthly medicine audits to ensure any discrepancies and/or gaps were identified and followed up.
- Caregivers completed training to administer medicines and their competency was checked regularly.



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

People's outcomes were consistently good, and people's feedback confirmed this.

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

- Before people used the service, a care consultation was carried out to ensure their needs could be met. People and their relatives were involved to assess whether the service was suitable to their needs and to enable them to make an informed choice about their care.
- During the care consultations, expected outcomes were identified and results from these assessments were used to develop people's care plans. A relative told us "The owner and his wife came out at the beginning to see what our needs were and drew up a care plan we have regular visits to update this with someone from the office."

Staff support: induction, training, skills and experience

- Caregivers were competent, knowledgeable and skilled to perform their roles effectively. A relative told us "The carers are experienced with handling and talking to people appropriate to their needs."
- •Caregivers had completed a comprehensive induction programme, mandatory training and other training relevant to the needs of people. Caregivers also received supervision and appraisals and told us they felt supported in their roles.

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

- •People were supported to eat and drink based on their individual preferences. People's care plans identified areas where they were at potential risk of poor nutrition and dehydration and/or had swallowing difficulties and the appropriate support needed for them was detailed.
- Caregivers were aware of their responsibilities when supporting people with their food and drink and were provided with a 'Stay Nourished' brochure which highlighted how to stay nourished and meal preparation.

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

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

- •Records showed the service and caregivers obtained consent from people and understood the principles of the MCA.
- •Where a person lacked the capacity to make a specific decisions. the best interests decision making process was followed and documented. A relative told us "Yes I was involved in the care plan for my [person] I have power of attorney we now also get regular contact very business like and very accommodating."

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

- People were supported to access healthcare service and worked in partnership with other health and social care professionals such as district nurses and GPs.
- •.People and relatives spoke very positively about the way the service accommodated people to achieve this. A person told us "The service is very adaptable. Last week I had a hospital appointment and needed to get ready earlier. They [the service] just swapped shifts around to accommodate me."

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

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

- •Feedback from people using the service and their relatives demonstrated the service was exceptionally caring and had a positive impact on people's lives. They told us "I think Home Instead is the Rolls Royce of care absolutely no complaints. The level of care is absolutely brilliant" and "[Person] now has more confidence to go out shopping and to the church which has given them a lot of hope; none of this would have happened if it was not for your carers' positive encouragement and care and support with their particular needs. Your carers have shown empathy and kindness to the situation. I have not seen this with other agencies and hope we continue to get outstanding results for [person]."
- People and relatives told us repeatedly they saw their carers as being friends or like family members. A person told us "Home Instead helps make dealing with dementia that bit easier. You feel part of a bigger family who care". A relative told us "The carers are very good. They have a laugh with [person] and they respond well to them. I know [person] looks forward to them coming."
- •People and caregivers were matched together based on their personality and interests so that they built positive meaningful relationships and ensured the service was companionship led. For example, one person was matched with a caregiver whose hobbies included, attending concerts and singing. The caregiver discovered that the person had always wanted to attend a concert at the Royal Albert Hall and with the support of the service, this was accommodated for the person. The person told the service, "Thank you, you fulfilled my dream."
- •Caregivers equally valued how they were matched to people and how this had a positive impact when providing companionship and care. A caregiver told us "Our interests are similar and it's always a pleasure to see them. Its like going to see a friend it's a lovely thing. I like flowers and the [person] I look after talks about their garden and it's nice we can talk about it."
- •During the inspection, the nominated individual showed us a 'Life Journal' which a caregiver and person living with dementia, together captured the story of the person's life memories and accomplishments. The nominated individual told us this helped caregivers to interact and connect with people on a personal level while creating a lifelong keepsake for the person and their families.

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

- •The service conducted two quality assurance visits and two service reviews each year so people and relatives were involved in personalising their care according to their needs and wishes. Relatives told us "We see the manager or someone from the office about every three months for a chat and update the care plan" and "The company listened to our feedback and have managed to get carers to suit [person's] needs."
- •The service went above and beyond their duties to make sure people got the support they needed. For example, the service supported a person whose relative became bed bound as a result of an accident. The relative was admitted to a care home but the person wanted their relative to spend their final days at home. The director attended a meeting with the care home and worked with healthcare professionals and caregivers to ensure continuity of care and all the equipment needed by the relative was ready which enabled the relative to receive care at home. The impact was exceptional as the relative is now able to recognise their family members, verbally communicate some of their wishes and build up strength to walk a few steps. The person told the service "I like how easily accessible the management are...it was 100% the right choice fighting for [person] to come home."

