

Dorset Home Care Limited

Home Instead

Inspection report

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Ratings

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

Summary of findings

Overall summary

About the service

Home Instead is a domiciliary care agency which provides care and support to people living in their own homes. At the time of the inspection 17 people were receiving assistance with personal care.

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.

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

Everyone we spoke with praised the care and support they received. All said they would recommend the service. One person told us they had started using the service because it had been personally recommended to them.

People were supported by a management and staff team who were exceptionally kind and went over and above their job role to make sure people were content and comfortable with their care. People we spoke with commented on the kindness and friendliness of the care workers who visited them and the office staff. People said that all staff were approachable and sorted out any issues or concerns they had.

Staff who worked for the agency were called 'care givers'. They were matched to people to enable them to build trusting and effective relationships with the people they supported. People were extremely positive about the care workers who visited them and said they had been well matched. People felt listened to and in control of the support they received. We heard how the matching process had enhanced and improved people's well-being.

People felt involved in all decisions about their care and thought that care workers promoted their independence and dignity. In some cases this had led to improvements in people's health and confidence which had reduced the amount of care they needed.

Care workers worked in partnership with other professionals and helped people to achieve their goals. This had included supporting one person to visit the sea front to listen to the waves and another to attend a music festival.

The agency was well led by a management team who were passionate about providing high quality, person-centred care. Care provided was individual to each person and was flexible to meet changing needs and wishes. Where a person's needs could no longer be met by the service the care worker had supported them to settle into a new environment.

There were systems in place to schedule visits, respond to emergency situations, monitor the quality of care provided and make improvements where necessary. People told us the service was reliable and care

workers turned up when planned.

People were supported by small groups of care workers who knew them well. Care workers monitored people's health and well-being and supported them to seek medical advice and treatment when needed.

People felt safe with the staff who supported them. All said that care workers were respectful of them and their property.

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.

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 30/09/2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date the service was registered.

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 safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

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.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Home Instead

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

This inspection was carried out by an inspector who visited the service's office and an Expert by Experience who made telephone calls to people who used the service and their family members.

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 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 a short period of notice of the inspection because it is a domiciliary care service and we wanted to make sure we could speak with managers and staff during the visit.

We visited the office location on 13 October 2021. Calls to people who used the service and their family members were made on 14 October 2021.

What we did before the inspection

We looked at all the information we had received from and about the service.

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We used all of this information to plan our inspection.

During the inspection

We visited the agency's office and spoke with five members of staff, the registered manager and the provider's nominated individual (the person responsible for supervising the management of the service). An Expert by Experience spoke with five people who received care and support and nine family members of people being supported.

We viewed a sample of records connected with people's individual care and the running of the service. These records included four care and support plans, three staff recruitment files, minutes of meetings, records of complaints and compliments.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We requested some records regarding quality assurance to be sent to us and these were received in a timely manner.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt very safe with the care workers who supported them or their loved ones. Comments included; "I feel very safe and comfortable, I have the same carer and that helps, you get to know them" and "I absolutely feel that my relative is safe and very content, they will often say 'I get better treatment than the queen.'"
- Risks of abuse to people were minimised because staff knew how to recognise and report abuse. Care workers said they were confident that if they reported any concerns to the management team they would be taken seriously and investigated.
- Where concerns had been raised the registered manager had worked with the local authority to make sure people were safe.
- All care workers were introduced to people before they carried out support visits and all carried photographic identification. This made sure people knew who would be visiting them and were able to check their identity, before allowing them into their homes.

Assessing risk, safety monitoring and management

- Risks to people were minimised because risk assessments were carried out which enabled support to be put in place to minimise identified risks. This included ensuring people had the equipment required to promote their safety.
- The provider carried out environmental risk assessments to make sure staff were able to safely access and move around people's properties. This included identifying where utility shut off taps were if needed in an emergency.

Staffing and recruitment

- People were supported by staff who had been safely recruited. Records showed that staff did not commence work with people until checks had been carried out and references had been obtained.
- There were sufficient staff to meet people's needs. People were matched to care workers and only received their care and support from care workers who they knew. Care workers told us they were allocated to the same people each week which enabled them to build strong and trusting relationships. People told us they always saw the same care workers. One person said, "I have the same carers, they come every day, sometimes one of the seniors comes."
- The registered manager and provider said they only agreed to provide care to people if they had the right care workers to meet the person's needs.

