

EsKe Limited

Care Wyvern

Inspection report

Yarde Place
Taunton
Somerset
TA1 1UR

Tel: 01823325554
Website: www.care-watch.com

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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?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

The provider's website address showing on this report is incorrect and should read www.carewyvern.co.uk

This inspection was announced and took place on 7 and 8 June 2016. We gave the provider short notice of the inspection as we needed to make sure they were available so that we were able to access records, talk to staff and gain permission from people who used the agency to visit or telephone them.

Care Wyvern provides a domiciliary care service to people who live in their own home. The registered manager and designated administrative staff are based at the agency's office. Care Wyvern is classed as a small agency which means that it provides support with personal care to no more than 100 people.

The last inspection of the service was carried out in May 2013. No concerns were identified with the care being provided to people at that inspection.

At the time of this inspection the agency was providing support with personal care to 40 people.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People and their relatives were very complimentary about the quality of the service provided and of the management and staff team. One person said "They [the staff] are just marvellous. They are kind and very caring. They would honestly do anything for you." Another person said "The carers, the office staff, [name of registered manager] and [name of provider] are all very kind. I can only describe it as a very caring agency."

People had consistent staff that they were able to build trusting relationships with. This ensured people received care from a small number of staff who they got to know well. This aspect of the service was very much valued by people.

Care was planned and delivered in a way that was personalised to each person. Staff monitored people's healthcare needs and, where changes in needs were identified, care was adjusted to make sure people continued to receive care which met their needs and supported their independence.

Staff were well trained and people were confident they had the skills to meet their needs. One person said "I have a regular carer who is just brilliant. She really knows what she is doing. She knows what needs to be done and how to help me." Another person said "I have complete confidence in my carers. The training they get must be good because they all know what they are doing."

The agency had a robust recruitment procedure that ensured staff were thoroughly checked before they began work. Staff knew how to recognise signs of abuse and all said they were confident that any issues raised would be appropriately addressed by the registered manager. People felt safe with the staff who supported them.

There were systems in place to monitor the quality of the service and plan on-going improvements. People using the service and staff felt involved and able to make suggestions or raise concerns.

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.

There were sufficient numbers of suitably experienced and trained staff to meet people's needs.

Risk assessments were carried out to make sure people received their care safely and were able to maintain their independence.

There were robust staff recruitment procedures which helped to reduce the risk of abuse.

Is the service effective?

Good ●

The service was effective.

People received care from a staff team who had the skills and knowledge to meet their needs.

People were always asked for their consent before care was given.

Staff liaised with other professionals to make sure people's healthcare needs were met.

Is the service caring?

Good ●

The service was caring.

People felt staff were very caring and went out of their way to make sure they were comfortable and content.

People were supported by small teams of staff who they were able to build trusting relationships with.

People were involved in decisions about their care and support.

Is the service responsive?

Good ●

The service was responsive.

People received care and support which was personal to them

and took account of their preferences.

Care plans had been regularly reviewed to ensure they reflected people's current needs.

People felt comfortable to make a complaint and felt any concerns raised would be dealt with.

Is the service well-led?

Good ●

The service was well-led.

People benefitted from a staff team who were well supported and happy in their role.

The registered manager and staff team were committed to providing people with a high quality service.

There were systems in place to monitor and improve the quality of the service provided.

Care Wyvern

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection was announced and took place on 7 and 8 June 2016. We gave the provider short notice of the inspection as we needed to make sure they were available so that we were able to access records, talk to staff and gain permission from people who used the agency to visit or telephone them.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We looked at the information in the PIR and also looked at other information we held about the service before the inspection visit. We also looked at notifications sent in by the service. A notification is information about important events which the service is required to tell us about by law.

At our last inspection of the service in May 2013 we did not identify any concerns with the care provided to people.

At the time of this inspection there were 40 people receiving support with their personal care needs. We visited one person in their home and a relative who visited the agency's office. We spoke to five people on the telephone and four relatives. We requested and received feedback from two health and social care professionals. We met with the registered manager, both directors of the company, three office based staff and six members of care staff.

We looked at a sample of records relating to the running of the agency and to the care of individuals. These included the care records of four people who used the agency and three staff personnel files. Other records included those which related to health and safety and quality assurance.

Is the service safe?

