

No Place Like Home Limited

No Place Like Home

Inspection report

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Date of inspection visit:
06 February 2019
07 February 2019

Date of publication:
08 December 2021

Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Outstanding 

Is the service effective?

Outstanding 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service:

No Place Like Home is a domiciliary care agency that provides personal care for people living in their own homes in Canterbury, Herne Bay, Whitstable, Faversham and Sittingbourne and surrounding areas. The aim of the service is to help people make the most of later life through providing companionship, developing confidence and tailoring the service to people's wishes. The service supports older people and specialises in caring for people living with dementia by providing minimum two hourly visits. At the time of this inspection the service was providing care for 11 people.

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

People's experience of using this service:

The service continued to be exceptionally effective, responsive and well-led. Staff had worked continuously to further develop and nurture these areas and the areas of safe and caring. As a result, it provided an exceptionally outstanding service for the benefit of people and their family members.

The service met its mission and values to help people make the most of later life through growing people's confidence and providing companionship designed around their needs and wishes. A relative told us, "The provider explained the mission and values of the service. It has been that organisation and delivered 100% on it".

Staff had outstanding skills and an excellent understanding of people's individual preferences. Staff training was developed and delivered around people's individual needs and this had made a significant impact on people's quality of life. A relative told us, "I started in a situation where I was upset. But having found this agency it made me realise that dementia is not the end of the world. You can live with it. I couldn't speak highly enough of them".

There was a strong, visible person-centred culture. Developing positive and trusting relationships with people was at the heart of the service. Time was invested in making sure that staff employed shared the values of the service and in matching them with the interests and personality of the people they supported. A relative told us, "I am overwhelmed with the wonderful care. The service is set up like a family who is going to do the right thing". A health care professional said, "The ethos and ethics of the team wholly reflect the need for person centred care that responds to individual needs. The whole team have quickly grasped the crux of situations and have always done their utmost to provide the correct level of support as quickly as possible, ensuring that they match the right people for the best outcomes".

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

Staff had real empathy for the people they cared for and went 'the extra mile'. A relative told us, "They were

caring all the way up to and after mum's funeral. They kept popping in to see if we were OK. They are authentic and compassionate".

The service was an important part of its community and had developed links to reflect the needs of people. It worked with charities, health and social care professionals and engaged and acted on research to deliver improved outcomes and experiences for people.

Rating at last inspection: OUTSTANDING (Report published 29 July 2016)

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service has improved in two domains and all domains are now outstanding. .

Follow up: We will continue to monitor this service and plan to inspect in line with our reinspection schedule for those services rated Outstanding.

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 had improved so that it was exceptionally safe.

Details are in our Safe findings below.

Outstanding 

Is the service effective?

The service was exceptionally effective.

Details are in our Effective findings below.

Outstanding 

Is the service caring?

The service had improved so that it was exceptionally caring.

Details are in our Caring findings below.

Outstanding 

Is the service responsive?

The service was exceptionally responsive.

Details are in our Responsive findings below.

Outstanding 

Is the service well-led?

The service was exceptionally well-led.

Details are in our Well-led findings below.

Outstanding 

No Place Like Home

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One inspector carried out this inspection.

Service and service type:

A domiciliary care agency provides personal care to people living in their own houses and flats in the community. The service also supported people who did not receive a regulated activity; CQC only inspects the service being received by people provided with 'personal care' help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

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

Notice of inspection:

We gave the service 72 hours' notice of the inspection visit because it is small service and we needed to be sure that the registered manager would be available.

Inspection site visit activity started on 6 February and ended on 7 February. On 6 February we spoke to people and relatives. On 7 February we visited the office location to see the registered manager and office staff; and to review care records and policies and procedures.

What we did:

We reviewed information we had received about the service since the last inspection in May 2016. This included details about incidents the provider must notify us about, such as abuse or when a person dies. We assessed the information we require providers to send us at least once annually to give some key

information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection. We also received feedback of an exceptionally positive nature from an occupational therapist, nurse clinical specialist and service manager from a dementia charity. The full details are included in this report.

