

Respectful Care Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service:

Respectful Care is a home care agency that provides care and support to adults in their own homes . The service was providing personal care to 27 people.

People's experience of using this service :

The registered manager's enthusiasm for caring for people was highly infectious and was clearly felt by all who met them. This promoted a high quality and caring culture within the service which achieved positive outcomes for people. All feedback was overwhelmingly positive from people, relatives, health and social care professionals and staff for all aspects of the service . People told us that staff regularly went "over and above" with the support they provided, and health professionals told us that nothing was ever too much trouble.

People felt safe with staff because they knew them well and because they arrived to provide care at the expected time. Pre-employment checks had been completed for all staff to ensure only suitable people were employed. Staff understood how to identify signs of abuse and how to report this. Individual risks were identified, and staff understood how to reduce the risks.

Care staff were well trained, highly caring and competent; and engaged with the provider who empowered them to provide high quality care and support with continuity for people. People were respected. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests. The policies and systems in the service supported. and supported to maintain control of their lives and were involved as much as possible .

The service was highly flexible, and person centred so people could have as much or as little support as they needed. People and relatives told us that they were involved in planning their care. People were supported to communicate in ways which were meaningful to them and staff understood how to communicate with people who did not communicate verbally. People were provided with compassionate care at the end of their lives which supported them to have a pain free and positive death.

People and relatives thought the service was very well managed and they felt comfortable in speaking to the registered manager about any aspects of their care. Surveys completed by people and relatives consistently showed high levels of satisfaction with the care provided and management of the service. Staff felt very supported by the registered manager and said they enjoyed their jobs and took pride in the work they did.

The service met the characteristics of Outstanding in Caring.

Rating at last inspection: Good (report published 21 October 2016).

Why we inspected: This was a planned inspection based on the previous rating.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, we may inspect sooner.

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

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 remained Safe.

Details are in our Safe findings below.

Is the service effective?

Good ●

The service remained Effective.

Details are in our Effective findings below.

Is the service caring?

Outstanding ☆

The service was exceptionally Caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service remained Responsive.

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service remained Well-Led.

Details are in our Well-Led findings below.

Respectful Care Ltd

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:

The inspection team consisted of one inspector.

Service and service type:

Respectful Care is a domiciliary care agency. It provides personal care to people living in their own homes. The service had a manager registered with the Care Quality Commission. This means that they and the provider were legally responsible for how the service was run and for the quality and safety of the care provided.

Notice of inspection:

We gave the service 48 hours' notice of the inspection visit because the registered manager and staff were often out of the office supporting staff or providing care. We needed to be sure that they would be in. Inspection site visit activity started on 12 June 2019 and ended on 14 June 2019. We visited the office location on 12 June 2019 to see the registered manager and deputy manager and to review care records and related documents. Following the site visit we made phone calls to people, relatives, staff and healthcare professionals to gain their views on 14 June 2019.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection:

We viewed four people's care records and medicines records. We also viewed records of accidents and incidents, audits and quality assurance reports, feedback received, staff recruitment files, staff training records and rotas.

After the inspection:

We spoke with two people who were supported by Respectful Care, eight relatives, four members of care staff and two health and social care professionals.

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt safe with their care workers. One person said, "I feel very safe, they are good to me and they know what they are doing." A relative told us their family member had previously been supported by another service and they did not feel they were cared for safely. They said that since changing to Respectful Care the support had been "Fantastic" and they were confident their family member was safe. They told us their family member was supported by two care workers who were "always on time" and that the registered manager, "Waits outside to check up on carers to ensure calls are done properly." This reassured them there was oversight to ensure care was delivered safely and as planned.
- Systems and policies were in place to protect people from abuse and avoidable harm.
- Staff understood their responsibilities to safeguard people, were aware of the signs of abuse and knew who to inform if they witnessed or had an allegation of abuse reported to them.
- The registered manager promoted an open culture to encourage staff to raise any concerns and was aware of local safeguarding policies and procedures.

