

Eximius Live-in Care Limited

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Inspection report

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Date of inspection visit:

16 December 2019

18 December 2019

20 December 2019

23 December 2019

Date of publication: 20 January 2020

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 \diamondsuit
Is the service well-led?	Outstanding 🌣

Summary of findings

Overall summary

About the service

Eximius Live-in Care Limited is registered to provide personal care and support to people in their own homes. The service provides live-in care workers to people living in their own home. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of the inspection the service supported 18 people.

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

People's experience of being supported by the service was exceptionally caring, responsive and well-led. People were supported to live the life they choose and celebrate their cultural needs. Comments from people and their relatives included "Both excellent at keeping mum as active as possible, and making sure she is mentally stimulated", "We have had live in care for our mother from Eximius since the company first opened, the companions chosen for mum are matched to her individual needs and requirements. They continue to amaze us with their level of dedication to their role."

People were supported by care workers who were exceptionally caring and compassionate. People told us "So far as I am concerned the care which Eximius provides has been of a very high quality", "I have had three excellent carers who each have come for long periods and have been very hard working and caring and a pleasure to have in my house" and "[Name of care worker] is exemplary."

People received an exceptionally responsive service. People were supported by staff who supported them to continue with their role in society and family life.

People described the service as exceptionally well-led. One person told us the nominated individual was "An exceptional person, with her passion and desire to provide a caring and compassionate service." Other people described the managed team as, "Exemplary", "Reliable" and were of "Full of praise of the care and service they give." Another person told us "Appropriately qualified carers had been excellent and contact both with the carer and the Eximius management has been easy and efficient."

People were supported by care workers who had been matched to meet their individual needs. Attention was placed on ensuring care workers had the right skills, experience and life knowledge to engage with people in a meaningful way.

People were protected from abuse and avoidable harm as care workers were skilled in assessing and monitoring safety. The service provided the required documentation on how care workers should minimise risk of harm to people.

People were supported by care workers who recognised the need to refer people to external healthcare professionals when needed. The service worked well with other bodies to promote people's health and well-

being

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

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

Rating at last inspection

The last rating for this service was good (published 14 June 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information 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.	



Eximius Live-in Care Limited

Detailed findings

Background to this inspection

The inspection

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

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 16 December 2019 and ended on 23 December 2019. We visited the office location on 18 December 2019. On the 16, 20 and 23 December we contacted people, their relatives and external health and social care professionals for feedback. We reviewed evidence sent to us from the service. On the 20 December 2019 we visited one person in their own home and met with their live-in care worker.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. Throughout the inspection we gave the provider and registered manager opportunities to share with us what they did well and tell us of any planned changes.

We looked at information we held about the service and any feedback we had received since the last inspection. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with the service's managing director who is the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We spoke with the registered manager, office manager, recruitment manager and two care workers.

We reviewed a range of records. This included four people's care records in full and a further one in respect of end of life care planning. We looked at four staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. Information requested was sent to us promptly and securely. We continued to receive feedback from people, their relatives and staff.



Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People were routinely protected from abuse. Care workers had received training on how to recognise signs of abuse. People we spoke with knew who to speak with if they had a concern about potential abuse and they told us they felt safe in the company of care workers.
- The service had worked closely with people to foster a safe environment. One person had a code word which they had agreed with the management team. If the word was used in conversation the management team would know they needed to visit the person.
- Care workers demonstrated awareness of how to recognise potential abuse and had confidence about when to raise a safeguarding concern if needed. The company had developed a clinical consultant and safeguarding lead post. The member of staff in the post championed safeguarding. This ensured people were protected from abuse as care workers knowledge on how to recognise potentially abusive situations was routinely checked.
- The registered manager had developed a safeguarding quiz to test the knowledge of care workers. It was clear from the results the topic was understood by care workers. Safeguarding was discussed in team meetings. The management team were aware of the need to report safeguarding concerns to the local authority and to CQC.