During the inspection we looked at the following:

- Two people's care records
- Medicines records
- Records of accidents, incidents and complaints
- Three staff recruitment records
- Staff training
- Audits
- Surveys
- Quality assurance reports and improvement plans.
- We spoke with two people in their own homes
- We spoke with eight relatives
- We spoke with the provider, registered manager, two care coordinators and six personal assistants/care staff.

Is the service safe?

Our findings

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

Outstanding: People were involved in developing a comprehensive and innovative approach to safeguarding, including positive risk-taking to maximise their control over their lives. □

Systems and processes to safeguard people from the risk of abuse

- Developing positive and trusting relationships with people was central to the service in keeping people safe.
- Staff had time to get to know people gradually and were skilled at understanding if people felt unsafe. Staff had reported and acted in situations when there were changes in people's behaviour or circumstances to protect them from abuse. This included exploring situations further with people to make sure they were not taken advantage of financially.
- A member of staff who was not part of the management team had been appointed as a safeguarding and whistle-blowing champion. Staff knew they could approach this staff member in confidence.
- Everyone felt safe. One person told us, "I feel utterly safe". A relative said, "The service is incredibly safe. They make sure nothing is let go by. They are top quality".

Assessing risk, safety monitoring and management

- The management team proactively engaged with people and their community in creative ways to maximise people's autonomy and independence.
- One person had fallen over whilst being escorted by staff on a walk. To reduce the risk to the person, staff carried a folding chair so they could stop for a rest at any time. In addition, and with the person's consent, a neighbour was available each time the person went for a walk so they could immediately be summoned for assistance if it was required.
- The provider had proactively considered the risk of service breakdown and had put measures in place to ensure people received a consistent and full service in the event of poor weather.
- One person lived in a rural location and when it snowed heavily staff could not reach them by car to provide support. A member of the local community was contacted who had a vehicle which was suitable to overcome the snowy conditions. The staff member was transported to the person to provide care and stayed overnight to ensure their safety. They also lit a fire to make sure they kept warm. This arrangement was formalised to make sure the vehicle could be accessed if the snowy conditions should return.
- Staff went 'the extra mile' to make sure people were safe. A relative described a situation where their family member had a leak in their roof resulting in flooding in their home. They said that staff moved the person to another room to keep them safe and organised for it to be repaired. The relative told us, "Nothing seems to phase them". A staff member was due to leave another person when they realised that their heating was not working. They stayed with the person for an additional hour and ten minutes and did not leave until their home was warm.

Learning lessons when things go wrong

- Learning was based through an analysis and investigation of near misses and things that had gone wrong. Each accident and incident was recorded together with the immediate action taken and additional and ongoing actions to ensure people continued to receive safe care.
- When a staff member arrived at a person's home they found they were unwell and being attended to by a neighbour. The staff member assessed the situation and called for medical assistance. Further action taken included visiting the person in hospital and liaising with health professionals to provide a care package which met their needs so the person could return home.
- All staff were encouraged to participate in learning to improve safety as much as possible. Accidents, incidents and near misses were discussed at team meetings and staff were central to discussing ideas and solutions. Staff formed working groups when they were identified that they needed to explore the best way to approach a situation. This way of communicating was effective as it was valued by the whole staff team.

Staffing and recruitment

- The management team invested time in making sure that they employed people who shared the visions and values of the service and knew how to keep people safe.
- Making sure that people were matched with staff who had the same values and interests was made a priority. In-depth interviews were held with staff to explore their personality type and interests so they could be successfully matched with the people. A staff member told us, "My interview was between one and two hours. It was in depth and that is how much they care about getting it right. We do not have a lot of staff turnover".
- Everyone's feedback was that the recruitment process was successful in employing the right people. Comments from relatives included, "Mum's needs and our expectations were matched to the personal assistant"; and "The service only employed people who they have confidence in". A social care professional told us, "I am very impressed by the calibre of the staff employed at the company".
- The provider and registered manager made sure that the service grew gradually so that there were enough staff, with the right skills, to meet people's needs. Staff said there was respect in the staff team which meant that they were always willing if they were able, to cover any visits that were needed. A member of the management team was also available to visit people so that there were no missed visits through staff absence or sickness.