Respecting and promoting people's privacy, dignity and independence

- The service was respectful of people's privacy and maintained their dignity. A relative told us "The carers help with personal care and getting dressed but are very respectful and let [person] do as much as they can on their own."
- Caregivers were highly motivated and keen to support people to the best of their ability, treating them with dignity and respect. They told us "I always think how would I feel if I was in their position and think how I would want to be treated. I always take that into consideration."
- We were provided examples of where sensitive and respectful support and care and caregivers had instinctively gone beyond the call of duty and exceeded expectations. An example of this was when a person suffered an incident. The caregiver called the ambulance and rearranged her own personal plans to accompany the person to the hospital and stay with them as there were no family members able to attend at this time. The caregiver kept the family members informed and stayed with the person whilst they received medical attention. Feedback from the relative after incident included "I just wanted to put in writing the outstanding quality of the staff in particular [caregiver]. Her determination to stay with [person] at the hospital was wonderful. [Caregiver] ensured the hospital focused on [person's] needs. We are all very grateful for your staff's work and positively look forward to the future largely as a result of the care and support of their [caregiver] work."
- In another instance the service supported a person who suffered from chronic fatigue syndrome and had been on their own for many years to help combat loneliness and social isolation. The initial contact with service did not run smoothly as the person did not want to engage with conversation or complete paperwork. The Director was not discouraged and was able to build a rapport with the person and introduce them to a caregiver which was successful. The service adopted a unique way to sensitively introduce caregivers as a 'friend' as the person was cautious of new people. This has had a profound impact on the person who has now built enough confidence to contact the office independently and no longer feels isolated. The person told the service "I really like it when they visit."

Is the service responsive?

Our findings

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

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 using the service had an individualised care plan based on their needs and how they wanted their care to be. Plans were reviewed regularly, and people told us staff from the office came out and checked their care was appropriate to meet their needs. A relative told us "Before we started, we had several talks with them about interests and what care was needed. It has grown from this and we get regular updates with the manager to alter the plan."
- Feedback from a healthcare professional demonstrated that the service focused on providing person-centred care and support. They told us they had worked with the service with a particularly challenging case and the service had always been responsive and adapted the service to fit the needs of the person. They also told us they had been able to develop a good working relationship and said the service were very accommodating.
- The service tailored it's services to meet the needs of people and had gone above and beyond to provide a responsive service. For example, a person who was the main carer of their relative was diagnosed with pneumonia and needed hospital treatment. The person was unable to leave their relative as no family member was available who could provide the 24 hour care that was needed. The person refused to be admitted to hospital until they knew their relative was being looked after in their absence. The person did not know who else they could go to for help and contacted the service. The registered manager arranged care for the person's relative with caregivers that already knew the couple. The person was able to get treated in hospital immediately whilst their relative was being cared for by the service. Extended family members told the service "We are very grateful for what Home Instead have done for our parents, it was beyond our expectations."
- In December 2018, the service undertook a "Be a Santa to a Senior" campaign and identified a person who enjoyed going out but was restricted due to their poor mobility and was no longer able to access the community. The service was also aware that the person enjoyed going to the pub and socialising. The service worked with the local pub and treated the person with a Christmas meal. The person told the service "Thanks for doing this for me, I felt like I am a part of the community again."
- Caregivers also had an excellent understanding of people's social and cultural diversity, values and beliefs and were innovative in suggesting additional ideas to accommodate this. A caregiver of a person who expressed they liked Indian food went out of their way to learn and cook an indian dish for them. The

caregiver also learned other skills such as playing an Indian drum so that she could help the person to continue enjoying their hobbies and interests. The person appreciated the time and effort the caregiver gave this for their benefit.