Our findings

People told us they felt safe with the staff that supported them. One person told us "I can't fault the girls who visit me. They are marvellous." A relative told us "I know my [relative] feels safe and well cared for. We, as a family, feel like a weight has been lifted from our shoulders just knowing our [relative] is being well cared for. We feel lucky to have found Care Wyvern."

People told us they were actively encouraged to discuss any concerns they may have. One person said "The carers always ask me if I am happy with everything and I am. I know I could call the office anytime if I wasn't happy. [Name of provider] and [name of registered manager] would always take your call. You're never fobbed off." Another person told us "[Name of registered manager] made it clear that we can always contact her if there were any problems. I've only had to do it once. I didn't have much in common with my carer. I discussed this with [name of registered manager] and it was dealt with straight away." A member of staff said "It's important that our clients feel they can discuss any issues. It's our job to make sure they feel safe and well cared for."

Staff always made sure people's homes were secure when they left at the end of a visit. One person said "They are very good. They always make sure everything is locked up when they leave. I never have to worry." There were policies and procedures for the safe management of people's keys. Codes for people's key safes were regularly changed and only the staff visiting the person were supplied with the code.

People told us they always knew who would be visiting them. One person said "The office send me a two week rota with the names of the staff who will be visiting me." A relative told us "My [relative] has a rota which details who will be visiting, what time and how long the visit will last. It's very organised and works well."

There were sufficient staff employed to ensure people received care according to their assessed needs. People told us staff were reliable and arrived at the correct time and stayed for the specified period. People said if staff were delayed they received a phone call to inform them. One person said "The staff are really good and they always arrive on time. In all the years I've been using Care Wyvern I don't think they have ever been late." Another person told us "My carers arrive on time. If they got stuck in traffic or something, the office would call and let you know." A relative said "We have never experienced any problems. The girls arrive on time and never leave before they should." People who required the assistance of two members of staff said they always received this. Staff told us they were never asked to carry out a visit on their own if the person had been assessed as requiring two staff.

Rotas were well organised and there was flexibility to ensure everyone received the care they needed, even in emergencies or when care staff were off work at short notice. Senior staff at the agency were available to provide cover at short notice. One person who used the service said "Even [name of provider] has visited me. He is a top man."

People told us they could contact the agency at any time. A person we met with showed us their care file

which contained emergency contact numbers, including an out of hour's telephone number. They told us "You can ring anytime. I've never had to call the office at night but I know I can if I need to." Staff told us there was an on-call system where they could contact a senior member of staff at any time. A member of staff said "The on-call system is really good. If you're worried about someone or just need some advice you just pick up the phone." Another member of staff said "The office are really good. You can phone anytime."

Care plans contained risks assessments which outlined measures which enabled care to be provided safely in people's homes. Risk assessments included the risks associated with people's homes and risks to the person using the service. The risk assessments included accessing the home, people's possible illness and behaviour and infection control. Risk assessments relating to assisting people with mobility recorded the number of staff required and the equipment needed to minimise risk. To protect people from the risks associated with unsafe moving and handling procedures all staff received regular training in safe moving and handling.

The agency was not responsible for ensuring people's specialist equipment remained safe to use however; they ensured equipment was regularly serviced by appropriate contractors. The registered manager told us they kept a record of people's equipment and the dates of when servicing was due. They would either remind the person or assist them to arrange for the equipment to be serviced. Care plans contained risk assessments which provided staff with information about the equipment used by the person and how to minimise possible risks to the person or themselves. Staff carried out visual checks on equipment before it was used and there was information about who to contact if there were any concerns.

People who required support to administer medicines received support from staff who had received training in this area. Some people required only prompting and monitoring. Where staff administered medicines to people they recorded this on a medication administration record. Records seen were well completed meaning it was easy for other carers or visitors to see if the person had taken their medicines. Where there had been a change in someone's medicines this was clearly recorded so all staff were aware of the change.

Staff knew how to recognise and report abuse. They had received training in safeguarding adults from abuse and they knew the procedures to follow if they had concerns. Staff told us they would not hesitate in raising concerns and they felt confident allegations would be fully investigated and action would be taken to make sure people were safe. Where allegations or concerns had been brought to the provider's attention they had worked in partnership with relevant authorities to make sure issues were fully investigated and people were protected. The agency told us about one person who had been the victim of a computer scam which placed them at risk of financial abuse. Staff from the agency acted swiftly and supported the person to report this to the police and to visit their bank and they ensured all other appropriate authorities were informed. This prompt action helped to protect the person from the risk of financial abuse.