Using medicines safely

- People received their medicines safely from staff who had received specific training and had their competency to administer medicines assessed.
- The provider operated an electronic care plan and monitoring system which staff operated from a smart phone. If a person required medicines to be administered during their visit this was recorded as a task which needed to be completed. If this task was not completed an alert was created which went straight to office staff, and this was then followed up. This ensured people had the right medicines, at the right time.

Preventing and controlling infection

- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for staff.
- We were assured that the provider's infection prevention and control policy was up to date.
- Care workers were being kept up to date and were working in accordance with government guidance. Checks were carried out by senior staff to make sure care workers were following all guidelines when supporting people in their own homes.
- People told us they felt safe because care workers always wore personal protective equipment when they supported them. One person told us, "I feel safe and well. On every occasion they come they always have aprons, gloves and masks."

Learning lessons when things go wrong

- People told us they would be happy to raise concerns with the management of the service and were assured improvements would be made as a result of their feedback. One person said they had raised an issue and it had been dealt with. They told us improvements had been made and "It is fine now."

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.

This is the first inspection for this newly registered service. This key question has been rated Good. 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

- People had their needs fully assessed before they began to use the service. Assessments took account of people's lifestyle choices, interests and wishes as well as their physical needs. This helped to make sure people's needs and expectations could be met.
- People's care was provided in accordance with their wishes and choices. Staff told us the service was very flexible so that it fitted into people's routines. One care worker said, "Everything is about what the client wants. They are the ones in charge." One person told us, "My relative set everything up with the agency. We discussed everything that I needed from them and they do anything I ask of them."
- Care workers had access to care plans which were personalised to the individual and gave them the information they required to support the person safely and effectively.
- People's care plans contained information about the outcomes the person wanted support to achieve. These were very personal to the individual and showed that staff had assisted people to achieve their wishes in some cases. These included supporting a person to visit the sea front.

Staff support: induction, training, skills and experience

- People had confidence in the skills and competence of the care workers who cared for them. One relative told us, "Our carer is very experienced, she knows about all the equipment that we need, they all understand their very complex needs." One person said, "I think that they get training, they know what they are doing and are so helpful."
- Staff had access to a range of training and vocational qualifications to make sure their practice was in accordance with best practice guidelines and up to date legislation. One care worker said, "The training is brilliant." Another said that they had changed their approach to a person because of training and felt it had been beneficial in reducing the person's anxiety.
- People continued to be supported by well-trained staff during the COVID-19 pandemic. Staff were able to continue learning and refreshing their knowledge through on-line training.
- Care workers felt very supported by office staff and the management of the service. One care worker told us, "The office staff are brilliant. You know they are always in the background to support you."
- People received care and support which met their specialist needs because care workers received individual training which was appropriate to the person. For example, where someone required a specific piece of equipment to help them, care workers received training in the home environment.
- The service worked with other organisations to ensure staff had the most up to date skills and knowledge to support people. This had included working with Parkinson's UK to ensure staff had the specialist skills

required to provide effective care and support to people living with Parkinson's disease.

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

- Care workers supported some people with meal preparation. One care worker told us the person they supported was initially reluctant to eat and drink well. However, by including the person in food shopping and cooking their appetite had improved. They had also purchased a new style cup which had increased their fluid intake.
- Care workers made sure people had drinks within reach so they could help themselves when they were on their own. One person said, "They always leave me a flask of tea and a bottle of water."