Using medicines safely

- Staff were skilled in recognising and acting on concerns about the management of medicines.
- One person had obtained medicines legally, but not via their doctor. Staff were concerned that these medicines would have an adverse reaction with their prescribed medicines. The staff member obtained the person's consent to speak to their doctor and the person acted on this advice.
- Staff were not always responsible for assisting people with their medicines. Staff had recognised changes in a person's behaviour which indicated to them that people had not taken their medicines as prescribed. The provider had acted appropriately to make sure action was taken so these people received the medicines they required.
- Staff went the 'extra mile' to make sure people had the medicines they needed. One staff member collected a person's medicines from the pharmacy in their own time to make sure they were available. Another staff member visited a person early to give them pain relief and phoned with their consent for a doctor consultation.

Preventing and controlling infection

- Everyone was confident that staff had the knowledge and skills to manage risks relating to infection and hygiene.
- Staff made sure that people followed good hygiene practices when encouraging them to be as

independent as possible.

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

Outstanding: People's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

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

- There was a holistic approach to assessing, planning and delivering care and support. A relative told us, "What impressed me was their approach to mum. When they first met us, they spoke to mum and not me. They were keen to understand mum as a person and what she wanted to get out of the service. They spent a lot of time and she valued it".
- A social care professional told us, "Initial visits, initial assessment and ongoing assessments seem to be done in a timely manner and this is evident through the excellent feedback and awards achieved".

Staff support: induction, training, skills and experience

- The provider contributed to the development of best practice and kept up to date with new research and development.
- The provider founded the Dementia Action Alliance Faversham which actively collaborates with local networks to understand better the local needs of people living with dementia. The provider shared their knowledge on best practice and legislative changes with staff, at regular workshops.
- The registered manager and provider were accredited trainers in a specialist dementia care which equips staff to respond positively to people's emotional needs through therapeutic interactions so that people feel understood and included.
- There was a strong commitment to making sure staff training was developed and delivered around people's individual needs and this had made a significant impact on people's quality of life. Staff explained how training in reminiscence had been crucial in enabling them to provide personal care to a person who had initially refused support. The staff member was able to provide support by bringing back happy memories for the person of time they had spent at the beach. They described a beach scene to the person and asked if they wanted to dip their feet in the water. They then offered the person a bowl of water and washed their feet. Over time, the staff member could introduce a strip wash; putting on a topical cream as putting on sun screen; and getting dressed as getting dressed after a swim.
- Training and support was provided for carers so they had a more holistic understanding of the people who they cared for. This included a free dementia workshop for family members who are carers, so they could be kept abreast of new publications related to dementia care. These workshops were also open to members of the public who were not involved in the service.
- Feedback from people and relatives was that the staff were exceptionally skilled and trained in how to meet people's needs and this had made a difference to both their lives and their family member. Comments from relatives included, "I started in a situation where I was upset. But having found this agency it made me realise that dementia is not the end of the world. You can live with it. I couldn't speak highly enough of them"; "Staff have been educating me about dementia. She had hidden a letter and staff explained it to me

so it did not seem so bad. It reassured me"; and "I have had tremendous support from the team and the provider through their knowledge of dementia and explained what might be happening to my relative".

- A social care professional told us, "It is the little extras that are provided for staff that make the difference. There was a play about what it is like to live with a relative who is living with dementia at the theatre. The provider paid for all their staff to attend and to attend the question and answer session afterwards. Not many providers would do that as a way of enhancing their staff's personal development!"
- The provider and registered manager were mindful of the emotional challenges staff experienced and had developed strategies and opportunities for reflection and resilience. Staff training included how to understand and manage stress. Staff were encouraged to reflect on their practice and to make a note of the "Little things" that they had done which had made the most difference to people.
- Staff well-being was nurtured through a range of social activities such as "nibble and natter" evenings, craft workshops and the formation of a choir.

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

- The provider and registered manager understood that working collaboratively was the key to delivering more joined up care and support for people.
- Staff were proactive in approaching other agencies such as physiotherapists, speech and language therapists and occupational therapists so that people got the support they needed in a timely manner.
- A relative told us, "We have tried to future proof and think ahead. The personal assistant started the discussion and then how we go about it. That is bringing him downstairs and the helping to get the equipment he needs so he can still move around".