Assessing risk, safety monitoring and management

- Environmental and individual risks to people were identified, assessed and managed safely. Risk assessments provided guidance to staff on how to reduce the risks to people and staff could tell us how they kept people safe.
- Risk management was excellent and therefore there had been very few incidents. Positive risk taking was considered alongside the provider's 'duty of care'. The registered manager had identified that involving the right professionals was key to ensuring people's safety.
- Assessments ensured any equipment was used safely and staff confirmed they received training around this, for example the use of hoists and slings.

Staffing and recruitment

- Staff were recruited safely, and all the appropriate pre-employment checks were completed by the provider to protect people from the employment of unsuitable staff.
- People and relatives told us they received their scheduled visits and that staff were generally on time and if they were running late, they were informed. Comments included, "They have never missed an appointment", "They're always bang on time" and, "They are nearly always punctual and if there's going to be a problem, they let the office know who, in turn, inform me."
- There were enough staff to keep people safe and meet all their needs. The registered manager had assessed the required staffing levels and ensured these continued to meet people's needs. .
- Staff told us they would inform the office if they thought people needed more time as their needs changed

and to enable more time for 'a little chat'. Staff recognised that taking the time to develop positive and trusting relationships with people helped to keep people safe and the registered manager supported this.

- One care worker said, "If they need more time as they have deteriorated, you tell the manager and they make adjustments, we always have enough time and don't have to rush about."
- The registered manager was clear they did not take on packages of care unless they had suitable staff available to support people. A member of staff confirmed this and said, ". If we take on a new person, we usually employ new staff too to make sure there are enough of us and so that they can have regular carers. We never have too many service users to manage."
- . People were supported by a consistent staff team and there was no use of agency staff. People told us the care workers knew them well. Where any cover was needed, senior staff including the registered manager would help.

Using medicines safely

- Medicines were managed safely. Staff received training to administer medicines and their competency was checked regularly.
- People received their medicines as prescribed. A relative said, "[Name] has medication every day, they (care workers) make sure he has taken it." ."
- Staff could tell us when they needed to administer 'as required' medicines. Written guidelines ensured staff knew when people needed these medicines and how to evaluate their effectiveness.
- Regular audits were completed and signed off by the registered manager to ensure people received their medicines safely. No medicine errors had occurred within the service within the last year.

Preventing and controlling infection

- Staff had received training in infection control and could tell us what they did to prevent and control infection, such as wearing gloves and aprons and washing their hands regularly.
- Personal protective equipment was available for all staff to use.
- Staff supported people to prepare their meals and were vigilant to ensure good food hygiene practices were maintained to prevent infection.

Learning lessons when things go wrong

- Accidents and incidents were recorded, monitored and action taken to prevent a reoccurrence. These were minimal as there was good risk management in place.
- Staff could describe the process for reporting incidents and accidents and knew what to do, for example, in the event of a fall.
- The registered manager had logged all events to identify any trends and learning. Lessons were clearly learnt as care plans were continually reviewed and support increased. Staff told us they were informed of any changes to people's care plans immediately.

Is the service effective?

Our findings

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

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

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

- People's needs were comprehensively assessed, and outcomes agreed with them so staff could support them effectively. The registered manager described how they worked openly and transparently with health professionals and provided joined up care.
- People's protected characteristics under the Equalities Act 2010 were identified as part of their need's assessment. This included people's needs in relation to their culture, religion, sexuality and disability. The registered manager and staff were committed to ensuring people's equality and diversity needs were met.
- One healthcare professional described how Respectful Care promoted positive outcomes and implemented best practice to improve people's care. They told us that with staff support, a person with a deteriorating health condition had been able to gain weight and improve their health.