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

- People were supported by care workers who monitored their health and shared information appropriately with other professionals. One relative told us, "They record all the medication on charts, also fill in food intake and liquid intake. The specialist nurse that comes finds this very useful, knowing the patterns."
- People were supported to access healthcare services if appropriate. Some care workers assisted people to attend medical appointments if people wanted them to. One person told us, "If I needed them to, they would help me go to the doctors and any other appointments."
- Care workers knew the people they visited well. This enabled them to identify changes and seek medical advice and support if needed. Care workers told us if someone was poorly, they would always help them to contact healthcare professionals. All staff received training in basic life support and knew how to respond to emergency health situations.
- People and their relatives had confidence that care workers would act appropriately if someone was not well. One relative told us, "If the carers have any concern in regard to [relative's] health, they don't hesitate to let me know and they will ring the surgery or district nurse for advice."
- People received co-ordinated care because staff worked with other healthcare professionals to meet people's needs. This had included working with occupational therapists to help people to increase their mobility. One person had written on a feedback form that their care giver helped them with rehabilitation exercises which had greatly improved their walking. Healthcare professionals had given feedback to the service about how well they worked with them to achieve positive outcomes for people.

Adapting service, design, decoration to meet people's needs

- The provider had supported people to ensure they had the equipment they require to meet their needs. This had included helping people to source specialist beds, mattresses and lifting equipment to promote their well-being and independence.
- Care workers had access to, and training regarding, any equipment required to effectively support people. One person commented, "The carers have all the equipment they need and share their experience with us, they have lots of life experience of how to support people and if they don't know they will find out."

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.

- People were always asked for their consent. Care workers told us that they only ever supported people if they were happy for the support to go ahead. One care worker told us, "Everything we do is their choice." People told us the care they received was always in accordance with their wishes and consent.
- Staff received training about the mental capacity act when they started work and understood the importance of helping people to make their own decisions.
- People who lacked capacity to make decisions for themselves had their legal rights protected. Care plans contained information about others who had been given legal authority to make decisions for the person.

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.

This is the first inspection for this newly registered service. 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.

Respecting and promoting people's privacy, dignity and independence

- The service had a strong emphasis on encouraging people to maintain their independence. Care workers told us they worked in partnership with the people and liked to do things, "With people, not for them."
- People felt that care workers respected their right to do things for themselves and make their own choices. Several people commented on how the care workers helped them to stay independent. One person told us, "They encourage my independence; they will help me to the bathroom and stay just outside the door." A relative said, "They are all very kind and [person's name] is never rushed. They are very independent, and they respect that, letting them do as much as they can for themselves."
- Care workers worked with people to increase their independence. We heard how one person had originally needed support three times a day. With the support and encouragement of care workers they had increased their physical and emotional abilities. This meant they had been able to reduce the level of support they required to once daily. One person told us, "I always know what the carer is going to do. She encourages me. One carer I used to have got me doing exercises. They tell me how well I'm doing and how pleased they are with me. I am hoping to try and walk with their help."
- People received support with personal care in a dignified way. One person said, "I feel that they respect me and are mindful of my dignity." A relative said, "My [spouse] is a very poorly person and they bring dignity to their life."
- Care workers were respectful of people's property and privacy. One person said, "I have complete faith in their care, they are very respectful of us and our things, they leave everything nice, cleaned and folded." Another person commented, "They are all very professional, they are confidential, they don't speak about other clients or pass on gossip."
- People told us they were able to choose a male or female care worker and their decision was respected.

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

- People were treated with exceptional kindness. Everyone we spoke with praised the kindness and attitude of the staff who supported them. One person told us, "They are all so kind, when they come in, I look forward to seeing them as a friend, not just a carer." Another person said, "They are very caring and do anything to help me, they are more than kind and are good listeners and give me some good advice."
- Care workers we spoke with demonstrated a genuine respect and affection for the people they supported. One person told us their care worker had helped them to plant a tree in memory of their spouse. A relative said, "I can see real genuine affection for [person's name.] When they haven't been well, they get really upset

about it, I know that they worry about them and they message me regularly."