Assessing risk, safety monitoring and management

- Risks associated with people's medical conditions had been assessed and care workers had detailed information on how to manage them to reduce the likelihood of harm to people.
- People and their family members were involved in identifying and managing risks. A social care professional told us "In my view, risks have been appropriately assessed and there is clear guidance in place to manage should these risks become an issue."
- Potential environmental risks had been considered. The health and safety of people being supported in their own home had been assessed. For instance, if there was adequate lighting or loose carpets.
- People and their relatives told us the service responded "Quickly" and "Efficiently" to any changes and managed to successfully "Have good strategies in place if any risky moments occur."
- Where new risks were identified we found the service was proactive in trying to minimise them. One person who was at risk of falling was provided with a sensor mat to alert the care worker they were walking about. Since the mat had been in place, the person had not had any falls as the care worker was present when required.

Staffing and recruitment

• People were supported by care workers who had been recruited safely to ensure they had the right skills

and attributes to provide safe care.

- The registered manager was aware of the required checks prior to a new member of staff commencing work. The checks carried out included an employment history, references and Disclosure and Barring Service checks (DBS). A DBS is a criminal record check.
- People and their relatives were involved in the recruitment of care workers. The service provided care worker profiles. People could read the profiles and decide if they wanted to either interview them or agree for the care worker to support them. We were provided with many examples of how the service matched care workers to people to ensure they received a person-centred service.

Using medicines safely

- Where people required support with administration and management of their prescribed medicine this was detailed in their care plan. The provider completed a medicine risk assessment detailing what level of support people required. Information was available to care workers on how to support people stay well. For instance, for people who were prescribed blood thinning medicine, records showed how care workers should look out for signs of bleeding.
- Medicine administration records (MARs) followed national guidelines. Information was readily available for care workers on potential side effects of each medicine. MARs were audited to ensure people received their medicines on time. The management team had oversight of the administration of medicines in real time. One care worker told us "If I am delayed in giving the meds, I get a call from the office." They also told us "Any changes to meds can be uploaded onto the electronic system." This meant people were supported with the right medicine at the right time.
- People were supported with their medicine by care workers who had received training and were deemed competent to provide safe care to people.

Preventing and controlling infection

- People were supported by care workers who had received training on how to minimise the risk of infections. Staff we spoke with and had feedback from were knowledgeable about how to reduce potential infections. One care worker told us "Hygiene has always been very important."
- Care workers had access to personal protective equipment (PPE) such as gloves and aprons.
- Where people required support with the preparation of meal they were supported by staff who had received training in food safety.

Learning lessons when things go wrong

- The provider and registered manager had systems in place to analyse incidents and accidents to prevent a re-occurrence. There was a strong sense of learning within the organisation. The service had a culture statement which included "Open door/no-blame I know I can call management regardless of the magnitude of any issue and I know support will be available with no blame or intimidation attitude."
- Lessons learnt were discussed at team meetings and information was sent to care workers, people and their relatives about any changes made as a result. For instance, following a person leaving their home without the knowledge of the care worker the service introduced a missing person policy and adopted the 'Herbert protocol' a nationally recognised document which provides essential information about a person in the event they may go missing.



Is the service effective?

Our findings

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

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

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

- Prior to people being supported people's needs were routinely and consistently assessed. The registered manager and nominated individual promoted a truly holistic approach to working with people and their relatives. The service worked in partnership with other professionals to assess people's needs.
- Assessments were shared across the care workers. There was a clear link between assessment and action. Assessments identified any individual needs which related to protected characteristic identified in the Equality Act 2010. For instance, preferred language, faith, religion, and cultural considerations.
- The registered manager and provider were aware of best practice guidelines and we saw evidence this had been adopted by care workers to benefit people. For instance, care workers were aware of guidance about supporting people with dementia. We had many examples given to us about how the service used best practice guidance.

Staff support: induction, training, skills and experience

- People were supported by care workers who had been given a robust induction not only into their role, but also into the care needs of the person. Care workers were provided with training the provider deemed mandatory. Where bespoke training was identified we found this was provided in a timely manner. The registered manager had good systems in place to monitor care workers knowledge, any gaps were quickly identified, and additional support and training was offered. This was to ensure care workers provided the best possible care to people.
- Care workers were supported to complete the Care Certificate. The Care Certificate is a set of nationally-recognised standards all care staff need to meet. The standards include communication, privacy and dignity, equality and diversity and working in a person-centred way, as examples.
- The service had introduced a mentoring scheme as it had recognised live-in care could be isolating at times. Care workers we spoke with provided us with feedback they thought it was a good idea and welcomed the opportunity to support new staff.
- Care worker we had feedback from told us they felt supported by the service and they had welcomed the commitment from the management team to deliver high-quality care. One member of staff told us "From the very beginning I was welcomed to the team with open arms, with support and a very positive work ethic in delivering a service with all the great values I aspire too." Another care worker described the support they received as "Fantastic" and "They are always on the end of the phone."