- Another example of caregivers supporting people to continue enjoying their hobbies and things they had done in the past. For one person, who wrote poetry, caregivers would engage in conversations and would often flick through the person's published poetry book to remind and encourage the person of their talents. The service showed us a poem, the person had wrote and shared with them about Remembrance Day.
- The service and caregivers understood the needs of different people and used innovative and individual needs to involve people and their families to deliver care in ways that met people's needs. For example, there was a growing concern by the family with regard to a person's heath in relation to their diet and weight. The service responded by using the guidance from their 'Stay Nourished' campaign and researched healthy eating options, which the person and their family could enjoy together. For example, the person loved desserts so healthier options were looked into so they wouldn't miss their desserts. The person also loved beer and caregivers looked into low calorie beer options so the person could still enjoy an alcoholic drink. The person very much appreciated the time and effort the caregivers went to ensure they were still able to enjoy the food they wanted with their family whilst improving their health at the same time.
- •The service takes a key role in the local community and is actively involved in building further links by contacting community resources and support networks to promote people' well being and independence. From March 2019, the service in collaboration with Skills and Care Greenwich, will be conducting the Community Elders Food & Advocacy Project. The Community Elders Food & Advocacy Project started as the Luncheon Club & Food Distribution Project, however it was recognised that people needed advice and support in healthy eating and cooking in order to stay nourished and the project has been awarded funds to continue and sustain this initiative for people.
- •The service also recently entered into a partnership with DisabledGo to maximise independence and choice for disabled and older people which provides accessibility information for places across the local community including, parks, leisure centres, cinemas, restaurants, theatres and football grounds. The nominated individual told us caregivers regularly interact with disabled and older people and take people out for social activities so that they can continue living independently in the community. This partnership helped the service achieve this and people were able to easily access and continue to be part of their communities.
- The service was also able to provide information on various public awareness programmes they had been involved with in relation to the needs of people using the service including Dementia Awareness, Scam Prevention, Stay Nourished, Stand Up to Falls and Prevent Senior Hospitalisation. The service has also been involved with a project "Together We Grow" which helps older people to be active physically and mentally. Management staff told us that they were very proud to have supported such projects and will continue to do so.
- Arrangements implemented by the service and caregivers were innovative in relation to social activities and using community links and resources to meet people's individual needs so people could live as full a life as possible. For one person with a mental health condition, they needed to be involved with therapeutic activities which were essential for their wellbeing. The service matched the person with a caregiver who teaches Hilal Dance in the community. The caregiver also conducted their own research on activities available in the local community and produced a "What's on Guide" for the person and planned activities for each day. This made a significant impact on the person's life who is now happier and able to socially

integrate into their local community.

•During the inspection, we saw wonderful photographs displayed in the office of social events organised by the service involving people, relatives and the staff engaging in such social events together which showed a true testament of what the service delivered and stood for. We noted part of the philosophy of the service was to 'endeavour to bring joy back to older people's lives.'

End of life care and support

- •No one at the service currently received end of life care from the service, however they had previously provided this care and worked with community healthcare professionals in the past. Feedback received from one family included "[Person] couldn't possibly have been able to live to the age they did in their own home without all the care and help the Home Instead carers gave. No one ever left [Person] on their own or in distress. We can't thank you all enough for your excellent care."
- •Caregivers involved in providing end of life care were supported by the service with empathy and understanding. The registered manager told us that one to one support and guidance was provided to support caregivers throughout the whole experience. A caregiver told us "I was allowed to go to the funeral of [person, they become family. The managers asked if I was okay, they were nice about it."

Improving care quality in response to complaints or concerns

- The service had received no complaints from people using the service and their relatives. A relative told us "Never had to ring the office for anything or make complaint very pleased".
- •A complaints policy and procedure was in place. People were provided copies of these when they started the service and kept in a folder in their homes so they were aware do who to contact should they have any concerns.
- Records showed the service also received many compliments from people using the service and their relatives.

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

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 their duty of candour responsibility

- The service was very well led. The service was led by a nominated individual, director and registered manager. All management staff demonstrated compassion and real empathy in their commitment to providing meaningful, person-centred, high-quality care by engaging with everyone using the service, stakeholders and making a difference in their local community. The provider and registered manager demonstrated effective leadership skills within their roles, they led by example and demonstrated a 'hands on approach' which meant the service was led in an exceptional and distinctive way
- Feedback from people reflected the service was exceptional and distinctive compared to other agencies. One person's feedback to the service stated "[Caregivers] have both been a tremendous help to me in so many ways. No longer is it "Here's your food" or "my bus is soon coming" but two people who can and are willing to spend time with a little chat to liven up the day. Their work is of a tremendously high standard above that which I usually impose upon myself."