- The registered manager and provider led by example to ensure people were treated well and respected. One care worker told us, "We are totally non-judgemental, and discrimination of any kind would not be tolerated." A relative said care workers did not judge the person because of their disability but totally respected them as a person. They said about their relative, "Their communication is limited but they [care workers] will listen to what they have to say and they give them choices whatever the circumstances, they are so patient."
- People were matched to care workers who shared their values and interests. One care worker said about a person they supported, "We have the most amazing relationship. We were like minded souls from the beginning." One relative told us, "The lady who comes to my relative is absolutely fantastic and has such a good rapport with them, my relative's face lights up when she sees her." A person said, "They seem to match people up well with the carers, we get on very well."
- People and staff all felt valued. The service was running a competition for care workers and people had been asked to give feedback about the care workers who visited them. Comments included, "Cheerful attitude, just brightens my day," "Kindest person I know" and "Wouldn't be able to manage without them. They have made my life worth living again." One person told us they thought it was a lovely idea to be able to share good news stories about their care worker.
- The management and care workers went the 'extra mile' to show appreciation and value to people. For example, at Easter the registered manager and provider had personally delivered Easter hampers to everyone who used the service. They also made sure staff and people always had birthday cards and helped people to celebrate special events. One person told us, "The care they give is just one of the outstanding things about them." A relative commented, "In my view they go the extra mile."
- Care workers demonstrated a commitment to the people they supported. We heard stories of when care workers had gone over and above their job role to make sure people were comfortable and content. For example, when there had been a power cut in a person's home the care worker sourced blankets and torches and stayed with the person until their family arrived to support them. One care worker said that a person they supported was living with dementia and had memory difficulties. They had made a memory book for the person which provided comfort and helped the person to remain calm and settled.
- People were supported by care workers who they were able to build strong relationships with. The relationship between the care worker and the person receiving support was considered as important as the physical care provided. The minimum time of each visit by care workers was one hour. This meant that people were never rushed and had time to get to know their care worker. One person said, "They are a real support to me and have become my friends not just carers."
- People were supported when their needs could no longer be met by the service. For example, one person had needed to move into 24-hour care. The care worker had supported this person with the move and continued their contact to help the person settle and be comfortable in their new home. The relative of this person told us how beneficial this had been for them and their relative. They told us, "I feel confident now that the carer will pick up any issues and also help the nursing home staff understand my relative's needs better, with the carer there for added support. My relative's day just lights up when they see the carer."

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

- People were fully involved in planning and reviewing their care. The registered manager met with everyone who wished to receive a service to assess their needs and work out a care plan with the person. All care plans we saw showed how people had been involved in the formation of their plan.
- People and their representatives felt they continued to be in charge of their lives and the care they received. One relative told us, "I told them what care [person] needed and they have stuck to that, I think they listen to me and have the training necessary to support [person] well." A person said, "When they come

through the door the first thing we do is have a staff meeting, we have a coffee and discuss anything that they can do to help, they are more than happy to do anything, we also manage to laugh a lot." Another person commented, "When we set it all up, I did a diary for the day so I was clear in my mind what we needed, we stick to the pattern of that. Home Instead follow the plan."

- People continued to be involved in planning their care as long as they received a service. 24 hours after a person started to receive a service, they were contacted to make sure they were happy with what had been put in place. They were then contacted again after two weeks to find out if the package of care was meeting their needs. This gave people opportunities to make adjustments and share their views. Regular reviews continued whilst the person received support from the agency.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

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

- People's care and support was planned and delivered in a way that met their needs and enabled them to remain in control of their lives. People's likes, dislikes and interests were fully explored at the initial assessment stage. This enabled their package of care to be tailored to their specific and individual needs. One member of staff told us, "The difference between this and other agencies is, this is 100% person centred."
- The service was responsive to people, and their families, and was available 24 hours a day every day. This meant that people could meet with the registered manager or provider outside normal office hours at times which suited them. These meetings could be arranged face to face or by video call if people were unavailable to attend in person.
- The service responded to people in urgent situations to make sure they received the care they required to meet their needs. For example, when a person had been let down by another care agency on New Year's Eve the registered manager attended at short notice to carry out an assessment. As no other care worker was available to commence the package of care the registered manager carried out the first two days of the live-in care package to make sure the person's needs were met. We saw feedback which showed how grateful the person was.
- Care workers knew the people they supported really well. This enabled them to provide care which truly met their needs in the way they chose. One relative told us, "They are so patient and kind, they will play games with them and constantly chat, they know their favourite foods and know about them. I feel they really care for them and make them feel loved. They go the extra mile." Another relative said, "They are so very good. I am really happy with how they are with my relative; they are very respectful and they seem to really like them, they seem to find imaginative ways to encourage them to do things."
- There was a matching process which ensured people and care workers were matched together to enable them to achieve a good and effective relationship. People were matched with care workers with similar interests to enable them to discuss and enjoy things together. One person told us, "Sometimes I get depressed and worry and they listen to my problems and sort things out when they can."
- The skills of staff and trusting relationships that people were able to build with the care workers led to good outcomes for people. One relative had provided feedback to the provider which said, "Our 95-year-old [relative] is so much more focused, is talking more and enjoys their visits, even letting them help her with her personal care: up until now she wouldn't let anyone near her. She seems generally so much happier which of course means we are too. It has changed our lives for the better and we now get more quality time with [relative]."
- Care workers told us how they had built relationships with people which had resulted in improved well-

