

Hughes and Daughters Care Ltd

Blue Ribbon Community Care (Tyne and Wear)

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Good 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

This inspection took place between 9 February and 6 March 2018 and was announced. When we last inspected the service we found the provider had breached the regulations relating to safe care and treatment because the arrangements for managing medicines were not always safe. We rated the service as Good. Following this inspection, to reflect the improvements the provider has made, we have rated the service as Outstanding.

Following the last inspection, we asked the provider to complete an action plan to show what they would do and by when to improve the key questions is the service safe. We found progress had been made and the provider was now meeting the regulations. In particular medicines were administered safely and there were robust quality assurance processes to check on medicines management.

Blue Ribbon Community Care is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. At the time of our inspection it provided a service to approximately 43 people.

The service had 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 requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. People, relatives and staff described the registered manager as supportive and approachable. They told us since the registered manager had started there had been significant improvements made to the service.

People, relatives and staff told us about the exceptional care the service provided. Words used to describe the care included amazing, wonderful, brilliant and first class. Staff were described as 'highly competent'. They said staff were especially caring. Special relationships had developed so that staff felt like part of their extended family. Staff regularly went above and beyond to ensure people's needs were anticipated and met with the utmost dignity and respect. The registered manager led by example and also regularly went the extra mile to ensure people were safe and well cared for. Staff were creative in how they developed relationships with people so that people received the best care in personalised and meaningful ways.

The registered manager and staff team worked enthusiastically to provide an excellence in line with the service's values of compassion, respect, collaboration and promoting independence. People were at the heart of how the service operated which was flexible and adaptable to suit people's changing needs.

The registered manager was extremely proactive in attending multi-disciplinary team meetings to ensure people received consistent care across all services. They also promoted joint working with other professionals to develop the skills of the staff team.

The provider had a particularly effective quality assurance system to drive sustained improvement.

People, staff and relatives felt the service was safe.

A reliable and consistent staff team provided people's care. People said staff turned up on time and stayed for the full length of the call.

The provider had effective recruitment systems to ensure new staff were recruited safely.

Staff showed a good understanding of the provider's procedures to keep people safe and knew how to report concerns. Previous safeguarding concerns had been dealt with effectively. They told us they had no concerns about people's safety.

Staff felt extremely well supported and received the training they needed.

Staff supported people to meet their nutritional and healthcare needs. People confirmed staff supported them to have enough to eat and drink.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People had detailed care plans which described how they wanted to be cared for to meet their individual needs.

People only gave extremely positive feedback about the service. They said if they had any issues they would have no problem speaking to the registered manager or other staff. A small number of complaints had been received which had been dealt with thoroughly.

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 has improved to Good.

Medicines records accurately accounted for the medicines people had been given.

People, staff and relatives felt the service was safe.

People said staff were reliable and consistent. New staff were recruited safely.

Staff had a good understanding of safeguarding and the whistleblowing procedure including how to report concerns.

Is the service effective?

Good ●

The service was effective.

Staff were well supported and received the training they needed.

The provider followed the requirements of the Mental Capacity Act 2005 (MCA).

People were supported to meet their nutritional and healthcare needs.

Is the service caring?

Outstanding ☆

The service has improved to Outstanding.

People, relatives and staff were exceptionally well care for.

Staff were particularly caring and had developed special relationships with the people they cared for. People talked about staff as being like an extended family.

The registered manager and staff team regularly went above and beyond to ensure people received the best care possible.

Staff were creative so that people's care was truly personalised and meaningful to them.

Is the service responsive?

The service was responsive.

People had personalised care plans which described the individual support they needed.

People only gave very positive feedback about the care they received.

Complaints were handled effectively.

Good 

Is the service well-led?

The service has improved to Outstanding.

The registered manager and staff team were enthusiastic and driven to deliver care that met the service's values of compassion, respect, collaboration and promoting independence.

People needs were place at the heart of service delivery.

The service was particularly flexible and adaptable to suit people's changing needs.

The registered manager proactively attended multi-disciplinary team meetings and worked jointly with professionals to ensure people received holistic care and to develop the skills of the staff team.

The provider had an effective quality assurance system.

Outstanding 

Blue Ribbon Community Care (Tyne and Wear)

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 between 9 February and 6 March 2018 and was announced. We gave the service 48 hours notice of the inspection visit because the location provides a domiciliary care service. We needed to be sure that they would be in.

We used information the provider sent us in the 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.