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

• People were routinely supported to maintain good hydration and nutritional levels. The support people required with a healthy diet was detailed in their care plan. For instance, one person required support with

special adapted cutlery.

- The service recognised cooking was not a skill held by all. As a result, they had engaged with a professional chef who provided teaching sessions to care workers.
- People and their relatives told us care workers had a good understanding of how to support them with their nutritional needs. One relative told us their family member had been supported to manage their weight by "Attention to his compulsive eating has meant that only healthy snacks are left in the fridge gradually through the day." Another relative told us "Food is wonderful."

Staff working with other agencies to provide consistent, effective, timely care

- People were routinely and consistently provided with effective care. The service worked well with external health and social care professionals to ensure people received person centred care.
- The service ensured care workers were provided with up to date information about people's needs. We found handover sessions between one care worker and the next were well managed and facilitated by the management team. The registered manager told us "By involving service users, representatives and health professionals, in the provision of an individual's care ensures that we are meeting the needs of the individual on all levels. It ensures that we are providing the most current support, it minimises any potential risks or safeguarding's, it ensures that we are person centred in our approach to care and that best practice procedures are being followed."
- Where people had been admitted to another care setting from their home, for instance an acute hospital. The service ensured the new setting had information about the person to enable them to provide person centred care. The service used a 'hospital passport' document to record essential information about people. This included people's interests, likes, dislikes and preferred method of communication.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to live well within their home setting. One person who we visited was being supported by their care workers with daily exercises. They told us "They [Care workers] know what they are doing, it is important that I have exercise every day, sometimes we change the time depending on how I feel."
- The registered manager told us how they had worked closely with a physiotherapist to help a person recover from a stroke. They told us [Name of person] has moved from double handed care to mobilising with the support of one companion."
- One person told us how they had been more settled with their levels of anxiety since Eximius Live-in Care Limited had been supporting them. The registered manager also confirmed this following a review of the care they said, "[Name of person] stated that her mental health and sleeping had improved since she had moved to our company from another agency. She said that the level of support and communication meant she was less anxious and worried about the continuous and sometimes intrusive care she needs."

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection (COP) for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People were supported to have maximise choice and control over their lives. The registered manager and provider were aware of best practice guidance on how to support people with making decisions about their care.
- The service had at least two people who were subject to COP approved deprivation of their liberty. This was due to the level of support they required. We received positive feedback from healthcare professionals about how the service had promoted people's rights to the COP. One professional told us "Naturally a case in the court of protection places demands upon me, which are then passed to the care provider. Particularly in this case as the care plan and potential restrictions needed to be outlined prior to his return home. I must say Eximius were very responsive in these circumstances."

Is the service caring?

Our findings

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

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

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

- Without exception people described being treated and cared for exceptionally well. There was a strong and visible focus from all staff members to ensure people received person centred care. All staff who gave us feedback were highly motivated, compassionate and committed to providing a high-quality service.
- People provided us with a wealth of positive comments about how caring, kind and outstanding the support they received was. Comments included "So far as I am concerned the care which Eximius provides has been of a very high quality", "I have had three excellent carers who each have come for long periods and have been very hard working and caring and a pleasure to have in my house" and "[Name of care worker] is exemplary."
- Relatives were equally as happy with the support provided. Comments included, "I cannot fault their determination and genuine care and compassion to bring my father in law home", "I think they are a good outfit, who employ well motivated, kind and professional carers. I deduce from this that they set out and seek to maintain high professional standards" and "Eximius are reliable and provide the expertise that my father and I need, to ensure that he can live out the rest of his life in comfort and for him to feel secure in his surroundings." Another relative told us "Hand on heart I honestly can't imagine our lives without [Name of care worker] in them, we can relax in the knowledge that our previously vulnerable mum is now happy and safe, able to remain in her own home."
- We routinely received positive feedback from external healthcare professionals who had commented that people's quality of life had improved since the support provided by Eximius Live-in Care Limited. Comments included, "I visited [Name of person] last week and found him to be well settled and growing in confidence and rebuilding some lost skills. The close proximity to his family has fundamentally changed his life and improved his overall wellbeing" and "[Name of care worker] does an amazing job and I am continually impressed by the care, patience and compassion she shows him. [Name of person] is in by far the best shape of any patient I have seen with comparably advanced dementia. I think [Name of care worker] care has been a major part of his good health."