being for the person they supported. One care worker said about the person they supported, "When I met them, they were quite low in mood, but we share some interests and they have really blossomed. Starting to take an interest in things more."

- The service was responsive to people's changing needs and were able to adapt the care they provided. One person told us, "They listen to me and I talk my thoughts through with the girls and we change things if needed." A relative said, "The carers adapt, they [relative] used to go to bed much later but they are ready to settle earlier now and the carers just adapted. They are aware of when they are depressed and change things to jolly them along."

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 assessed as part of their initial assessment. This helped to make sure people were matched to care workers who would be able to communicate effectively with them.
- People who used the agency received their care and support from a very small number of care workers. This consistency meant that care workers got to understand people and any non-verbal communication.

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 and care workers were matched together to enable them to share interests and hobbies. We heard from care workers and saw photos of people and care workers taking part in activities together. One person went swimming with their care worker, one had attended a music festival and there were photos of people enjoying crafts together.

- Care workers we spoke with were very aware that people had experienced social isolation during periods of national lockdown. They told us they had helped people to stay connected to loved ones and made sure the time they spent with people provided social stimulation as well as meeting their care needs. People were offered the use of a tablet device, specifically adapted for use by older people, enabling them to remain connected with family.

- The registered manager and provider had been innovative in helping people to occupy their time during the pandemic. This had included asking people for their top parenting tips on Mother's Day and developing and distributing an activity book with crosswords, puzzles and sudoku. At Christmas and Easter, gifts were given to people. Some of these were delivered by the provider, giving people an opportunity to meet them and chat with them.

- Care workers helped people to plan and take part in social activities. For example, one care worker had helped a person arrange an afternoon tea with people from a charity they supported. Another care worker had supported a person to visit their spouse in a care home to celebrate a special occasion.

- The service found out about people's past lives, hobbies and interests to enable them to share their experiences. For example, one person was very interested in sharing their life story and past experiences to inspire the younger generation. This interest had led to the person becoming a pen pal to one of the provider's children and they shared many communications which helped to promote their well-being.

Improving care quality in response to complaints or concerns

- People felt able to make a complaint if they were unhappy with any aspect of their care. One person said,

"If there are any problems, I tell the office and they sort it out for me." One person told us they had raised an issue and it had been sorted out to their satisfaction.

- The provider investigated any complaints made and said they saw them as a way of learning and improving the service offered. Records of a complaint made showed that a full investigation had been carried out and it had been responded to appropriately.
- We saw that any issues raised or significant events which occurred were followed up. This helped to prevent re-occurrence and support continual improvement.

End of life care and support

- At the time of the inspection no one was being supported with end of life care. However, when the service has provided end of life care they had worked with other professionals to ensure the person was well supported and comfortable.
- People could be confident that at the end of their lives they would receive care that was personalised to them and was kind and compassionate. When one person's needs could no longer be met in their own home, at the request of their family, the service assisted with their transition into a care home.
- When a package of care ended, the provider sought feedback from relatives. Feedback we saw was extremely positive about the organisation and the care workers. One relative had provided feedback to the service following the death of their loved one. They wrote, "Nothing was too much trouble and the Home Instead team coordinated the additional equipment required in lightening time to ensure that [person's name] was comfortable. They also looked after me and the rest of the family. The carers kindness, compassion and professionalism was wonderful and always went over and beyond to ensure mother was comfortable and settled and we were also ok."