Staff support: induction, training, skills and experience

- The registered manager recognised that ensuring the continued development and appraisal of staff's skills and knowledge was essential to ensuring high quality care and support.
- All staff had received an appropriate induction to the service and training in all the required areas. There was a training matrix so when staff required a training update, this was arranged to ensure they remained compliant.
- New staff were introduced to people prior to providing any support and were supported to learn about people's needs by familiar and experienced staff. New staff shadowed experienced staff for as long as they needed to feel comfortable in their new role. This enabled people to experience a continuity of care and minimise the distress and disruption caused by changes in staff.
- Staff were competent, knowledgeable and skilled. Staff told us about training they had received which ensured they could meet people's individual needs and provide effective support. For example, in epilepsy.
- One person said, "The care workers are excellent. You can tell they're well trained."
- Staff told us they were supported by the registered manager and received regular supervision, competency checks and appraisals.

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

- Staff ensured people's dietary needs and preferences were met. Staff offered people a choice of meals based on what was available in their home. If a person was not able to do their own food shopping, they let family members know if there was anything the person needed.
- Staff were aware of people's needs in relation to risks associated with eating and drinking and followed guidance from healthcare professionals in relation to these. For example, from speech and language therapists.

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

- Healthcare plans provided clear guidance for staff for all people's healthcare needs. Following any assessment, the registered manager contacted the person's GP (with their permission) for their medical summary to ensure they were supported with all their healthcare needs.
- People's health and wellbeing was monitored to promote early prevention and positive outcomes. For example, where people were prone to urine infections, they were monitored. Care workers acted quickly to test for any infection and ensured medicines were received immediately if needed. This was achieved by close working with people's GPs to have testing kits and antibiotics to hand. The registered manager told us this had reduced hospital admissions.
- People were supported to maintain good health and were referred to appropriate health professionals as required. For example, speech and language therapists, occupational therapists (OT's) and tissue viability nurses (TVN's). Detailed records were maintained for all health appointments.

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

- Staff supported people to get any equipment they needed to ensure their needs were met within their home. For example, equipment was arranged for a person through an occupation therapist.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. When people live in their own homes this procedure is completed through the Court of Protection.

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. No-one was being deprived of their liberty.

- 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.
- People had mental capacity assessments completed which followed the principles of the MCA, for example they involved those important to them, considered people's religions and decisions were made in people's best interest.
- Respectful Care was skilled at obtaining people's consent and the registered manager actively reviewed how people were involved in making decisions about their care.
- Staff had a good understanding of the MCA. One care worker told us, "We always ask them for permission. If someone has advanced dementia it can get tricky because they can't always give their consent, but their relatives know why we are there, and they know what we are going to do, and we can discuss any decisions with them. We always still talk the person through each stage of what we are doing."
- Where people had a lasting power of attorney in place this was recorded, and a copy kept in people's care records.

Is the service caring?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has now improved to 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; respecting equality and diversity

- People and relatives told us all the care workers were kind, helpful and caring.
- People and relatives' comments about staff included, "They are fantastic, 100% marvellous", "I honestly don't think I could continue being part of [Name's] life without the support [Name] receives. They (care staff) always go the extra mile, in particular (registered manager). They are such a huge support, you can't train people to be like that, you're either caring or you're not" and, "They are wonderful, nothing is too much trouble, the other week my sister couldn't go as usual, so they even did the cleaning for [Name], they didn't need to do that!"
- There was an exceptionally strong person-centred culture. The registered manager had grown the remarkably caring culture of the service through their own thoughtful approach and actions. They demonstrated their commitment to staff in the way they often went above and beyond, for example by preparing Christmas dinner for people who would otherwise spend Christmas alone and visiting people. Staff also showed these values and would regularly go out of their way to offer extra support to people, for example going to the shop to buy something for a person to brighten their day.
- One healthcare professional said, "They sort out everything, nothing is too much trouble. We always get positive feedback and patients always look well cared for."
- The registered manager was aware there could be delays in people receiving the correct continence products following assessments by healthcare professionals. To ensure people were supported in a way that maintained their comfort and dignity, the registered manager kept a supply of different continence products to give to people if this was needed.
- The registered manager told us they had arranged funding for a person to receive care from a chiropodist when their relatives were unable to pay for this service.
- The registered manager described how they had supported one person during a stay in hospital. They had recognised the person felt uncomfortable and therefore stayed with them to reassure the person and minimise any distress whilst in hospital.
- Staff were skilled at anticipating people's needs and understanding when people were likely to be distressed. This information was used to inform people's care plans to ensure care and support was sensitive and respectful to both people and their relatives.
- Staff were patient and caring with people and relatives told us staff always showed compassion. One relative explained that their family member had a diagnosis of Alzheimer's disease. They told us "They (care workers) understand Alzheimer's very well, they understand change of moods and how to calm her if she is feeling anxious. They treat her with respect if they are talking they talk to [Name], not over her."
- Staff told us how they had time to spend with people, just talking to them and getting to know them. One