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

- People were supported by care workers who routinely demonstrated real empathy for people. One person told us how "[Name of care worker] just knows, when I need picking up [emotionally], she is skilled in feeling it." The person went onto tell us how the care workers had helped her adapt to her new lifestyle. They told us "We talk about how I like things done, they are respectful to this."
- People were true partners in their care. People were thoroughly encouraged to talk about their care and be involved in decisions. People had not only been consulted about changes made to the service they had

driven change. For instance, one person had asked the service to sign up to a bespoke recruitment agency. The agency was a specialist provider in the person's medical condition. This ensured care workers had the right knowledge to support them.

• People were routinely involved in deciding which care worker would support them. Care worker profiles were sent to people and their relatives. This placed them in control and gave them a sense of self-worth.

Respecting and promoting people's privacy, dignity and independence

- People told us they were routinely and consistently treated with dignity. Respect for people's dignity was a focal point for staff. This was fully embedded into the service and routinely demonstrated in staff training and induction, the services' culture statement and staff meetings.
- Feedback from care workers robustly demonstrated they knew how to promote people's dignity. One care worker told us "No matter how small a task is I always ask my service user for consent, whether its drawing curtains to what they want to wear. I respect their decisions unless they ask me for my opinion then I am happy to say. I always respect the family and friends' times"
- People's cultural diversity and independence was respected and supported. There was a real sense of celebrating what people can do rather than focusing on what they could not. The registered manager told us "Focussing on individuals' strengths and aspirations gives them a foundation on which to build on, it allows them to develop their skills and strengths rather than losing the ability to do them due to their disability." We were provided with many examples of how this was fulfilled in action. One person liked to have their nails and hair dressed in a local establishment. Although the person could not make the appointments due to their disability, the care workers took them on a regular basis to ensure their previous wishes were upheld. Another person was routinely supported with entertaining at their annual country fayre event. This required the service to ensure additional care workers were on stand by to support the person maintain their role in society.
- People were supported by care workers who had been recruited to ensure they could provide a person-centred service. Where a person's first language was not English. Care workers had been recruited who were fluent in the person own language and who understood the culture of the household.
- People were routinely encouraged to celebrate important life events and were supported to maintain their role in life. People were consistently supported to express themselves and explore their chosen lifestyle. One person was supported to celebrate their birthday, as space was compromised the care worker helped the person arrange two separate celebrations. The person had commented to the nominated individual after their invitation to one it was "An elegant tea party." Another person was supported to go to their holiday home in Europe. A relative had commented to the service that they "Couldn't have done it without [Name of care worker]. He was absolutely brilliant... Dad was very happy and got to meet a few people he knows."
- The service routinely provided gifts to people at key times in their year, this included Easter and Christmas present. The presents had been well thought out and really demonstrated the service knew people well. One person had thanked the service for their gift and said, "Thank you all so much for the fascinating book of National Trust, which you have given me for my birthday." The person had been impressed as it had featured a previous home owned by the person's grandfather. We received many more personal examples of how well the service supported people celebrate their culture and family traditions.

Is the service responsive?

