

Westmorland Homecare Limited

Westmorland Homecare Temporary Office

Inspection report

75 Stricklandgate
Kendal
Cumbria
LA9 4AA

Tel: 01539725107

Website: www.westmorlandhomecare.co.uk

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Ratings

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

Summary of findings

Overall summary

About the service

Westmorland Homecare Temporary Office provides personal care to people in their own homes in Kendal, South Lakeland and the surrounding areas. 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 our inspection 91 people were receiving personal care.

The service was previously located at another address in Kendal. The provider temporarily relocated to a new office while building work was carried out on their main office.

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

People were exceptionally safe. The provider had extremely robust and innovative systems which made people feel very safe. The staff were exceptionally well-trained in protecting people from abuse. Risks were managed creatively to keep people safe and promote their quality of life. People and their families were involved in decisions about their safety to the maximum possible extent and people's choices were respected. There were always enough staff to support people. People were actively involved in decisions about who would provide their care and who the company employed. Medicines were very well managed and people experienced positive outcomes which took account of their wishes and improved the quality of their lives. People were very well protected from the risk of infection, including during the Coronavirus pandemic.

People experienced very positive outcomes because they were supported by staff who were exceedingly well trained and exceptionally skilled. There was a truly holistic approach to assessing, planning and delivering care. People's care was planned and delivered in line with best practice. The provider used creative and innovative means to support people to maintain a balanced diet and to drink enough to maintain good health. The registered manager had excellent links with local healthcare services. The staff were proactive at identifying people's health needs and ensuring they had timely access to appropriate healthcare support. The registered manager was very knowledgeable about how to protect people's rights, especially people who did not have capacity to make their own decisions. 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 this practice.

People were exceptionally complimentary about how caring the staff were. The staff valued the people they cared for. They routinely 'went the extra mile' to enhance people's lives. The provider carefully matched people with staff that had similar interests and personalities. This supported people to build strong, meaningful and trusting relationships with the staff. The staff and registered manager supported people to express their views about what was important to them and people received care in a way that took account of their wishes and preferences. The staff respected people's privacy and promoted their dignity and independence. They supported people to regain skills and confidence to carry out tasks themselves.

People's human rights, equality and diversity were very important to the service. The staff were supported to understand their responsibilities and to challenge any poor practice they identified.

The service was exceptionally person-centred and responsive to people's needs. The staff thoroughly explored people's background and life history to understand what was important to them and how they wanted their care delivered. People's care was planned and provided to enhance their lives. People felt consulted, listened to and valued. The staff were extremely skilled in understanding and respecting people's diversity, values and beliefs. The provider took a key role in the local community and found innovative ways to combat social isolation. The staff provided outstanding care to people and their families at the end of life. The staff were trained to have meaningful conversations with people about their end of life care and to explore and resolve any concerns they had. The provider had an effective procedure for receiving and managing complaints about the service.

People were extremely positive about the way the company was led and said this was exceptional and distinctive. Everyone we spoke with said they would recommend the service. One person told us, "Tell them how fabulous they are and get other care companies to come and see how it's done." The provider worked collaboratively with other agencies to improve care outcomes for people. The registered manager established positive relationships with local and specialist services to ensure people received outstanding care. People who used the service, their families and the staff were asked for their views and the provider actively tried to involve people to develop high-quality practice and to ensure the continuous improvement of the service. The provider had a strong governance framework to assess and continuously improve the quality of the service.

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

Rating at last inspection: This service was registered with us on 13/03/2019 and this is the first inspection.

Follow up: We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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?

The service was exceptionally safe.

Details are in our safe findings below.

Outstanding 

Is the service effective?

The service was exceptionally effective.

Details are in our effective findings below.

Outstanding 

Is the service caring?

The service was exceptionally caring.

Details are in our caring findings below.

Outstanding 

Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Outstanding 

Is the service well-led?

The service was exceptionally well-led.

Details are in our well-led findings below.

Outstanding 

Westmorland Homecare Temporary Office

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 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

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

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 registered manager 24 hours' notice of the inspection. This was because we needed to be sure the registered manager would be in the office to support the inspection.

Inspection activity started on 14 February 2020 and ended on 15 June 2020. We visited the office location on 14 February 2020 and contacted people and care staff by telephone and email to gather their views between 19 February 2020 and 19 March 2020.