Feedback from relatives we saw also reflected this and stated "The professionalism of the company was way above my expectations, not only was I felt at ease with the company's way of looking after clients, [person] was very happy too, as they had a poor experience with another agency. The caregivers are fantastic caring, professional, reliable, hygienic and talk to [person] like she is there own very mother and make [person] feel safe at home. I cannot praise Home Instead enough" and "It's great for once to see a company delivering against the claims they make regarding the quality of service they offer. We are very pleased."

- •Healthcare professionals also spoke highly about the service and its leadership. They told us "We are very happy with the service that they provide. They are very reliable. They have demonstrated a good responsive service and great leadership quality, very responsive and very flexible."
- •Caregivers spoke highly about the leadership of the service and told us they felt listened to, appreciated, motivated and supported in their role. Staff told us "[The registered manager] is lovely and if I was to become a manager, I would want to aspire to be like her. She is the best manager I have had. She treats you like a human being. She understands and can relate to what you are doing. She is brilliant" and "They are the managers and directors but they don't make you feel that they are. They treat us like equals, very down to earth."
- Due to the exceptional way the service has been led the service received national awards and recognition

for their achievements. This service was awarded 2nd Runner-up in the Home Instead franchise performance league award in two consecutive quarters in 2018 and the Best Employer in Care Award 2018" award based on the feedback they received from staff in the Pursuing Excellence by Advancing Quality (PEAQ) survey.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; working in partnership with others

- The service regularly engaged with people through review meetings, quality monitoring visits and client satisfaction surveys. The annual client survey for 2018 included excellent feedback from people which included "I think the service provided is excellent" and 100% felt their caregiver "goes the extra mile to make a positive difference in my life."
- The service promoted an inclusive and open culture and management staff recognised caregivers performance and contributions in a very positive and rewarding way and made staff feel valued within the organisation. The service held quarterly team meetings and at each session, a 'Caregiver of the Quarter' award was given to a caregiver who went the extra mile to help and support their client. Caregivers equally told us what this award meant to them. They told us "Yes I got an award I was shocked. They recognise what I do. They say thank you all the time -always encouraging. Very positive team. They know and appreciate what you do"
- •The service is an important part of its community and had developed exceptional community links to reflect the changing needs and preferences of the people who used it. The service received Royal recognition from the Queen in November 2018 and received a letter from the Queen praising the service's efforts and the 'commendable contribution' they made in local communities.
- •For example, the service hosted a Coffee Morning and raised £110 for Macmillan Cancer Support. Feedback about the event included "I wish there were more of these kind of activities at the community centre." The service also worked with the local police and Safer Neighbourhood team and held workshops in the community to prevent fraud amongst vulnerable people. We were provided an example of where a caregiver identified a potential fraud involving a person suffering from dementia. The relative fed back that the caregivers assistance was so professional and helped [person] get over the distress of it.
- •The service had undertaken some exceptional work with the elderly Gurkha community. Feedback from a person included "With your help I now feel a sense of belonging". This outstanding contribution to supporting the Gurkha community was reported on during an episode of a BBC programme Inside Out.

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

- There was a registered manager in post who understood their responsibilities under the Health and Social Care Act 2014 and had notified CQC of any significant events at the service.
- •Governance was well embedded in the running of the service. The director and registered manager meet on a weekly basis to review progress of the service and discussed this at weekly office meetings with senior caregivers. Regular audits of the service were carried out and action plans were developed with any improvements/changes identified and followed up by the registered manager.

Continuous learning and improving care

- •The director is part of two Home Instead Franchisee owners groups which meet quarterly and share best practice. Best practice was also discussed during team meetings with external speakers were also invited to speak about specialist subjects. The registered manager told us, for the next meeting they were working with paramedics to come and speak about how best to act in emergencies.
- •Based on caregivers feedback from their PEAQ 2018 survey, the service produced a 'You Said, We did" poster which showed actions taken to improve practice and service delivery. For example, caregivers fedback that there were issues with scheduling. As a result, the service hired a dedicated scheduler as part of the office team. Since then things had improved substantially and scheduling times and managing staff absences were managed more effectively.