care worker said, "If I have got an extra 15 minutes, I would rather spend time talking to them, it has a massive impact on them, you can see that it does." Another care worker told us how they cared for people by, "Making them feel relaxed with me and doing little things for them that they can't do and asking them what they want. Putting a smile on someone's face and making them feel happy is worth a lot."

- Staff told us they would recommend the service and would be very happy for their relatives to be supported by Respectful Care.

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

- People were involved in the care they received on a day to day basis by the care workers supporting them. People told us they were asked about their views in care plan reviews.

- People were asked to complete a survey about the service they received. The feedback was all positive.

- A relative told us care workers would hold a phone to their family member's ear so they could speak with them. Another relative explained they did not live in the same area as their family member who was deaf and could not use the phone. They passed messages onto each other via the care workers and registered manager.

- A care worker explained that they supported a person who did not communicate verbally. They told us "I know them very well, they communicate with their eyes, you can tell if their moods change. Because we support the same people regularly you get to know them and understand them well."

- Staff showed a good understanding of people's needs and preferences and told us all this information was in people's care records.

- The registered manager had worked directly with people to ensure they knew people's views on the care provided.

- No-one was using advocacy services at the time of our inspection as people's families were involved. However, the registered manager informed us they would support people to access advocacy services if needed. Advocacy services offer trained professionals who support, enable and empower people to speak up.

Respecting and promoting people's privacy, dignity and independence

- People's confidentiality was supported and information about people was held securely.

- Respecting people's privacy and dignity was central to the service values. Staff respected people's privacy, listened to people, respected their choices and told us how they upheld their dignity when providing personal care, for example using a towel to cover someone up when they were undressed.

- One person said, "Personal care is always done in private and they listen to what I want them to help me with."

- People were encouraged to maintain their independence where possible. A care worker described how they would encourage people to walk to the toilet using their walking frame or encourage people to put their hand in the water to wash themselves.

- People were supported to regain and maintain their independence which had enabled them to remain in their own home rather than move into residential care services. For example, one person had diabetes and prior to receiving support from Respectful Care had been hospitalised on numerous occasions because of low blood sugar levels. A relative told us the care workers supported their family member to monitor their blood sugar and take the correct medication which had prevented further hospitalisations or the need for residential care.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same, Good. People's needs were met through good organisation and delivery.

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

- People had care and support tailored to their needs. The registered manager promoted supporting people with any need they had even when this went beyond what they were paid to do. For example, they had arranged a hospital bed to enable people to be discharged from hospital back to their care at home.
- People were given care and support how they wanted and were given choice and control of the care and support they received. For example, people told us they chose what gender of staff cared for them. One relative told us, "[Name] has female care workers and we were given a choice."
- People told us their care records were always completed and up to date. One person said, "They write down every day in the care record what I've done, every meal and the food I've had." People's care and support was regularly reviewed and updated to reflect their changing needs. People's relatives and other professionals were involved in person centred reviews and information was shared about people's care appropriately to promote positive outcomes for people.
- People's likes, and dislikes and daily routines were recorded to ensure staff supported them in the way they liked. For example, one care worker described, "[Name] like things to be done a certain way. They can become worried about us doing things in their home, so we reassure them that we have done them the way they want them done, for example we always leave the counters clean."
- The registered manager was committed to responding to people's changing needs and provided an out of hours contact for people and staff
- All feedback from health and social care professionals was positive. For example, one told us, "The services that Respectful Care provide for my clients are really good they understood the needs of the person and carried out the tasks professionally."