What we did before the inspection

We reviewed the information we held about the service including feedback from the local authority and

notifications of significant events the registered manager had sent to us. 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. 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 registered manager and reviewed a range of records including the care records for three people and four staff files in relation to recruitment, training and supervision. We also looked at a range of records relating to the management of the service.

After the inspection

Due to the Coronavirus pandemic we were not able to return to the office to gather further evidence. We asked the registered manager to provide additional evidence by email and we received email feedback from a range of professionals who worked with the service.

Is the service safe?

Our findings

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

The service was previously located at another address, this is the first inspection for the service at this location. This key question has been rated outstanding. This meant people were protected by a strong and distinctive approach to safeguarding, including positive risk-taking to maximise their control over their lives. People were fully involved, and the provider was open and transparent when things went wrong.

Systems and processes to safeguard people from the risk of abuse

- People were extremely positive about feeling safe. They said they felt exceptionally safe with the support from the staff. They told us this had improved the quality of their lives.
- The staff developed positive and trusting relationships with people that helped to keep them safe. One person said, "I know I am in good hands with Westmorland Homecare, I feel exceptionally safe." A relative told us, "It is a huge peace of mind. One of the reasons we like them is that they are so trustworthy, they make sure they [relative] are safe."
- The provider had developed an innovative approach to safety and risks into its practice. It actively enabled positive risk-taking to maximise people's control over their lives. People were involved in decisions about their safety to the maximum possible extent and their wishes were respected.
- During the Coronavirus pandemic one person who had been advised to 'shield' found being confined to their home had a negative impact on their mental health and wellbeing. The staff gave the person clear advice and information about the risks associated with Coronavirus and they made an informed choice to carry out an activity in the local community. The staff put safeguards in place to support the person to do this safely and to respect their decision. The person told us, "The experience can only be called very beneficial and enjoyable, my mental health was also definitely starting to suffer."
- The staff were exceptionally well-trained in protecting people from abuse. They had completed extensive training to give them insight into how a person at risk of abuse may feel. The staff were highly skilled at recognising when people were at risk of abuse or felt unsafe.
- There was an exceptionally strong culture and awareness towards raising concerns. The staff were proactive about challenging and reporting unsafe practice. The company had a nominated 'speak up' champion who ensured any person raising concerns was supported and encouraged. One staff member told us, "I always report any concerns to the care manager, no matter how big or small, always better to be safe and share concerns with the care manager."

Assessing risk, safety monitoring and management

- Risks were managed creatively to keep people safe and promote their quality of life. People and their families were actively involved in managing their own risks and people's choices were respected. People were enabled to take positive risks to maximise their control over their care and support.
- The staff were skilled at identifying risks and the provider used creative interventions to manage risks while promoting people's choices. This included the use of technology to support people to live safely and independently in their own homes.
- The registered manager had identified risks and how these were to be managed to respect people's

wishes and ensure their safety. There were very detailed risk assessments in people's care records with clear guidance for staff on how to minimise risks and promote people's choices.

- The provider had an exceptionally robust and comprehensive safety management system. This included a thorough analysis and investigation of any safety incidents. They used technology to monitor the safety of the service including tracking staff arriving and leaving people's homes. This ensured visits were never missed and provided an additional safeguard for staff working in remote areas.

Using medicines safely

- Medicines were very well managed and people experienced positive outcomes which took account of their wishes and improved the quality of their lives.

- The service was owned and managed by qualified doctors. The registered manager liaised with people's doctors and local pharmacists to promote people's choices and control of their lives. One person liked a 'lie in' in the mornings. They had been prescribed a medicine to be taken early in the morning but did not want to have to wake early to take the medicine. The registered manager spoke to the person's GP and pharmacist about the medicine being taken later in the morning and this was agreed. The person still received the medicines they needed safely, but at a time that took account of their wishes.

- The service was able to support people who had very complex needs because the staff received additional training in handling medicines. One person was supported to return from a nursing home to their own home because the provider arranged specialist training for the staff in managing their medicines.

- The provider ensured medicines were managed in line with NICE guidance and the service was a lead in the area for medication best practice. The registered manager had identified the document local pharmacies provided for recording medicines the staff had given to people did not meet NICE guidance. He met with local GPs, pharmacies and community health staff to highlight the issues with the records and led on work to introduce a uniform document which fully met NICE guidelines. This led to improvements across the whole area in medicines information sharing and practice.