Other notifications provided by the agency demonstrated staff have a high level of understanding of the actions they should take to ensure people are kept safe. For example, a person who used the agency telephoned the agency's office as they were concerned they had taken an overdose of medication. The Co-ordinator taking the phone call raised the alarm with the Registered Manager, whilst taking details from the person and advising them to seek medical advice. The Registered Manager and Director immediately left the office to support the person at their home until the emergency services arrived. The person was supported during and after the event by the agency's staff and is now in a much improved state of emotional and physical well-being.

There was a system in place to record any accidents or incidents that occurred. These were reported directly to the registered manager so appropriate action could be taken at the time. This information forms part of

the key performance indicators that the Registered Manager reports to the Directors. The data is discussed and reflected on and used in the business planning of the organisation to improve performance, training, and updating policy and procedure to promote current best practice. Information from the quality assurance feedback is used to develop future business planning.

The provider's staff recruitment procedures helped to minimise risks to people who lived at the home. Applicants were required to complete an application form which detailed their employment history and experience. Those shortlisted were then required to attend an interview. Applicants had not been offered employment until satisfactory references had been received and a satisfactory check had been received from the Disclosure and Barring Service (DBS). This helped employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable people. The provider told us they had "recently changed to on line DBS checking systems in an attempt to speed up the DBS process for prospective employees, the organisation and our clients to help maintain sufficient staffing levels."

Is the service effective?

Our findings

People received effective care and support from staff who had the skills and knowledge to meet their needs. People thought the staff were well trained and competent in their jobs. One person said "I have a regular carer who is just brilliant. She really knows what she is doing. She knows what needs to be done and how to help me." Another person said "I have complete confidence in my carers. The training they get must be good because they all know what they are doing." A relative told us "My [relative] adores the carers. They know what help my [relative] needs and they must definitely be well trained."

Staff told us they always received the training they needed to meet people's needs. One member of staff said "I think the training is good. You get what you need and I've never been asked to do something if I haven't had the training." Another member of staff told us "I've had all the training I need and I get refresher training which makes sure I am up to date." Training completed by staff included first aid, health and safety and infection control. Staff also received training to enable them to meet people's specific needs such as caring for people living with dementia, Parkinson's disease and percutaneous endoscopic gastrostomy (PEG) feeding. Staff told us they were supported to gain National Vocational Qualifications.

The provider told us they were committed to ensuring staff received training which not only gave them the knowledge and skills to effectively support the people who used the agency but also to ensure training was delivered in a way which met staffs' personal circumstances and learning style. They told us "As a learning organisation other avenues for accessing training are also open to staff, these include on line e-learning for the Mental Capacity Act, Alzheimer's training, updates and distance learning courses. There is a library of text books within the office that staff have access to in order to support their learning and development. All staff are encouraged to access courses for their continual professional development, training goals are set at annual appraisals and six month supervisions meetings. As courses become available staff are notified via the staff monthly memo. Support for staff to attend training also includes "crèche" facilities in co-operation with staff members."

Newly appointed staff completed an induction programme where they worked alongside more experienced staff. During this time staff were provided with a range of training which included mandatory and service specific training. The Care Certificate had recently been introduced as part of the induction programme. The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life. Staff's skills and understanding were regularly monitored through observations and regular probationary meetings. The staff we spoke with told us they were never asked to undertake a task or support people until they had received the training needed and they felt confident and competent.

Staff had received training and had an understanding of the Mental Capacity Act 2005 (MCA). The 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. The registered manager told us there was nobody using the service who was unable to consent to the care or treatment

they received. Staff knew how to support people to make decisions and knew about the procedures to follow where an individual lacked the capacity to consent to their care and treatment. A member of staff told us "We can support people to make decisions but we can't make decisions for them." This made sure people's legal and human rights were protected.

People were always asked for their consent before staff assisted them with any tasks. One person said "The girls always ask if I'm ready for my shower. It's always on my terms." Another person told us "They [the staff] are very polite and considerate."

The agency had excellent links with health and social care professionals. They sought advice quickly and ensured recommendations were implemented. The provider told us about one person who had very complex health needs. They said "The organisation supports a client with very complex needs and who is PEG fed (Percutaneous endoscopic gastrostomy). Very careful monitoring of their nutrition and hydration intake is essential to their wellbeing. Care Wyvern, working with Health teams, were able to establish a need for 24 hour care for this client, by providing evidence of situations where the client was put at significant risk. Staff supported the client to ensure their quality of life improved and limited the social isolation the client was experiencing."