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

- There was a strong emphasis on the importance of eating and drinking well. Positive staff relationships were used to encourage those who are reluctant or having difficulty in eating and drinking.
- Staff received training in nutrition and were knowledgeable about supporting people to eat. Staff said that their training had helped them to look for patterns if a person was not eating all their food. They explained that the person may not be able pick up their food and so needed different cutlery, or if they left some food on their plate, they may have peripheral referral vision and need to visit the opticians.
- Staff had followed research about using colour to encourage people living with dementia to eat. They had used red food or a red plate when preparing meals which increased the likelihood of the person eating.

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

- There were effective links with health and social care services.
- A health care professional told us about the support the service provided for one person. "They are very caring, supportive of her needs and well informed of her health situation".
- Staff went the 'extra mile' when supporting people to make sure they experienced good health care outcomes that improved their quality of life.
- Staff advocated on behalf of one person by talking to their consultant which resulted in a longer hospital stay to further investigate their condition. Another person had a hospital appointment in London. The staff member made the travel arrangements, accompanied the service user and stayed overnight in a hotel to make sure they were at hand, hence working many extra hours. A further staff member contacted a person's GP as they were concerned about their health and then waited with the person for 2 hours until the GP visited.

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.

- Staff were confident in their understanding of the MCA and made sure people were involved in all decisions about their care so that their human and legal rights were respected.

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.

Outstanding: People were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; equality and diversity

- There was a strong, visible person-centred culture. The provider and registered manager ensured that staff built and maintained open and honest relationships with people and their families.
- People and relatives compared the care they received to that provided by a family member. Comments from relatives included, "I am overwhelmed with the wonderful care. The service is set up like a family who is going to do the right thing"; "If we had not had this service mum would be in a different place. Staff are so caring and respectful. They take mum out so she is seeing life"; and, "All staff seem to genuinely care".
- The provider and registered manager were mindful of the emotional challenges staff experienced and understood that a resilient and valued team was essential to ensuring staff remain caring. Staff were highly motivated and as a result care and support for people was exceptionally compassionate and kind. One staff member told us, "It is all about getting to know people and building up trust with them. Then you are able to provide personal care. It is about developing a relationship with the person and their family".
- Staff had real empathy for the people they cared for and went 'the extra mile'. A relative told us, "They were caring all the way up to and after mum's funeral. They kept popping in to see if we were OK. They are authentic and compassionate". Another relative explained that after their loved one died they became unwell and immediately rang the service for advice. The service acted immediately to support them to sort things out. This person explained, "It was a relief as I felt awful".
- There were creative ways of reflecting people's personal histories. Staff took photographs of activities they shared with people and developed them into memory books. Memory books were valued by people and reminded them of their adventures in life with staff. Family members also valued the books as they could keep in touch with what people were doing and engage in conversations with them.
- Time was taken to make sure that staff were matched with people's interests and personalities. One person said, "I like it that my personal assistant has an interest in opera the same as me. I was surprised about that".
- In the last year the service had received 189 compliments from various sources which demonstrated the service was meeting its vision of providing an exceptional quality of companionship for people. Compliments included, "Their level of understanding and sensitivity is exceptional and they have consistently provided intelligent, caring, compassionate and generous personal assistants to be with my mum"; "In my opinion the provider and their team go far above and beyond the level of attention that might reasonably be expected"; and, "No Place Like Home provide a fantastic service, giving exceptional care and attention".

Respecting and promoting people's privacy, dignity and independence

- Respect for privacy and dignity was at the heart of the service's culture and values. It was embedded in

everything that the service and its staff did.