Our findings

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

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

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People routinely and consistently received a personalised service which promoted them to have choice and control. Each person had an individualised comprehensive care plan which clearly explained their preferences for care. Care plans recognised people's individuality and detailed the support people needed to maintain their cultural identity, practice their chosen religion and continue family relationships.
- People were supported to live the life they wanted. We were provided with many exceptional examples. For example, one person was supported to move out of long-term residential care placement to move into their own accommodation. The service had been engaged with the person's family, social services and the Court of Protection for nearly a two-year period to support the person's chosen wish to move out of residential care. The feedback from the family was overwhelmingly positive. One family member told us "They were fantastic at planning the transition from care to living at home. Hugely sensitive and knowledgeable to the adjustments that he would face. They were very respectful to feeling that this was his home and the companions were there in the background to assist and support his needs." We were sent photographs of the person spending Christmas with their family, it was clear this was a very enjoyable happy event, which would not have been possible for the support provided by Eximius Live-in Care Limited. A family member told the service "Thank you so much for making this possible!"
- People were routinely supported to receive individualised care. One person and their relative had approached the service due to the person's night time needs. The service worked with the family to secure night-time live-in care. The person told the service "I am so excited" when asked about what their thoughts were about having a live-in care worker. The person went onto explain how the support could enable the family to visit places they used to enjoy like art galleries and exhibitions.
- One care worker told us about how they had recognised a person missed having dogs in the house, with the permission of family the care worker sourced a rescue dog and the person was able to enjoy the company and opportunities for going out for walks with the dog. A relative told us [Name of care worker] on discovering my mums love of dogs arranged to foster a gorgeous Labrador who is literally mums' best friend, this also got mum out walking again, which in her healthier days she used to love."
- We were provided with many examples of how the service worked with external healthcare professionals to maximise people's potential. One person who required support from two care workers with moving position had been told by their previous care agency, that they needed to remain in bed. When Eximius Live-in Care Limited went to meet the person, they told the service how they had longed to have a bath, go out of the home and visit places they had previous enjoyed like the Chelsea flower show. As soon as Eximius Live-in Care Limited started to support the person they ensured essential referrals were made to physiotherapists and occupational therapist to help the person regain some lost mobility and function. We received feedback

the person had subsequently enjoyed many baths and had enjoyed trips out of their home. The registered manager told us "I truly believe that this is a great demonstration of collaborative working and a personcentred approach."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were provided with exceptional care which aimed to break down barriers and help people avoid social isolation. People were supported to be part of their family and re-connect with them. People were routinely supported to engage in meaningful activities. One person who used to enjoy visiting outside spaces had become isolated and lost all confidence to go out, was gently encouraged by the care worker to go for walks outside and sit in the park. Initially the person was anxious and wanted to return home, however, in time the person's confidence grew and more recently they could often be seen sitting in the local park feeding the squirrels. The person's care worker told us "He always has a smile on his face" and "I taught my client how to relax while out in the local park, I started to buy coffee and a bun, we would sit in the sun and he started to take notice of people, dogs and children."
- One person told us they had been anxious about having live in care support. They required two care workers and had been supported previously by another care agency which they were not happy with. They told us Eximius Live-in Care Limited "Thought outside of the box for me", the person went onto tell us how they had support from two care workers, but one lived in and the other lived out. This provided them with two care workers for their waking hours and a care worker to cover the nights. It was clear from how the person described the arrangement it had a positive impact on their family unit. They told us "It is less intrusive, I am less anxious and have much more stability."
- The service supported one person who lived in a rural part of Wales to visit their family member in one of the most southern counties in the UK. The management team meticulously planned the person's journey (A good nine hours) to ensure they could spend Christmas together. They had also arranged other trips for the same person to visit other family members. It was clear from feedback and photographs people and their realties were grateful to the service.
- We were provided with many examples of how the service provided personalised and individualised care. One person wanted to attend a special family memorial service held at Westminster Abbey. The person had particularly complex needs. A trial run was completed by the service to ensure appropriate facilities were available. It was clear there was a genuine commitment by the service to make it happen and for the person to be safe.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were routinely and consistently met. Staff demonstrated an exceptional understanding of how to communicate with people.
- The service understood the way people communicated their wishes. One care worker told us how they had particularly worked with a person who did not use speech to communicate. They told us "He does not understand language or objects, we communicate mostly with facial expressions and guidance. I have always said that my client, taught me, how to understand him." We were given many examples of how care workers 'thought outside of the box' to support and engage with people. One care worker had purchased a 'moon lamp' and an interactive bath light. Both aimed at providing a relaxing and therapeutic session for the person. The care worker had told the family "I like trying things out, sometimes the simplest of things can eventually make a big difference" and I am trying things that he may relate too." The family had been

impressed with the level of dedication and commitment provided by the care worker. This had been particularly important as the person did not use speech to communicate and had been an avid appreciator of music prior to their illness. A family member told the care worker "Amazing [Name of care worker], what wonderful things you are thinking up for him."