Staff monitored people's health and ensured any concerns were passed on. They assisted people to make or attend appointments with healthcare professionals where needed. This included supporting people with complex health needs travelling to specialist appointments in London and Bristol. One person said "My carer is so helpful. They always help me with my appointments." One person had a particular health condition which required careful monitoring. Staff told us and records confirmed that regular monitoring took place. We also saw the agency had requested the input of a specialist health care professional where concerns had been identified. Working in partnership with local specialist nurses had provided staff with additional training and support which meant they were able to more effectively monitor and report on the person's well-being. This had resulted in the person's health condition stabilising.

Care plans showed that staff assisted people to minimise the risks of pressure damage. Where people required assistance to change position at regular intervals, staff had supported them to do this in accordance with their plan of care. Where pressure marks were seen on a person's skin there were clearly recorded on body maps and monitored and healthcare professionals were informed. One person told us "My carers help me with my creams after my shower. It helps to stop my skin getting sore."

The staff cooked meals for some people and encouraged people to eat. One person said "My carers are great. They know what I like. They make me up some sandwiches before they go so I have got something if I get hungry." Another person told us "Nothing is too much trouble. I get my shopping delivered but if I fancy something a bit different or I need some milk, the girls will pop down to the shop for me."

Is the service caring?

Our findings

All the people and relatives we spoke with were very complimentary about the staff team. One person said "They [the staff] are just marvellous. They are kind and very caring. They would honestly do anything for you." Another person said "The carers, the office staff, [name of registered manager] and [name of provider] are all very kind. I can only describe it as a very caring agency." A relative told us "The carers who visit my [relative] are all lovely. I know my [relative] adores them all. My [relative] sees them as extra daughters."

One person who used the service told us "Care Wyvern have basically given me my life back. When I first started using them I couldn't walk. I couldn't really do anything. My carers stuck with me and slowly helped me to start walking. I cannot describe their kindness and patience. If it wasn't for them I wouldn't be here today. I would highly recommend this care company."

The service had received a large number of compliments and thank you letters from people who had used the service and their relatives. Compliments received by the agency echoed the comments received by us such as staff "building trusting relationships with people", "Providing family with peace of mind" and having their "relative's best interests at heart." One person wrote 'My [relative] received fantastic support and many of the helpers became good friends.' Another person wrote 'Excellent staff. I would definitely recommend Care Wyvern to anyone.'

In a recent quality assurance survey over 80% of the people who used the service thought the agency were either "very good" or "excellent" in understanding their care needs. They described staff as "friendly, polite and who respected them as a person." They said staff showed great commitment to them." Over 80% of people rated the quality of the service as "very good" or "excellent" and would recommend the agency to others. Care staff were recognised by families for "doing a brilliant job in difficult circumstances."

We received very positive feedback from social care professionals who commission with the service. Comments included "Care Wyvern staff are exceptionally good at building relationships with clients that allow clients to build confidence in the organisation and care staff delivery. Clients are very happy with the service they receive."

People benefited from staff who had a caring approach to their work and were totally committed to providing high quality care. All staff spoken with were highly motivated and inspired to offer care which was kind and compassionate. One member of staff told us "You get to know your clients really well and it feels like they are part of your family." Another member of staff said "We have a great team here and I know any one of us would do anything for the clients we support."

The service encouraged and valued the views of the people they supported. People and their relatives told us staff always asked them if they were happy with everything or if they wanted anything changed. They also told us they were regularly visited by a senior member of staff who went through their plan of care with them. The provider said "This process is audited; all areas of the care plan are reviewed and discussed with the client and/or their family. These audits feed into the supervisors action plan to ensure the updates or

reviews are planned appropriately, further feeding into the quality of care delivered by the organisation."

One person who used the service said "My carers always make sure I am happy with everything. One of the supervisors pops out and visits me regularly. We go through my care plan and if I want anything changed it's changed." A relative told us "A supervisor visits my [relative] regularly to check whether things are working and to check my [relative] wants anything changed. At a recent review the supervisor came in the evening so that I could be there. They are very accommodating." The results of a recent satisfaction survey showed a high level of satisfaction about the service provided. Over 80% of the people who used the agency rated the quality of the service as very good or excellent and would recommend the agency to others.