- The provider was a "Dignity champion" and committed embedding understanding amongst staff to ensure that the service as a whole was inclusive and welcoming of all people and staff.
- A "Hot Potatoes" session was held where staff examined and debated a series of scenarios involving individuals with different protected equalities characteristics who also were affected by dementia. This was well attended and received 100% positive feedback from staff.
- One person told us, "Staff very quickly get used by my funny ways". A relative said, "Staff are professional and friends".
- Staff anticipated people's needs and offer sensitive and respectful support and care. A relative said they asked for advice on how to care for their relative whose mobility had deteriorated. The service responded by helping them to move their relative to a different floor level and to make the environment safer for them.
- Staff understood the importance of promoting people's independence in maintaining their well-being. For one person it was important to them that they could shave themselves, although they sometimes mistook which part of their face they should shave. Staff made sure this person continued to shave themselves as there was no risk to their safety and their independence was maintained.

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

- The service was exceptional at helping people to express their views so that staff understood their views and preferences. People were put at the centre of their care which had an impact on their quality of life.
- A relative complimented the service stating, "No Place Like Home listen to both the needs of the person in care and family and friends, they always show respect and treat everything with both compassion and the strictest confidence". Another relative told us, "I have recommended it to others. My mum wouldn't bother getting out of bed unless the staff came. It has made a tremendous difference to me and mum".
- Staff encouraged people to explore their care and support options. Discussions about residential or respite care were conducted with care and sensitivity. When one person's anxiety increased the provider contacted the person's community nurse with their consent and arranged respite support. People also benefitted from the provider's knowledge of additional sources or help and advice. A relative told us, "They phone me and give me guidance when I am not sure what I should do when caring for my mum".
- Staff were particularly skilled when exploring and trying to resolve any conflicts and tensions. A staff member described a family situation in which the person living with dementia was confused about the staff member's identity which made their role particularly difficult. They described how they interacted with the person living with dementia and their partner in a way that was not confrontational. The staff member built up a trusting relationship over time and visited the person in their own time when the person became unwell.
- People were given information about how to access an advocate when they first started to use the service. An advocate can help people express their needs and wishes and weigh up and take decisions about the options available to them.

Is the service responsive?

Our findings

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

Outstanding: Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People and their relatives told us that staff had outstanding skills and an excellent understanding of their individual preferences and values. A relative said, "Mum is being better cared for. Mum was lonely - her quality of life has improved since No Place Like Home. She is talking more and experiencing more. I can't sing their praises highly enough. They have consistently lived up to their rating of outstanding". Another relative told us, "Staff are all different but we have the same consistent routine. Staff fit in with us".
- Professionals said that the service was focused on providing person-centred care and support and achieves exceptional results. A health care professional said, "The ethos and ethics of the team wholly reflect the need for person-centred care that responds to individual needs. The whole team have quickly grasped the crux of situations and have always done their utmost to provide the correct level of support as quickly as possible, ensuring that they match the right people for the best outcomes".
- Arrangements for social activities were creative and innovative to meet people's individual needs and follow best practice guidance so people could lead as full a life as possible. Staff had intensive training in providing individual activities and reminiscence for people and had access to a range of resources and guidance to enable them to do so.
- Relatives said that undertaking individual activities was essential in promoting and maintaining their family member's well-being. One relative described how staff had decorated a Christmas tree with their relative to reflect the seasons. They talked about what they wanted to do and added a tag to the tree. When they had completed the activity, the tag was inserted in their memory book. "My mum flourished from a period of ill health. Each personal assistant made up an activity according to how she was feeling. Everything was done at mum's pace. She enjoyed cognitive and creative tasks and this helped her enjoy life as much as possible". Another relative told us, "Personal assistants do jigsaws and word searches with my family member, but also have debates and conversations. Staff encourage and they enable".
- The provider took a key role in the local community and was actively involved in building further links. They chaired and were members of local dementia groups and took part in dementia awareness week which aims to increase people's understanding of dementia and provide support to anyone living with dementia or their families.
- The provider identified, through their knowledge of the local community, that more activities were needed for people living with dementia. They were involved in arranging a pilot music and movement workshop which took place in 2018. A relative told us, "They organised Music and Movement on Tuesday. Mum went and enjoyed it". Feedback overall was very positive and included, "I have been feeling relaxed, dealing with problems and thinking clearly".
- Staff identified people's information and communication needs by assessing them. Staff understood the Accessible Information Standard. People's communication needs were identified, recorded and highlighted in care plans. These needs were shared appropriately with others. We saw evidence that the identified

information and communication needs were met for individuals.