Staffing and recruitment

- The registered manager carefully assessed staffing levels to ensure there were always enough staff available to meet people's needs. They maintained staffing at a level where the service could respond very quickly and safely if people's needs changed and they needed a higher level of care. This had prevented one person having to move to residential care against their wishes. Another person was supported to return from hospital to their home at the earliest opportunity.

- The provider operated thorough, values based recruitment. The registered manager carried out robust checks on all new staff to ensure they were suitable to work in people's homes. One person told us, "They have rigorous recruitment procedures. They know what to look for in a carer, they just don't take anybody."

- People were actively involved in decisions about who would provide their care and who the company employed. People received care from a small team of staff who they knew and trusted. The staff were always introduced to people before they worked in their homes. People who wished to could also be included in the process to recruit new staff.

Preventing and controlling infection

- People were extremely well protected from the risk of infection. The staff were trained to a high standard in preventing infection. The registered manager kept up to date with government guidance on infection control during the Coronavirus pandemic. He ensured the staff received the training, equipment and support they needed to keep themselves and people they cared for safe.

- The provider had been included in developing national guidance for home care services in how to protect staff and people receiving care from infection during the Coronavirus pandemic.

Learning lessons when things go wrong

- The provider had robust systems to ensure lessons were learnt from any incidents. Any incidents or 'near misses' were investigated thoroughly to identify how the safety of the service could be further improved. The outcomes of investigations were shared with the staff team to ensure learning.

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.

The service was previously located at another address, this is the first inspection for the service at this location. This key question has been rated outstanding. This meant people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

Staff support: induction, training, skills and experience

- People experienced very positive outcomes because they were supported by staff who were very well trained and exceptionally skilled. The service provided consistent high-quality care because there was a strong emphasis on ensuring staff development and training.
- The provider sourced training to meet individuals' complex needs to give staff the skills to provide high-quality care. This had supported people to continue to live at home instead of requiring residential or hospital care. People had also been supported to return home from hospital and from residential care, in line with their wishes.
- People said the staff were highly trained and provided the highest standard of care. One person said, "I have never seen such consistently good care and of such a high standard." Families of people who had been cared for by the service had also written to the provider to express their thanks. They described the staff as 'amazing' and the care as 'exemplary'. One family wrote, "You are all amazing, you have made a huge difference to our lives."

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

- There was a truly holistic approach to assessing, planning and delivering care and support. The individual, their family and other services who supported them were included in the assessment and planning of their care to achieve effective outcomes which enhanced people's lives. People said they were included in planning their care and their views and wishes were listened to.
- The staff worked cooperatively with other services to ensure people's care was based on best practice to deliver outstanding outcomes for people. One specialist healthcare professional said, "I have worked with Westmorland Homecare over the last year on a number of cases where they have been commissioned to provide bespoke support services in the community setting for our client group to progress achievement of individual rehabilitation goals. This allows us to meet the continued rehabilitation need for individual clients in a timely manner. We have had a number of challenging and complex clients that continue to be supported in a holistic approach that places the client and family/support network at the centre of the process."
- The provider had strong relationships with partner organisations and had developed strong partnership working to improve people's care. The directors had developed good relationships at all levels up to executive team at the local NHS trust and presented to the trust board on collaborative working and shared decision making. This directly led to an early discharge pilot scheme between Westmorland Homecare and the trust which had reduced risks around discharge and enabled early discharge from hospital for 16 people.

People had been supported to return home from hospital promptly, in line with their wishes. This had also relieved pressure on the local hospitals.

- The provider had a strong relationship with the United Kingdom Homecare Association Ltd (UKHCA) which is the professional association of home care providers. The company directors had worked at a national level to contribute to the development of national best practice and national guidance. One of the directors was part of the policy group on the use of Personal Protective Equipment during the coronavirus pandemic, contributing to the national guidance the UKHCA produced. This guidance helped care staff in all homecare services to protect themselves and people they cared for from the risk of infection.