People told us staff assisted them in a way which maintained their dignity and respected their privacy. Care plans emphasised the discussion with people about the amount of care they required. When a person was able to shower themselves just the required amount of assistance was offered to maintain their independence and dignity. One person told us "I have help with a shower. I used to need more support but with my carers help, I can do a bit more for myself. Once I am safely in the shower, my carer waits outside until I need them. It's perfect really."

People's confidentiality was respected and personal information was appropriately stored. Staff were aware of issues of confidentiality. When they discussed people's care needs with us they did so in a respectful and compassionate way.

The agency are involved with many charities. The registered manager told us "We actively support St Margaret's Hospice charity, McMillan Christmas Jumper day and dementia charities." We were told staff would be making cupcakes and providing refreshments for a planned event for people who used the service, their relatives and local businesses. They explained this would help to raise awareness about dementia and help to raise funds for a local charity.

Is the service responsive?

Our findings

Each person had their needs assessed before they began to use the service. This was to make sure the agency was appropriate to meet the person's needs and expectations. The registered manager told us they would not offer to provide a service unless they were sure they could meet the person's needs. This included having sufficient numbers of staff to undertake regular calls at the time the person required the care. People told us a senior member of staff had visited them when they began to use the service to make sure they were fully involved in planning their care package. One person said "They visited me at home several times. We had a chat about what I wanted, what help I needed and what times were best for me. It was very good. They really took time to get to know me."

From the initial assessment a care plan was drawn up to give staff information about the person and what they wanted assistance with at each visit. People told us staff always read the care plan before they provided care. One person said "The girls always check my care plan with me when they arrive." Staff said the care plans gave them the information they needed to provide a very personalised service which met people's needs. One member of staff told us "I think the care plans are very good. You are always informed about any changes." Staff are provided with a mobile telephone and the office staff send information about the people they will be visiting. A member of staff told us "It works really well and alerts you to any changes."

People received care that was responsive to their needs and personalised to their wishes and preferences. Care plans gave information about people's likes and dislikes as well as their physical needs. This made sure staff knew how people liked to be supported and the things that were important to them. One person said "My carers know me really well. They know my routine and how I like things done. I still feel in control of my life even though I need some help." Another person told us "If it wasn't for Care Wyvern and all their wonderful staff I wouldn't be able to stay in my home. That means so much."

The staff responded to changes in people's needs. People told us the service was flexible and they always felt comfortable to discuss any changes they wished to make to their care package. One person said "I can talk to the carers or office staff about anything. I wanted a change to my visit times so I called them and they sorted it out straight away." A relative told us "They have been very accommodating and have changed the visit times to fit in with my [relative's] appointments." Another relative said "I can't fault this agency. They have never missed a call and they are very responsive. I asked for more time between my [relative's] visits and this was arranged straight away."

Care plan audits and subsequent action plans ensured that care plans were person centred and met the needs of individuals. The provider told us "Adult Social Care Departments stated Care Wyvern staff are exceptionally good at building relationships with clients and building confidence in the organisation and the care that is delivered." They also provided examples where the agency had responded very quickly to a change in a person's needs. For example providing support to an individual at short notice when their relative needed to go to hospital. On-call staff provided support to a relative when a person who used the service passed away. Another person called the office because they were almost falling from sofa and staff attended to the person straight away."

A relative explained how the agency had recognised and responded to a deterioration in their relative's health. They told us the carers chatted with them and, with their agreement, discussed this with the registered manager who arranged the funding for additional support. Another relative said "As soon as my [relative] deteriorated they increased the visits. They really are quite amazing."

The care plans we read showed staff responded quickly to any concerns identified during their visits to people. One of the care plans we read showed the carer had contacted the agency straight away and had requested a visit from a health care professional. Records showed the person had been seen and treated in a timely manner.

The agency had a complaints policy and each person received a copy of this when they began to use the service. The Provider Information Return (PIR) stated "Constructive feedback from our clients is valued; we closely monitor complaints when they come in, fully investigating any concerns & responding appropriately." Everyone we spoke with said they knew how to make a complaint. People we spoke with said they would not hesitate to make a complaint if they were unhappy with any aspect of their care. One person said "I would absolutely pick up the phone if I wasn't happy about something. [Name of provider] and [name of registered manager] would want you to tell them." A relative told us "We've never had cause to complain. I know it would be taken very seriously if we had any worries."

Is the service well-led?

Our findings

The agency was managed by a person who had been registered by the Care Quality Commission. The registered manager had been in post for three years. The provider's two directors were also based at the agency and were actively involved in the running of the agency.