Prior to the inspection we contacted external commissioners of the service from the local authority and the Clinical Commissioning Group (CCG), as well as the local authority safeguarding team and the local Healthwatch. We used their feedback during the planning of this inspection.

During our inspection we visited six people who used the service. We also had telephone conversations with a further six people and three relatives. We spoke with a range of staff including the registered manager and six care workers. We reviewed a range of records including five people's care records, medicine records, five staff files, training records and other records relating to the quality and safety of the service.

Is the service safe?

Our findings

When we last inspected Blue Ribbon Community Care the provider had breached the regulation relating to safe care and treatment. We concluded the service was not always safe and rated it Requires Improvement. This was because arrangements for managing medicines were not always safe. Records did not always accurately account for the medicines staff had given to people. In particular, there were unexplained gaps in medicines administration records (MARs), daily logs did not detail the support people had received with medicines, and staff did not always supervise people to make sure they took their medicines. We also found medicines audits were not always effective in addressing issues.

At this inspection we found improvements had been made so that people now received their medicines safely. As a result, we have changed our rating to Good.

Staff had completed training and their competency to administer medicines was checked regularly. Care plans accurately described how staff supported people with their medicines. Where required, risk assessments were completed to ensure people were safe. For example, where staff were to leave out medicines for people to take themselves later in the day. MARs and other medicines related records were completed accurately. Audits had been strengthened and were more effective in identifying and addressing any issues with medicines.

People and relatives felt the service was safe. One person said, "I am very safe, they are all very nice people (staff) who come." Another person commented, "I feel very reassured with them coming in." One relative said, "I can't speak highly enough of them. [Staff member] is fantastic, they are sometimes up all night with [family member]. [Registered manager] pops in to keep an eye on things. We are so lucky that we found the carers."

Staff also confirmed people were safe. One staff member said, "They are always giving us training on moving and handling. We do safety checks on the clients' home." Another staff member commented people were, "Absolutely safe, we are good with safeguarding people." A third staff member told us, "It is very safe. Safety comes first above everything else."

A general risk assessment was completed for each person to identify any potential risks to their safety. Staff reviewed these regularly to keep them up to date with people's changing needs. Risk assessments were detailed and clearly identified the control measures needed to minimise risks. Other assessments were also carried out focusing on specific care needs, such as a moving and handling and medicines administration.

The provider had clear policies relating to safeguarding and a whistle blowing procedure. Staff had no concerns about people using the service. They said they would use the whistle blowing procedure without hesitation if needed. One staff member said, "I haven't needed to use it [whistle blowing procedure]. I would speak to [registered manager]." Another staff member commented, "I haven't had to use it [whistle blowing procedure] but I know what it is about. I would use it if I needed to." The provider had effectively dealt with

one previous safeguarding concern including referring the matter to the relevant local authority. Every person using the service was provided with information about who to contact if they had any concerns about their care.

People received support from reliable and consistent staff. One person said, "They are very organised, you know when somebody is coming. There are regular times. They always tell you who is coming. We get a rota, it is spot on." Another person told us, "[Registered manager] tries to keep it so you don't have too many changes. We always know the staff. New girls are introduced to us first." A third person commented, "They are always here by 8 o'clock and very often before."

Staff told us they were allocated with some flexibility in their rota. This meant staff could usually arrive on time, stay the full length of the call and stay with people a little bit longer if needed. One staff member said, "We have always been allocated 10 to 15 minutes either way."

The provider had a robust procedure for recruiting new staff safely. This included carrying out pre-employment checks such as receiving references and checks with the Disclosure and Barring Service (DBS). DBS checks are carried out to confirm whether prospective new staff had a criminal record or were barred from working with vulnerable people.

The provider had policies and procedures to protect people and staff from the risk of infection. Staff were issued with uniforms and personal protective equipment as required. The provider completed checks to ensure staff followed procedures.

The provider had up to date procedures to deal with emergency situations. Where required, detailed incident and accident records were kept. This included details of the action taken to keep people safe, measures to prevent a future recurrence and any lessons learnt.

Is the service effective?

Our findings

When we last inspected Blue Ribbon Community Care we concluded the service was effective and rated it Good. Following this inspection we found the service was still effective and our rating remains Good.

Senior staff assessed people's needs when they started using the service to help ensure they received the care they wanted and needed. People's views were clearly documented and used as a focus for the assessment.