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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 were very committed to providing a service which was person-centred. All care and support provided was tailored to people's individual needs and wishes. Care workers we spoke with demonstrated this ethos was put into practice in all their work. One care worker told us, "The ethos is what the person wants. They are in charge."
- Excellent person-centred care was achieved by matching people to care workers. Care workers told us part of their interview was about them as a person so the service could match them to people requesting support. This enabled people to build trusting and equal relationships.
- People and their family members were very impressed with the care and support they received and felt included in all decisions. One relative commented; "Home Instead have been really, really good. They listened to what we needed and matched my relative well to the carer, they have such good chemistry. If there are any small issues I talk to the manager and they listen and are responsive."
- All staff were highly valued by the provider and were proud to work for Home Instead. This made them very motivated to provide the best care they could for the people they supported. Staff told us how much they loved their jobs and how well they were supported. One care worker said, "It's a brilliant company to work for. It gives you such a good feeling."
- The provider and registered manager were good motivators of staff. They had various incentives to make staff feel part of the organisation and valued. These included passing on all compliments received and running competitions. They also worked alongside staff when needed. A highly motivated and valued workforce meant people were supported by staff who were cheerful and helpful. People commented that staff were "Cheerful, friendly and always willing to help them in any way they can."
- The registered manager and provider supported people with technology to enhance their safety and communication. This included a partnership with a technology company. This enabled people's safety to be monitored when care workers were not at the home and raise alerts when necessary. This helped the service to adapt the care people required as necessary.

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

- People were very positive about the service they received and how the service was managed. Comments

included; "I think it's well led; I don't think that they could do any better, they do everything that they should" and "I think that they are very well led, they seem to invest in their staff and offer training that they pay for. I think that continuous improvement is part of their ethos."

- The provider had been operating the service for under two years. In this time, they had continually developed the service and staff team. As the service grew, appropriate staff roles were appointed to make sure there was a strong management and support team for care workers. The registered manager told us, "We are always striving to improve."
- The provider and registered manager identified and minimised risks where possible. During the COVID-19 pandemic they had adapted to meet restrictions and government guidance. This had included office staff working at home and arranging meetings and assessments via video calls. This had all helped to reduce risks to people and staff.
- People received their care from a service which was well organised and scheduled people's visits according to their wishes. The provider operated an electronic system which enabled office staff to track and monitor care and care workers. This gave them an up to date overview of the service.
- People were able to rely on the service. All office staff were also trained as care workers which enabled them to provide practical care if a person's regular care worker was unavailable. No one we spoke with reported any missed calls. One person commented, "If they are late, I'm not worried I am confident that they will come." Another person said, "They always arrive on time; the carers work together and compare notes, so everyone knows what is happening."
- The provider had a contingency plan to enable them to maintain a service to people in emergency situations such as adverse weather or severe staffing shortages. The contingency plans prioritised people who did not have any other form of support.
- People benefited from a provider who audited the quality of the service and took action to address any shortfalls identified. For example, following a survey sent to people and care workers there was an action plan to address any issues raised. The action plan stated what the aim was, how it would be achieved and by when. It also stated who would be responsible for implementing the change. This meant that improvements could be measured.
- In addition to audits the provider also carried out support visits to monitor the quality of care delivered in people's homes. Care workers said these visits were unannounced and records showed they looked at a range of subjects including ensuring good infection control practices were in place.

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

- People were involved in feedback about the service they received. There were surveys, visits and satisfaction calls. One person told us, "We have filled in forms for feedback and had telephone interviews. I like it because it gives me the opportunity to pass on how grateful I am to them."
- The provider worked with other professionals to make sure people received the care and support to promote their well-being. This had included working with an occupational therapist to support a person who had been cared for in bed. With training, and equipment the person had been able to get out of bed to sit comfortably in a chair. We saw photographs of how happy they looked to have achieved this.
- The service was part of a wider network on Home Instead services. This enabled them to share information and best practice which contributed to good standards of care and support for people.
- Care workers told us there was good communication and excellent teamwork. Team meetings were being held via video to make sure staff continued to be involved and updated in a safe way.
- The service aimed to be a positive force in the community. Prior to the COVID-19 restrictions the provider had run sessions in the local area about what it may be like to live with dementia and educational sessions to help people avoid scams and keep themselves safe. They hoped to restart these sessions when safe to do

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