The registered manager showed a great enthusiasm for wanting to provide the best level of care possible. Staff had clearly adopted the same ethos and enthusiasm and this showed in the way they spoke about people. In their completed Provider Information Return (PIR) they described their values as "To deliver high quality care. To focus on our clients. To work for the comprehensive welfare of our clients. To show compassion to all clients and work colleagues. To equip our staff to deliver the above through support, training and professional development. These common themes run through all training and inform all staff practice, both office and field based. The Investor in People report evidenced that staff are supported, motivated & encouraged to perform at their best. We actively promote continual professional development throughout the organisation to maintain current best practice standards, along with supporting staff develop both personally and professionally."

Ten members of the Care Wyvern's care team had been nominated for the South West Care Focus Care Awards. These are annual awards recognising staff and organisations who had been nominated by people who received care or their colleagues. The Senior Co-ordinator was a finalist for outstanding ancillary worker. These are annual awards open to all care providers in Somerset to recognise excellence in care.

People who used the service, their relatives and staff thought the agency was well run, efficient and flexible. People and their relatives told us staff arrived on time and always stayed for the agreed time. One person said "I always know who will be visiting me and what time. They have never let me down." A relative said "Care Wyvern is brilliant. I would highly recommend them." A member of staff told us "This is just the best agency I have worked for. They not only care about the clients, they care about the staff too." In feedback from a social care professional, they described the agency as 'quite simply a quite exceptional small provider in Taunton who are held in high regard by the ASC (Adult Social Care) operational team.'

The service had effective systems to manage staff rosters, match staff skills with people's needs and identify what capacity they had to take on new care packages. This meant that the service only took on new work if they knew there were the right staff available to meet people's needs. Office staff planned visits to make sure staff arrived to each person at the agreed time. The provider told us "The Registered Manager is proactive in monitoring people's care needs. The staff are organised into groups under the supervisors. This facilitates the support of staff by a dedicated lead in specific geographical areas to provide care. This meant people had a consistent team of staff providing their care and people had managed to build relationships with the care workers who visited them."

The agency had a computerised system which provided detailed information about the planned dates, times and duration of all visits to the people they supported. A 'tag system' was in place which meant that staff would activate their mobile telephones when they started a shift and when they arrived and left a

person's home. This provided a 'live' update to the agency's office as to the status of each planned visit. This meant that the agency could appropriately monitor all planned visits and respond to any delays.

The agency worked in partnership with other organisations to make sure they followed current practice and provided a high quality service. They strived for excellence through consultation, research and reflective practice. The provider told us "The Registered Manager and staff work with local agencies and other care providers to provide support to people living in the community. The Registered Manager continues to be a member of the Somerset County Councils Medication and Clinical Task Policy working group. She provided evidence of how the group is working together with other health and social care professionals to reduce the risks of administering medication in the domiciliary care environment. This includes working with health to look at the occurrences of second transcribing of people's medication administration records (MAR) and monitoring medication errors that occur in the community sharing best practice to improve service delivery across the sector. The organisation also shares training opportunities with local partner providers to support the development of staff within the sector."

The registered manager promoted the ethos of honesty, learned from mistakes and admitted when things had gone wrong. This reflected the requirements of the duty of candour. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment. For example, a missed call had resulted in a staff disciplinary and apologies to the person and their family. In their PIR the registered manager said "There are times when we do not meet our clients expectations, however we are proactive in responding to any errors and acknowledging any mistakes and learning from the event. We continue to monitor activity through our SMT (senior management team) meetings and reflect on learning from adverse incidents & events amending policy or procedure accordingly."

The provider and registered manager explained how they were in the process of implementing further systems which would help to monitor the quality of service people received. They said "The system includes the facility to set outcomes that need to be achieved during the care delivery. This includes outcomes related to hydration, nutrition and medication assistance/administration. Staff are able to indicate the task they have completed, the office will be able to instantly see if tasks have been missed and make adjustments quickly and appropriately. This information will also be key for the auditing system Care Wyvern will be developing. The senior management team see this triangulation of new technologies, systems and procedure pushing up the quality of the care services delivered and the development of new services that support our clients."