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

- The staff were very proactive in meeting people's needs in relation to maintaining a balanced diet and drinking enough to maintain good health. They were trained to be particularly skilled in identifying and meeting people's nutrition and hydration needs. The registered manager had developed positive relationships with the local dietician team and sought and followed their advice to meet people's complex needs
- The service supported one person who had specific requirements around their diet. The staff worked with the person and their dietician's advice to identify foods the person liked. They then created a personalised diet plan which incorporated these foods whilst meeting the individual's specific dietary needs. This supported the person to enjoy a balanced diet which maintained their health.
- The provider found creative and innovative means to support people to drink enough. They had purchased 'reminder cups' which gave a pre-recorded alert and flashed if a person had not taken a drink from them for a set period of time. This supported people's independence and supported them to remain hydrated, reducing the risk of people becoming dehydrated.
- People told us the staff supported them to enjoy their meals. They said the staff took people 'treats' such as fish and chips, which they greatly enjoyed. One relative said, "[Relative] likes scrambled eggs and they [staff] are all competing to make the best scrambled eggs for her."

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

- The service had excellent links with local healthcare services. The staff were proactive at identifying people's health needs and ensuring they had timely access to appropriate healthcare support. People told us the staff identified any changes in their health and supported them to access health services as they needed. The staff advocated for people to ensure they received the healthcare they needed.
- The staff knew people they supported very well and sought prompt support if they identified a person was unwell. One relative told us, "They [staff] are very attentive, and they call me if there is the slightest worry, they are on it if something isn't quite right." Another relative said, "The team were extremely helpful in dealing with the district nurses, most tactfully, but effectively so."
- People's care records included details of the healthcare services which supported them. They also included guidance for staff to monitor people's health, where people required this support.
- The provider had received positive feedback from local healthcare services, praising the staff for how they worked cooperatively to support people to maintain good health.

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 for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The provider had advanced practice around consent and the MCA. The registered manager was proactive in protecting people's rights, especially people who did not have capacity to make their own decisions.
- The registered manager identified one person was facing significant difficulties as they no longer had capacity to handle their finances and had not nominated anyone to have lawful authority to do this in their behalf. The registered manager followed best practice by working with other professionals to try to support the person to set up a Lasting Power of Attorney, (LPA) to handle their financial affairs. Despite the support provided, it became evident the person was not able to make the decision to create the LPA. The registered manager made an application to the Court of Protection for a court-appointed deputy to manage the person's finances on their behalf. The intervention by the registered manager ensured the person continued to be able to remain in their home, receiving the support they needed.

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.

The service was previously located at another address, this is the first inspection for the service at this location.. This key question has been rated outstanding. 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;

- People were overwhelmingly positive about the service and were exceptionally complimentary about how caring the staff were. People valued the service greatly and said it enhanced their lives. One person said, "This is what being cared for truly feels like. It's wonderful." Another person told us, "They [staff] are natural carers with empathy with people."
- The provider had also received very positive feedback from people who used the service and their relatives. One person said, "Your carers are absolute heroes and deserve recognition in this current crisis."
- The staff valued the people they cared for. They told us they treated people as they would wish their own families to be treated. One told us, "Each one of us treats the clients as if they were our grandparent or a family member. This makes a huge difference to the client. I go above and beyond my role. I look after the whole person, (and home), not just needs of that client."
- The provider and staff routinely 'went the extra mile' to enhance people's lives. One staff member supported a person to use technology to contact their relatives during the Coronavirus pandemic. The individual told the provider, "I can't begin to tell you how wonderful it felt being able to connect across all these miles."
- During the pandemic the provider teamed with a local supermarket to deliver a free Easter egg to people they cared for who were self-isolating. One person wrote to the provider to share how this had enriched their life. They said, "I would like to thank you so much for the gift of the Cadburys Easter egg with a Peter Rabbit soft toy, for those that live alone. We are able to emulate the portrayal of Beatrix Potter in the BBC DVD of that same name and talk to the little creature. It sounds a little crazy but I wanted you both to know that it was a stroke of genius on your part, as was the founding of your organisation."
- The provider carefully matched people with staff that had similar interests and personalities. This supported people to build strong, meaningful and trusting relationships with the staff. People told us this improved their quality of life. One person said, "They do well at matching staff with clients and I couldn't have picked a better team myself. It has made such a difference to me. I always look forward to seeing them."

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

- The staff and registered manager placed people fully at the centre of their care and respected the decisions they made. They supported people to express their views about what was important to them and people received care in a way that took account of their wishes and preferences. One person told us, "They [staff] bend over backwards to accommodate our needs."
- The management team understood some people found it challenging to need to arrange care for

themselves or their relatives. They supported people to obtain the information and support they needed. One person said, "They helped and guided me through the early process in starting with them."