- A relative told us how the service had recommended the use of an electronic clock and a whiteboard. "My mum's diary is her bible so she can check with the clock the day and date and time. I can write things on the whiteboard and mum can refer to them so she knows what she had for lunch and that she has taken her pills. She doesn't worry so much now". A staff member explained that one person liked to do word searches but they could not read diagonal lines. The staff member therefore made up a word search using familiar words in horizontal grids only.

Improving care quality in response to complaints or concerns

- Effective systems were in place which gave people and their relatives regular opportunities to give feedback on their experience of care and support. Everyone felt confident to give raise a concern and said that when they had it had been acted on immediately so there was no need for them to proceed further. One relative told us, "If I had a problem it is an avenue which is properly open to us". Another relative said, "I always get a response quickly from the office. I have no complaints".
- Investigations into complaints were comprehensive and improvements made because of learning from them. After several issues were raised with regards to one person who received care from a team of people, a mini-team supervision meeting was held to improve communication and coordination. Staff told us that this model is now used on a regular basis so that staff can communicate and try out different things in a consistent approach and in the best way for the person involved.

End of life care and support

- Relatives told us that the service was particularly skilled at helping people to explore and meet their wishes at the end of their lives. A relative told us, "Going to theatre was important to her. She had something to focus on and look forward to". Another relative said, "Staff took her out as usual and treated her with respect and dignity. They brought along thickener when we went out so she could have a pims and lemonade!"
- There was a rapid response to people's changing care needs and advice on care and support for people and their carers at the times they needed it. This meant that people experienced a comfortable, dignified and pain-free death. A relative said, "I wasn't taken by surprise in what was going to happen to my relative at the end of her life. The provider and personal assistants had prepared me".
- The staff team had the specific skills to understand and meet the needs of people and their families in relation to the emotional support and the practical support they needed. Relatives said the service continued to provide them with emotional support after their loved one had died. They also said that memory books created by the service had enabled them to relive happy memories of their lives.

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

Outstanding: Service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- People and their relatives described the way the service was led was exceptional and distinctive. They said the vision and values of the service was at its the heart. This was, "To reassure and grow client confidence by providing exceptional quality of companionship and care within a bespoke service designed around individual needs and wishes".
- A relative told us, "The provider explained the mission and values of the service. It has been that organisation and delivered 100% on it. People are excellent. Friendliness, naturalness and professionalism are hard to pull off together, but they have. It is absolutely outstanding and responsive to changes". Another relative said, "It is exactly as it says on the tin. You start with a few hours and build it as you need it".

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

- There was a registered manager in post who worked in partnership with the provider. Their passion for older people and people living with dementia permeated throughout the service and meant they were highly motivated to continuously drive improvements in the service.
- A relative said, "They have made such a difference to all our lives. To see my relative flourish and grow from within: All you see and hear is laughter and it is infectious. The service is truly outstanding. The Secret is the passion of the leader and motivation of why she set up the company. Staff respect one another and value the contributions of each staff member".
- A health care professional said, "The provider remains as passionate today in regards to leading and providing good quality care as when she started the company".
- Governance was well-embedded in the running of the service. The service had an advisory board which met with the provider on a quarterly basis and provided recommendations regarding the service's operations.
- A thematic analysis had been made of all compliments received. The themes in order of priority were "Proactive, person centred service", "Improving quality of life", "Enjoyment of companionship" and "Providing reassurance".
- The management team and staff strived for excellence through consultation, research and reflective practice. The provider had founded and chaired the local Dementia Action Alliance in Faversham, which liaises with other private and voluntary organisations to create a more dementia friendly community. They also co-chaired the Dementia Action Alliance for Canterbury and Ashford with the Alzheimer's Society and attended other Dementia Friendly Groups in Swale. The provider were members of local groups whose aims are to help shape the future of homecare in Kent and dementia care services. There was liaison with

dementia care professionals and academics to keep us abreast of latest thinking and developments. The provider was an Alzheimer's Research UK National Champion, in recognition of work undertaken on behalf of the charity. In their role as a "Dementia Friends Champion" the provider had run over 80 sessions in the local area since the initiative began.