Staff were extremely well supported to develop the skills, knowledge and confidence they needed. One staff member commented, "I am extremely well supported." Another staff member said, "If you are stuck with anything they help you." A third staff member told us, "If there is anything we need an up update on, they bring training forward. I am doing a NVQ in social care. They are very supportive in that." Some staff told us about how the provider had been particularly supportive and flexible to help them with personal matters. Records showed training, supervision and appraisals were up to date when we inspected.

The provider continued to follow the requirements of the Mental Capacity Act 2005 (MCA). Staff had a good understanding of MCA and described how they supported people with making decisions and choices. For some people this included prompts, whilst for others staff used strategies such showing people items to choose from. One staff member told us, "We always help (with making choices) in a person-centred way. We give a choice of two items such as showing them two jumpers."

People were asked for consent before receiving any care. One person commented, "They ask if there is anything I want doing." Staff confirmed they always asked people for consent. One staff member commented, "We always ask (the person) first for everything."

Staff supported people to meet their nutritional and health care needs. Care plans described the individual support people needed in these areas including any specific preferences they had. A speech and language therapist had given specialist advice in respect of one person and this was incorporated into the person's care plan. People's care records showed the provider worked collaboratively with other services to help ensure people's needs were met appropriately. This included GPs, pharmacists, community nurses and chiropodists.

Relatives confirmed staff supported them to have enough to eat and drink. One relative described the reassurance they gained from knowing Blue Ribbon Community Care were looking after their family member. They said, "From my point of view it is a big help. You are aware there is somebody there to make [family member's] breakfast. It gives us that peace of mind when we can't be there."

Is the service caring?

Our findings

When we last inspected Blue Ribbon Community Care we concluded the service was caring and rated it Good. Following this inspection we found the service was especially caring and our rating has improved to Outstanding.

Throughout our conversations with people, staff and relatives we heard about a service that puts people first and provides highly personalised and compassionate care.

People gave us consistently exceptional feedback about the care they received and the kindness staff showed them. People talked about staff as being like part of their family or friends and described the special relationships they had developed over time. One person told us, "They are a pleasure. They soon began to feel like part of the family, which is very nice. They are great." Another person told us, "The staff are all very nice, they are nice to you. What is also nice is each have their own personality. They bring that with them, each one has something about them." A third person said, "They have come to me for so long. They are not my carers, they are my friends."

Relatives provided similarly excellent feedback. They talked to us at length about the positive impact the service had on their family member's health and emotional wellbeing. One relative, whose family member was living with dementia, described to us the positive impact the care staff had on their family member. They said, "[Family member] likes them all, she gives them a hug. She is upset if she doesn't see them. Their inter-personal skills are highly developed. I see them as part of the family." They described how their family member is "all smiles and happy" when they see the care staff arriving and "goes to the door to wave." They went on to say, "You expect to get treated as a human being and they do that all the time."

Another relative told us, "I don't know what I would do without Blue Ribbon. They actually go over and above. The care is amazing. I make a point of meeting all [family member's] carers. They all seem so dedicated. [Family member] is well looked after. The carers have a wonderful way with [family member]. [Family member's] face lights up when they walk in. They are pretty special."

A third relative described to us the personalised nature of the care their family member received. They commented, "They are very, very good. The way they approach [family member], the way they care for them. It is specific to them... when [family member] sees their uniform it settles [family member]."

Staff commented on the close bonds and positive relationships they had developed with people. One staff member commented, "I feel like part of the family. It gives you a buzz. It is really nice." Another staff member told us, "I really enjoy spending time with my clients." A third staff member said, "We have good relationships, I am very fond of them."

Staff described how as well as providing "amazing care" for people, the provider was equally caring towards their own needs. They told us working at the service had been an extremely positive and happy experience. All staff told us about a shared feeling of family, belonging and togetherness. One staff member said, "We all

bounce off each other. I have never heard of anybody (staff) complaining." Another staff member told us, "It's brilliant (working for Blue Ribbon Community Care), I love this job. The girls (staff) all get on, we meet for coffee. It is a good team. [Registered manager] is good." A third staff member commented, "I love it, they are a really good company. They look after me really well and care to the clients is really brilliant." A fourth staff member told us, "Great, it is the best place I have worked."

Throughout our inspection we found numerous examples where staff went above and beyond to ensure people's needs were met in a way which was personal and meaningful to them. A supervisor identified during a conversation with one person a love for the work of a particular poet. The person was no longer able to read and enjoy this poetry due to poor eyesight. The supervisor returned with a book of poetry and read to the person whilst staff completed their care duties. This has since developed into a regular occurrence and has widened to include other poets, whilst enhancing the person's quality of life and returning the pleasure of the poetry which was missing from their life.