- The registered manager had links with local advocacy services which could support people to express their views and to make important decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- The staff respected people's privacy and promoted their dignity and independence. People told us the staff were always very friendly and respectful. They said the staff always provided their care in private and respected their privacy and dignity.
- People told us the staff were skilled at making people feel comfortable and confident so they could receive the support they needed. One relative told us, "I am surprised [relative] lets them shower her. She is not embarrassed, she has confidence in them."
- The staff supported people to maintain and to increase their independence. Everyone told us the staff supported them to do as much as they could for themselves. The staff supported people to regain skills and confidence to carry out tasks themselves.
- People's human rights, equality and diversity were very important to the service. The service had identified 'champion roles' in human rights, dignity and respect and LGBT to support staff to understand their responsibilities and to challenge any poor practice they identified.

Is the service responsive?

Our findings

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

The service was previously located at another address, this is the first inspection for the service at this location. This key question has been rated 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

- The service was exceptionally person-centred and was adaptive and responsive to people's needs. People and their families were included in all aspects of planning their care. The staff thoroughly explored people's background and life history to understand what was important to them and how they wanted their care delivered. People felt listened to and valued and their care was planned and delivered to enhance their lives.
- The staff were extremely skilled in understanding and respecting people's diversity, values and beliefs. They supported people to maintain lifestyles and choices which were important to them.
- The service took people's needs into account and provided the staff with highly personalised training to meet individuals' needs. They had excellent links with specialist health professionals and services who provided guidance and training to meet people's needs. Bespoke training had also been developed and provided to meet individual's needs. This had supported people to return from hospital and from care homes to live in their own homes.
- The provider was able to respond very promptly to changes in people's needs, including increasing the amount of care provided to people. This had supported people to remain in their homes as they needed more support.
- The provider took a key role in the local community and found innovative ways to combat social isolation. They supported people to follow interests they had previously enjoyed, which enhanced their quality of life. The provider ran free monthly social clubs to help people build and maintain a social network. People who did not receive support from the service could also attend the social clubs. This supported people to interact with their community and to reduce social isolation and loneliness.
- Each person had a detailed care plan which guided the staff on how they wanted their care to be provided. The care staff said they knew how to support people because this was detailed in their care plans. People's care plans were reviewed regularly, and if their needs changed, to ensure they gave the staff up-to-date information.

End of life care and support

- The service provided outstanding care to people and their families at the end of life. People were supported to express their wishes about how they wanted to be supported as they reached the end of their lives. The registered manager had worked with the local hospice and district nursing teams to put specialist training in place for staff. The staff worked with specialist services to ensure people experienced a comfortable, dignified and pain-free death.
- A relative of a person who had been cared for at the end of their life wrote to the directors of the service

and said, "The care you gave to [relative] was exemplary. You treated [relative] with dignity, respect, kindness, gentleness and extreme patience. [Relative] was able to retain his identity to the very end. I can only thank you all for being there for him and for me."

- The staff were given the opportunity to specialise in end of life care if they chose. They had completed training in advanced care planning and were able to have meaningful conversations with people to explore and resolve any concerns they had.
- The provider continued to support families, if they needed, after their relative had died. They provided a 'Caring after care' service where they offered emotional support and friendship to families by phone call, visits in person or by being supported to attend the company social club. One person who had been supported by the Caring after care service said, "It is absolutely lovely, we can talk about [relative] and it means so much to me."

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.

- The registered manager assessed people's communication needs to identify how they needed information to be provided. This was recorded in people's care records to guide staff on how to share information with them. The provider had a range of information available in alternative formats to ensure they were accessible to people.

Improving care quality in response to complaints or concerns

- The provider had an effective procedure for receiving and managing complaints about the service. The registered manager thoroughly investigated any complaints received and used concerns raised to identify how the service could be further improved.
- People told us they would contact a member of the service management team if they had any concerns about the care provided. No one we spoke with had needed to make a complaint as they were happy with the service received.
- The staff knew how people could complain about the service. They told us they would be confident supporting someone to complain if they required assistance to raise any concerns.

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.