- Journals and publications were available to staff. The provider had contributed to the development of 'Dementia Diaries for children' as their experiences had been recorded in a published journal.
- Part of the philosophy of the service was that it was the "Tiny Noticeable Things" that made the difference to people's quality of life. Staff were encouraged to write down things that they had done which had had a significant impact on people, and to reflect on how their actions had significantly impacted on people's quality of life.
- The staff team had won many awards as recognition of the high standard of care provided. This included the "Registered Manager" and "Support Worker" of the year awards at the Kent Care Awards 2018; the "Customer Service and Commitment Award" at Swale Business awards 2018; and "Kent Award for Outstanding Contribution to Dementia the Dementia Friendly Kent Awards".

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The views of people were at the core of quality monitoring and assurance arrangements.
- There was a structured approach to gathering feedback on what mattered most to people and to identify ways in which to improve the quality of the service to benefit their well-being. Feedback was sought through telephone calls, surveys, visits and observations.
- There were consistently high levels of constructive engagement with people and their relatives. Twice a year a group "tea and talk" event was held to gain feedback, gain ideas from people about how to make improvements.
- A newsletter for people was trialled and tested through engagement with people. Positive feedback was received and therefore there were plans to continue with its development.
- Support for people extended to their family members. Free dementia workshops were held for family carers and feedback was very positive. Comments included, "The workshop has given a good framework to think through and plan our approach to life as my wife's condition changes"; and "The opportunity to share experiences and thoughts with each other is useful-always a relief to know that you are not alone as a carer".
- The provider instigated 'Ask the experts' events in their role as Chair of Faversham Dementia Action Alliance. This is where people could ask a panel of specialist a range of questions about how to care for their loved one. These events involved many community partners and have proved so successful that the model has been rolled out across East and West Kent. The 'Ask the Experts' model won the Community & Partnerships Award at the Dementia Friendly Kent Awards in 2017.
- Staff were strongly motivated and proud to work for the service. The management team provided regular feedback to staff and there was clear evidence that this led to improvements. Comments from staff included, "The managers are there for you. The support network is there every step of the way"; and, "Management are interested in our views and we can talk about them".
- There were consistent and constructive engagement with staff. Staff were asked for their views at team meetings, supervisions, events and through a staff survey. The results of the staff survey in 2018 was that overall everyone continued to feel extremely positive about their experience of working for the service. Everyone found the work "Extremely meaningful" and felt "Extremely proud" to work for the service. Staff had asked for training in catheter care and this was being weaved into team sessions.
- Staff were valued and this had a positive effect on their ability and resilience in supporting people. A staff member told us "We have a summer BBQ, Christmas party, can join the choir and go to the theatre".
- The contributions of staff were acknowledged through an internal award system. The awards were for

"Above and beyond the call of duty"; "Team working" and "Individual behaviour". Staff were nominated by people, relatives and other members of the staff team. The reasons behind the awards included: staying with a person for an extra 4 hours to take them to a walk-in clinic at the weekend and for organising a 50th anniversary party for a couple in their own time.

Working in partnership with others

- The service was an important part of its community and had developed links to reflect the needs of people. It worked with others to deliver improved outcomes and experiences for people.
- A social care professional told us, "As well as supporting and overseeing this service, the provider continues to actively link in with others for the process of delivering effective services. She chairs the Dementia Friendly Community meetings, this is made up of local organisations who work to collectively to reduce the stigma that often comes with a dementia or mental health diagnosis".
- The registered manager and provider were regularly involved in meetings with GPs and other health professionals to discuss how they could work together most effectively to support people. They had developed good relationships with health professionals linked to their local Memory Clinics including consultant psychiatrists, community psychiatric nurses and occupational therapists.
- A range of professionals were invited to staff workshops to broaden staff understanding of diagnoses, treatment and support provided to people living with dementia. This included community mental health nurses and hospice nurses.
- Referrals had been made for occupational therapy assessments, physiotherapist and Swale's Staying Put scheme to provide wet rooms or grab rails to aid people's rehabilitation.