Another two service users had dogs which were essential to their quality of life. In order to enable people to keep their pets with them the provider had reviewed the relevant care plans to include dog walking and associated tasks. They also allocated staff to the call that were comfortable around dogs. This meant the people were able to keep their beloved pets, so enhancing the quality of their lives. One person commented, "They do all I want, more at times."

Relatives confirmed the provider regularly went the extra mile to meet people's needs and make them feel special. One relative described how staff had made a special effort when it was their family member's birthday. They said, "Staff had done that little bit extra, the carers are like a friend." One relative said, "They ask what I want and they do it. They don't treat you purely as a client, they go the extra mile. I couldn't do without them, they do all the things that we can't do." "We are a self-contained unit." They went on to describe times when staff had helped them out with organising things over and above what was expected. One relative complimented the provider for being competent, caring and showing 'initiative beyond our stipulated requirements.' They went on to describe how staff respected their family member's wishes even when it 'took a lot more time than was officially booked'. This enabled their family member to stay in their own home as long as possible.

The registered manager was equally committed to putting people at the heart of care delivery. We heard of many occasions when they had led by example when responding to people's needs. One person told us about a time when their boiler was not working. They said the registered manager came straight out and sorted it for them. This ensured they continued to have heating and hot water. A relative, who lived away, described a time when they couldn't get up to visit their family member due to bad weather. They said the registered manager drove over to check their family member was alright in order to reassure them. They told us, "I can't speak highly enough of them."

Staff were particularly good at anticipating people's needs so that more serious health consequences were avoided. They had an excellent understanding of people's individual needs and knew when to intervene. One staff member commented, "We understand when people become unwell. We spot the signs straightaway and get them checked out." Another staff member commented, "When we go into (people's) homes, we are very good at assessing our client and their needs." One person told us about a time when they were unwell. They said, "They are very caring. The carer was concerned (about person's health) and contacted the nurse." One relative wrote to the provider to praise them for identifying a developing infection at an early stage. This enabled their relative 'to get the earliest medical attention and stopped a serious infection developing'. Another relative praised staff for noticing on more than one occasion their family member was unwell. They wrote 'without their help and support [family member] would have been

extremely ill.'

The provider was proactive in ensuring people's emotional wellbeing was maintained. One person regularly took in a neighbour's cat and fed it. When the person was due to move into a care home, they told a staff member they would miss the company of the cat. The staff member took a photograph of the cat, then had it developed, blown up and framed. They took the framed photo of the cat to the care home for the service user to keep as a memento. This helped the person settle as they had some comfort from the photograph of the neighbour's cat. For another person, staff took personal items into hospital as they knew the person would be worried and find it difficult to relax. The hospital was out of the region, so this was a significant drive for staff. However, they knew this would have a significant positive effect on the person. This meant the person's stay in hospital was less stressful enabling the person to receive the care and treatment they needed.

Staff were especially skilled at ensuring respect, privacy and dignity were central to the care they provided. Equality and diversity policies and procedures were in place to ensure people were always treated with respect regardless of sex, race, age, disability or religion. One person described how staff supported them with personal care respectfully and helped to maintain their dignity. They said, "They go out and leave me with a little privacy. Oh they are very good." They went on to tell us about how their confidence had increased by having the care staff around. They commented, "They give me confidence because I know if I want a cup of tea, they would stand beside me and watch me make it. When I go upstairs they are right behind me (to make sure person doesn't fall)." Another person told us, "They are gentle and kind, nothing is too much trouble." A third person commented, "They are really good. They do everything I want them to. They are lovely, they treat you like a friend."

The provider received numerous compliments about the care provided and the caring approach of the staff team. Words used to describe the care included 'excellent', 'wonderful', 'brilliant' and 'first class'. Staff were described as 'highly competent', 'hard working', completely reliable, friendly and 'patient'. One person referred to the staff as 'my angels'. One relative said staff 'treat [family member] as an individual and 'go far beyond the practical tasks required of them'.

The provider had received particularly positive feedback from people about the care provided during the last consultation carried out in July 2017. The vast majority of people rated the service as excellent for the care they received; the approach of staff; and the level of respect shown to them. One relative had described the care staff as 'amazing' and 'very caring and sensitive' to their family member's complex needs. A relative who lived away described staff as 'wonderful' and believed their family member was 'in excellent hands'. A third relative commented [staff member's names] worked 'outstandingly' with their family member. Dad is quite happy with the service he receives. One person stated that care staff 'contribute to my care in a unique way'.