- People were supported to have support from independent advocates when needed. The service ensured people were supported to express their views in any format possible. Whether this was through the use of communication aids or a third party.
- People's communication needs were identified, recorded and highlighted in care plans. These needs were shared appropriately with others. Staff had awareness of how to support people express their needs.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy in place. Information was readily available to people and their family on how to raise any concerns.
- Where concerns had been raised we found they had been investigated and responded to appropriately.
- Complaints and feedback were used to drive improvement, learning from them was cascaded across the organisation. The registered manager told us, "I feel I need to ensure the word 'complaint' isn't a taboo topic, but more of an opportunity to reflect on what has gone wrong and how we can improve on this." There was a clear emphasis on an open culture. We were provided with exceptional examples of how responsive the management team had been when care was not delivered as planned. Care workers were replaced within a matter of hours of a concern being raised. The registered manager told us "An accessible complaints procedure resolves complaints more quickly as the complainant feels that they are being listened to and their complaint taken seriously. This sets up an open culture of making sure that abuse will not be tolerated in any form and encourages the complainant to not accept this."

End of life care and support

- At the time of the inspection the service was not supporting anyone with end of life care needs. Where people had been happy to discuss their wishes, this had been recorded.
- The service recognised and respected people's wish to remain in their home. They took a proactive and encouraging role within this and sought to overcome any barriers initially perceived.
- Where people had been supported at end of life it was clear this was done in a dignified, caring and compassionate manner.

Is the service well-led?

Our findings

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

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

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Without exception people, their relatives and external healthcare professionals told us the service was exceptionally well run. People and their relatives told us they received outstanding care. Comments included, "Their positive and gentle encouragement to get back into daily routines has been faultless", "We are eternally grateful to Eximius. They deserve to achieve the credit they're due" and "I consider that Eximius try very hard to keep continuity and are kind and caring towards my sister."
- •The nominated individual and registered manager demonstrated exceptional leadership and management skills. There was a commitment to challenge discrimination at all levels. We were given many examples of how the nominated individual, registered manager, and care workers promoted people's human rights. The service had supported one-person's two-year battle to live in their own home. It was clear from feedback we received the service had challenged the barriers which had prevented it happening before. A relative of the person told us "We would never have got this far if Eximius hadn't offered their sympathetic and understanding ear! I contacted the live-in care hub more than a year ago seeking some assistance. [Nominated individual and [Registered manager] from Eximius were the only people who answered our desperate plea for help. Since that time, they have been so supportive. Even though they were not guaranteed our custom they stood by us and gave us and the solicitor for his case their time."
- •There was a demonstrable commitment by all staff to provide good outcomes for people. People received a person-centred service which promoted partnership working. One person told us "Regarding the management team I have been very impressed how all of them show in many ways how greatly they care about the welfare of their clients and make sure that the care given is of a very high quality and strive to ensure that their clients enjoy life as much as they can within the limitations of their disability."
- •The registered manager not only led by example they created an inclusive and empowering staff team. It was clear throughout the inspection the nominated individual and registered manager had a good understanding of people's needs. The service shared with us many more examples where they had been creative in developing person centred care plans with people. One person had an arrangement for live-in and live-out care workers. The service had been instrumental in sourcing living accommodation for the live-out care worker.

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

• There was a registered manager in post. The nominated individual and registered manager created a clear and solid structure, which promoted positive outcomes for people. One person told us [Name of nominated

individual] as the Managing Director is a very good leader and she and other members of the management team keep in regular direct contact with me with visits from time to time." A relative told us "I had spoken to a number of firms before finding you and the engagement was like going from an Easy Jet carousel on a very bad day straight through into BA's first-class lounge."