The provider also told us "Care Wyvern are introducing the additional monitoring to facilitate improved communications between the care staff in the field, the fast changing information regarding our clients and information flow into and out of the office. The information can be uploaded to the system in real time, meaning that during reviews or assessments our Field Care Supervisors (FCS) can produce a person centred care plan whilst fully involving the client and/or their families/loved ones. This is then updated on the main system back in the office setting immediately so staff also have up to date information when they need it. It is also envisaged that the time saved from FCS will result in them being active out in the field with our clients and staff more rather than tied up with administrative tasks in the office." They also said "The system includes the facility to set outcomes that need to be achieved during the care delivery, the Registered Manager has cross referenced these outcomes to the (Care Quality Commission's) Key Lines of Enquiry. This data is used to monitor the quality of service delivery and evidence the person centred care planning of the organisation to meet the needs of the clients. This includes outcomes related to hydration, nutrition and medication assistance/administration. Staff are able to indicate the task they have completed, the office will be able to instantly see if tasks have been missed and make adjustments quickly and appropriately. This information will also be key for the auditing system Care Wyvern will be developing. The senior management

team see this triangulation of new technologies, systems and procedure pushing up the quality of the care services delivered and the development of new services that support our clients. Staff will be issued with new 3G Android phones which will have their rota information and the information about the clients they are visiting. All information is securely encrypted within the system."

There were systems in place to make sure high standards of care were delivered. Regular audits of care plans and discussions with people about their care service were regularly carried out. All staff received supervision and there were regular spot checks on staff working in people's homes. These included observations of staff supporting people with all aspects of their care including the administration of people's medication. Supervisions and spot checks were an opportunity for staff to spend time with a senior member of staff to discuss their work and highlight any training or development needs. They were also a chance for any poor practice or concerns to be addressed.

The registered manager told us they operated an "open door" policy where people who used the service and their relatives could pop in whenever they wished. We saw this to be the case on the first day of our inspection. We met with a relative who told us they regularly popped in for a chat or update. A person who used the service said whenever they went into Taunton they "go to the office for a cup of tea."

The agency had systems in place to enable staff to comment on the quality of the service provided. The minutes of the last staff meeting showed that views were encouraged and responded to. The staff we spoke with told us that they were encouraged to express their views. They told us that the registered manager was very approachable and that they listened and responded to them. One member of staff said "[Name of registered manager] is very responsive and gets things done." Another member of staff said "The care supervisors meet with [Name of registered manager] every week. She is very approachable and willing to listen."

The agency had a variety of up to date policies and procedures which ensured all staff were kept informed of the agencies expectations and legal requirements. Policies were well written and informative; where appropriate they gave contact details to enable staff to seek further advice.

The service had a robust contingency plan in place to make sure people in need continued to receive a service if adverse weather was experienced during the winter. There was a file detailing all contact information and an action plan for adverse events. The on-call file detailed all members of staff and every one that used the service. Each person had been priority coded and a report could be printed immediately of people in order of priority. The provider told us "From these assessments they had been able to prioritise their workload. The organisation has access to 4 x 4 vehicles to support carers to reach clients who live in remote or isolated situation. During the floods last year staff were taken to calls where water levels were too high for normal vehicles. There were also snow chains available in the office if office staff are needed provide cover. This would ensure anyone assessed as being a priority would receive support during periods of bad weather."

The Directors had set up a networking group with likeminded, non- competitive, care providers from different parts of the country. In their PIR they told us "The idea behind the group is to discuss care issues, pool resources and develop current best practice protocols from a national perspective, thereby informing our practice locally." The PIR also told us "The Care Manager continues to be a member of Somerset County Councils Medication and Clinical Task Policy working group. Care Wyvern is a member of the UKHCA and the local Domiciliary Care Forum. We also receive regular policy and practice updates from Croner."

The registered manager kept their skills and knowledge up to date by on-going training and reading. They

were a member of the National Skills Academy and received regular updates via newsletters. The registered manager had completed distance learning courses and was currently completing a human resources qualification to support the business development. The Managing Director is the Chairperson for the Domiciliary Care Forum. The Forum is made up of Somerset care providers where they share best practice, professional development and local support to the market place and the Local Authority. The provider told us "The Registered Manager had attended local conferences to keep up to date. The Training Director regularly undertakes additional training to keep their knowledge of the sector up to date and is a train the trainer for the Alzheimer's Society dementia friends programme, they had supported training in both the organisation and within the wider community. This meant all staff received training in dementia awareness to enable people living with dementia to remain in their own homes."

The agency had notified the Care Quality Commission of all significant events which had occurred in line with their legal responsibilities.