Is the service responsive?

Our findings

When we last inspected Blue Ribbon Community Care we concluded the service was responsive and rated it Good. Following this inspection we found the service was still responsive and our rating remains Good.

People had detailed and personalised care plans which described how they wanted to be supported. Staff had agreed clear outcomes with people about what they hoped to achieve from being supported and these were included in care plans. For example, how people wanted staff to treat them and the level of support they wanted. There was a clear focus within people's care plans about maintaining dignity and respect, promoting independence and maintaining safety. Specific prompts were included for staff to remind them of what people wanted in these areas. For instance, one person wanted staff to greet them in a certain way. Another person wanted staff to keep their shoulders covered with a towel to keep them warm when supporting them with a shower. In order to guide staff further, people's individual preferences were incorporated into the plan. For example, one person wanted support to have a shower three times a week, another person had specific preferences for their breakfast and how they liked their cup of tea.

People had their care plans to hand when we visited them and were aware of the plan's contents. People had signed their care plans to confirm they were happy with them. Care plans had been evaluated regularly to help keep them up to date with people's current needs.

Although nobody was receiving end of life care when we inspected, we found previous examples of where staff had provided care to people with dignity and compassion.

Without exception, the people and relatives we spoke with gave us only extremely positive feedback about the support they received. One person said, "They have been very good, I have nothing to complain about." One relative told us, "I have no need to complain about anything at all." One relative said, "There is nothing that is negative I can think of. They try very hard to keep everyone happy."

Complaints were handled effectively in line with the provider's complaint procedure. The provider had received a small number of complaints. Records confirmed these had been fully investigated and action taken to address people's concerns.

Is the service well-led?

Our findings

When we last inspected Blue Ribbon Community Care we concluded the service was well-led and rated it Good. Following this inspection we found the service was especially well-led and our rating has improved to Outstanding. We found Blue Ribbon Community Care to be a service that places the needs of people at the heart of how the service was managed to ensure they received the best care possible.

The service had a clear set of values about treating people with compassion and respect and working in collaboration to enable people to have a comfortable level of independence. An enthusiastic and dedicated staff team, led by a strong and committed registered manager, was in place to drive this forward for each person using the service. People's and relative's feedback during the inspection echoed strongly these values, as without exception they described to us a service that prioritised people and treated them with the utmost respect at all times.

Comments from staff we spoke with further corroborated the person-centred vision and culture of the service. They spoke with us about how they had seen their skills and confidence develop and how this enabled them to deliver the best quality care. Some staff were new to care work when they started working for the provider. They were particularly anxious about whether they would have the appropriate skills. They told us they had received excellent support and guidance. One staff member said, "When I started I didn't have much confidence. Working for the provider has brought me out. I really love my job. I get a buzz." Another staff member commented, "I was scared at first. They reassured me and were there 24/7 on the phone for anything I wanted. They are always approachable."

This commitment to putting people at the heart of the service was instrumental in the provider being voted number one of the top ten recommended North East care providers on a national website, for each of the last three years. This was based on feedback and recommendations from people using the service and their relatives. The service was praised for providing excellent, very flexible and first class care. Staff were described as fantastic, adaptable, supportive and compassionate.

The needs of people using the service were at the heart of how the provider operated the service. One person commented, "The firm is very organised, they show empathy (towards people). It works like clockwork. This is the secret of why they are so organised, they have a system that works. One staff member told us, "We always have the service users' needs at heart. We make sure they are looked after. We have very high standards." Another staff member commented, "I think we give very good care. The carers are very caring and management are to. They are there primarily for the clients."

There was exceptional commitment from the registered manager to maximise people's independence to ensure people maintained important links with the local community. We found many examples where the provider had worked with people to set up safe ways for them to continue accessing the local community to enable them to continue to meet their individual preferences, thereby promoting independence, mental well-being and preventing people becoming isolated.

The provider was particularly creative in finding ways to engage and communicate with people to ensure they received the best care possible. This often involved using people's particular interests to develop positive relationships between people and staff. For instance, two people, unwilling to engage with staff, had particular areas of significant interest identified in their respective life histories. Staff researched these experiences, printed photographs and took them in for the two people. This enabled a working relationship to develop enabling care to take place in a respectful and dignified manner which was especially meaningful to the person.