- The provider had created a clear culture statement which demonstrated a commitment to provide a high-quality service. This was well communicated to people, their relatives and care workers. One person described the nominated individual as "An exceptional person, with her passion and desire to provide a caring and compassionate service." They went onto say "The service sits above all the rest due to their dedication to provide a high-quality service. One care worker told us "Our vision to provide excellent care and support to continuously improve the quality of our service and to make their lives better." Another member of staff told us "Eximius is a person-centred service that is very well led, with the ultimate goal of providing the highest standards of care and support to all service users and their staff."
- People were supported by care workers who felt looked after by the provider. Care workers were clear about the management structure and described them as "Empathetic", "Understanding," "Very approachable and "Supportive."
- Care workers told us they liked working for Eximius Live-in Care Limited. Comments included, "I feel very much supported by all management because if I have any issues no matter how minor, they are always there to help out. I feel I am not alone", "They have a very positive attitude towards clients and companions/carers. They have a 'can do' optimistic attitude. I have been extremely pleased and happy in my work for Eximius and I would recommend them to any potential client or companion looking for a career in care" and "You could not work for a better company."
- Care workers had support from an employee assistance programme and wellbeing services 24 hours a day.
- The provider had effective and robust systems in place to receive feedback about the service and monitor the quality of the care provided. Each person support or their chosen representative received a weekly call. Feedback from the calls was used to drive improvement in the care delivered.

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

- People told us they were involved in decisions about the service. People were routinely consulted regarding changes to the service. One person had told the service. "I think the planning and pattern of your proposals are excellent." Another person told us how the "Eximius office team have gone to enormous lengths to try to find the appropriate carers for me over the three years that I have been with them." They told us their care needs were complex and the service had listened to what they needed and had truly understood their needs.
- The provider and registered manager regularly met with office-based staff. It was clear from the minutes of the meetings held there was a commitment to provide a high-quality service to people. Care workers told us they felt involved in developments and improvements made. One care worker told us "I am always asked my views and I feel they are listened to."
- People were fully encouraged to take part in the recruitment of new staff. One relative said [Name of relative] and I are very willing and keen to support and be part of the recruitment process." We found the service was flexible in its recruitment of new care workers. For instance, for one person who was moving back to an area where they had previously and worked, the service decided to try and recruit a care worker from the local area. This was to ensure the person received personalised care support and would be able to remind them of events that had occurred in the area.

Working in partnership with others; Continuous learning and improving care

• There was a strong positive working relationship with many external organisations. The service worked

with social and healthcare professionals, Court of Protection, advocacy groups and legal services. We received positive feedback from parties who had worked with the service. All without exception stating the service was extremely well-led.

- The provider was committed to providing opportunities for continuous improvement. The management team received coaching and the nominated individual received quarterly business coaching. This ensured the management team were supported and kept up-to-date with best practice.
- The registered manager had recently completed their Diploma level five in management. They received some very high praise from their tutor regarding their person centred approach.
- The service had worked in partnership with national and local business which championed good practice in care included UKHCA. All helped drive best practice within the care industry. The nominated individual gave us an example of how they had changed practice to improve the service to people. One example was the implementation of a nationally recognised protocol for when a person at risk goes missing.
- The service had supported the nominated individual and registered manager to support people to understand care choices. The management team had presented to a London hospital about live-in care and the benefits. They had also developed a talk which had been presented to local business networks and the University women's club. This aimed to break the taboo of receiving care, break down the barriers and misconceptions of receiving care at home. It was clear the nominated individual was passionate about ensuring people are given information about their care options. People told us this clearly came across when they had met with the nominated individual.
- The service had two care workers nominated in The Great British Care Awards. The registered manager told us "We feel that recognising and rewarding our workers is one of the best ways of evidencing that they are valued and supported, this then resonates though to the whole team." One nominee won the regional dementia care of the year for 2018.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Providers are required to comply with the duty of candour statutory requirement. The intention of this regulation is to ensure that providers are open and transparent with people who use services and other 'relevant persons' (people acting lawfully on their behalf) in relation to care and treatment. It also sets out some specific requirements that providers must follow when things go wrong with care and treatment, including informing people about the incident, providing reasonable support, providing truthful information and an apology when things go wrong. The regulation applies to registered persons when they are carrying on a regulated activity. The registered manager was familiar with this requirement and was able to explain their legal obligations in the duty of candour process.
- Throughout the inspection we found the nominated individual, registered manager the full staff team engaging, supportive and committed to ensuring positive outcomes for people.