The service was previously located at another address, this is the first inspection for the service at this location. This key question has been rated 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

- People were extremely positive about the way the company was led and organised. They said the way the service was led was exceptional and distinctive. One person told us, "Every care company should take note of them. I have nothing but admiration and praise for them." Another person said, "Tell them how fabulous they are and get other care companies to come and see how it's done." Everyone we spoke with said they would recommend the service.
- People had also contacted the provider to share how the service had enhanced their lives. One person had said, "You are all amazing. You have really made a difference to our lives." A relative had written to the registered manager in praise of how the service had achieved positive outcomes for their family member. They said, "Thank you from me for everything you have done for [relative]. It is a lot to do with your amazing care that he has done so well over the last few months and to be honest I am just amazed what he has achieved."
- Healthcare professionals had also told us the staff provided excellent, person-centred care. One told us, "It is apparent that the wellbeing of their clients is paramount to them. I have had reports from my patients about the excellent care they receive."
- Staff told us they felt motivated and proud of the service. They told us they were able to provide outstanding, person-centred care which achieved highly positive outcomes for people because of the culture in the service and the commitment of the managers. One staff member said, "I think Westmorland Homecare is brilliantly managed I have never in my life worked for a more conscientious, caring company." Another staff member told us, "They [managers] are very supportive and have a passion for caring for staff and clients. I have never worked for such a supportive company before in my career and love to go to work."

Working in partnership with others

- The provider worked exceptionally well with other agencies to improve care outcomes for people. The registered manager established positive relationships with local and specialist services to ensure people received outstanding care. This had supported the safe, early discharge of people from hospital and supported people to return from residential care to their own homes.
- Services which worked with the agency were very positive about how they worked in partnership to ensure people received the highest standard of care. One healthcare professional said, "The team, led by [registered manager], have been a pleasure to work with. Their focus on the patient experience is commendable ... We have only had good feedback about the care they provide and the team are real

partners in innovation and improvement." Another healthcare professional had contacted the registered manager to praise the work of the staff. They said, "We would like to express our gratitude for the support you and your team give to our community team on a regular basis."

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

- Staff and people who used the service were seen as the most important contributors to how the service was run and their feedback shaped the future of the organisation. The provider actively tried to involve people to develop high-quality practice. The company carried out regular surveys and reviews to ensure people's views were heard. New clients were contacted within the first seven days of care starting to check they were happy with the care provided. They were then contacted after one month and again after three months. During this time people could suggest any changes they wanted and these were arranged.
- People told us the provider was fully committed to seeking their views to further improve the service they received and contacted them in the way they preferred. One person said, "The care coordinator rings us or emails to make sure everything is ok with their care or is there anything we need to discuss." Another person said, "They send emails to ask if there is any way they can improve on the service."
- The provider used formal and informal ways to gather the views of the staff to improve the service. The staff said they felt involved in how the service developed and were proud of the care they delivered. One staff member said, "I feel we are all one big team; everyone has an important voice no matter how small."
- The service was an important part of its community. The provider developed community links to reflect the changing needs and preferences of the people who used the service. They led in making improvements for the local community including setting up a monthly social club which was open to the public. They invited children from a local primary school to attend the social club to join people in a variety of intergenerational events and projects. This provided positive outcomes for people attending the social club and the school children. The headteacher of the school said, "As a small rural school we value this partnership and the opportunities it provides us to be part of our wider community"

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The provider, registered manager and staff were very clear about their roles and responsibilities. The staff felt very well supported and were confident they provided outstanding care to people. One staff member told us, "My managers are great. If I've ever had any problems, I can approach them for help, guidance and support."
- The provider and registered manager were committed to the continuous improvement of the service. They had developed a strong governance framework to assess and continuously improve the quality of the service. They held regular 'quality matters' meetings to which staff, people using the service, advocates and families were invited. They also contracted with an external compliance consultancy to review the quality and safety of the service. Any actions identified to further improve the service were implemented as a priority.

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

- The provider and registered manager understood their responsibilities under the duty of candour. They were aware of the need to be open and transparent with people if incidents occurred where the duty of candour applied. People told us the registered manager was always open with them and said they would be confident speaking to him if they had any concerns.
- People told us they knew the directors of the organisation and said they made themselves available to people who used the service and their families. One person said, "I have had contact with the two people at

the top and they are very concerned with what is going on."