The service was particularly flexible and adaptable to suit people's changing needs. We received a lot of praise from people and relatives about how well the service responded quickly to changes in people's needs. They told us staff went out of their way to ensure people received the care they wanted. One person commented, "[Staff member] is very good at meeting what I want." They described to us a time when they needed support at very short notice. They said, "I called them in at short notice ... I have never found them wanting." Another person described how they regularly needed to change or cancel calls at very short notice. They said, "Nothing is a bother." A third person told us about how the provider arranged for a specific staff member to call when they needed a bath. This was what the person wanted as they liked and trusted them. They described how this made "a lot of difference to them."

Staff described how the registered manager always responded to people's needs positively and was willing to review the length of calls. This ensured care was tailored to the people's individual needs. People gave us many examples of how their care had been changed, often at short notice. One staff member said, "If I have concerns that I haven't got enough time (to provide a person's care appropriately). The company are always willing to look at increasing the call time." This emphasised the leadership within the service were driven by improvements and ensuring quality care was delivered.

People, relatives and staff gave us extremely positive feedback about how supportive, approachable and proactive the registered manager was. One person said, "[Registered manager] is very good, very obliging. Any little problem, he is quick at putting it right." Another person told us, "I have met [registered manager] a few times and he is very nice indeed." A third person commented, "[Registered manager] is very friendly and very helpful. I would feel confident enough to ring him up." One relative told us, "[Registered manager] is very, very good and very supportive." One staff member commented, "I am very supported. We have very good management, very approachable. If I had concerns I wouldn't hesitate to contact them."

The registered manager involved themselves in review meetings and discussions with various external stakeholders to ensure they got the best outcomes for people. This ensured systems and processes used by people were improved and made more accessible where necessary. In one example, someone had missed their prescription as they had been unable to attend a medication review. The registered manager made contact with the GP surgery and arranged to receive notifications of future reviews to avoid a repeat of the situation. The change they had initiated ensured that the person received seamless care from different care providers in the system..

We found that the registered manager had developed a culture of learning and development throughout the service. They had proactively ensured staff were supported to continually develop their skills and knowledge thus ensuring best practice was embedded into the service they provided. This included specialist training with professionals such as speech and language therapists and specialist nurses. As such, staff were extremely effective and efficient in identifying when people needed additional advice and guidance. Each staff member had a personal development plan with clear, bespoke objectives. Staff were encouraged to reflect on their own development and progress. Where areas for further development were identified, plans were in place to drive improvement. A community health professional described staff as a 'pleasure to work

with' and commended the registered manager for being proactive about encouraging this culture of development.

People spoke highly about how well managed and organised the service was. As the service was small, people and relatives told us they felt like they belonged to a family. One person said, "Because they are a small company we get better attention. The carers get on with each other." Another person said, "They are very sociable, we have a lot of laughter. They are all very different, we have a lot of talk." One relative commented, "I could not do without them. I would be surprised if I could find an agency as good in Sunderland." One relative told us, "I looked at a lot of different places. I liked the idea it was a smaller firm. We had a long talk with [registered manager]. He assured us they would keep to two or three girls and he does."

The provider had opportunities for people, relatives and staff to share their views about the care provided and the service more generally. People were asked about their level of satisfaction with the service in relation to areas such as staff appearance, punctuality and the duration of their call. People told us they were listened to and their views were valued. During individual review meetings, care records were checked to ensure they were accurate and up to date. Where required recommendations were made and action taken based on people's views.

During the last consultation people gave especially positive feedback about the management of the service. The vast majority of people rated the service as excellent for its overall management; and the helpfulness and effectiveness of management. One relative commented, 'the high standard of service has never wavered'.

Staff gave similarly positive feedback when they were consulted in July 2017. For example, 91% of staff said Blue Ribbon's management demonstrated an 'excellent' level of commitment to them, 95% rated the support they received as 'excellent' and 100% rated accessibility of management as 'excellent'.

The provider continued to operate a very effective quality assurance system. This ensured the service was continually improving and developing to the benefit of people using the service. Medicines audits had been strengthened since our last inspection and were more effective in identifying areas for improvement. Senior staff carried out periodic spot checks to help ensure people received the care they expected. These included reviewing the staff member's punctuality, whether tasks were completed effectively and checking infection control procedures were followed correctly. People we also asked to comment on whether they were happy with how the call was conducted. The registered manager had clear plans for the future, focused on the future needs of people using the service. These included plans to work towards Investors in People accreditation, recruitment, reviewing management structures and ideas for expanding the service.