Meeting people's communication needs

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

- People's communication needs were known and understood by staff. People's care plans included details which helped new staff learn how people expressed their needs. Information was shared with people in formats which met their communication needs. For example, documents were produced in larger print and people were asked if they needed this.

Improving care quality in response to complaints or concerns

- A complaints procedure was in place for people, relatives and visitors. There had not been any

complaints. People and relatives told us they had not needed to complain but they would be able to speak to someone if they needed to and they were confident any problems would be solved quickly.

- The service had received numerous compliments and thank you cards which were displayed in the office.

End of life care and support

- The service supported people at the end of their life. People's wishes and arrangements for the end of their life were recorded in detail and therefore staff had the guidance they needed to support people in line with their wishes.
- Where people had chosen, they had a Do Not Attempt Cardio-pulmonary Resuscitation (DNACPR) order in their care records. This helps to ensure a person's death is dignified and peaceful.
- One relative told us about the support their family member had received at the end of their life. They told us, "I was so grateful I found Respectful Care The care they gave [Name] at the end of their life was second to none. It was a relief to have consistent care and [Name] got carers who looked after them very well. I rarely give high praise, but I think it is deserved."
- Staff told us they had received training in end of life care and this had given them a better understanding of people's cultural differences. One care worker said, "It's about being compassionate, being there and being gentle."
- One care worker said, "When people die, we have been invited to the funeral as we have become an important part of their lives and they have become important to us."

Is the service well-led?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same, Good. The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- There was a caring culture in the service. The registered manager had embedded their values around high-quality care from the moment when staff were recruited and completed their induction and these values shone through. All people, relatives, staff and health and social care professionals were all highly positive about the registered manager and said they were supportive and approachable. A relative told us, "It is very well managed, (registered manager) can't do enough for you, they have trained the staff well, they are as caring as (registered manager) is. I don't think (registered manager) would allow anyone to work for her that didn't have the same values. She remembers everything about everyone's care, I don't know how she does it!"
- One relative described the service values as, "Aptly named. The service does exactly what they say they will. They provide respectful care. They're not just respectful to the person but to all their family too."
- The registered manager demonstrated a strong commitment to ensuring they provided person centred and high-quality care and was responsive to feedback. Their duty of candour was demonstrated in the way they kept relatives informed and worked openly with other professionals.
- Analysis of surveys completed showed that the registered manager was proactive at improving their service and searched for any improvements to be made. For example, they had implemented a new, electronic rota system which also allowed changes in people's care needs to be communicated directly with staff.
- The governance framework had ensured the delivery of high quality and safe care. Risks had been identified and managed to mitigate the risks. Record keeping was of a high standard and included good monitoring records. Healthcare professionals had complimented Respectful Care on the quality of the person-centred records they maintained.
- People told us they thought the service was well managed, that anything raised was dealt with promptly and they were very happy with the service they received.
- Relatives told us they thought the service was very well managed. One relative said, "Very happy, I wouldn't change anything. I just wish everyone got care this good." Another relative explained that they had initially been apprehensive in arranging care for their relative but said "There is nothing I would change, the difference it has made to my life is incredible, I have peace of mind that [Name] is okay and is supported by people who really care."

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

regulatory requirements; Continuous learning and improving care

- The registered manager and senior staff regularly worked closely and hands on with the staff to monitor the care provided and completed spot checks.
- Quality assurance systems, such as audits and checks were used effectively. For instance, audits were completed on medicines records and contact log books. Actions were identified as a result and used to make improvements.
- Staff were knowledgeable in their roles and had easy access to the provider's policies. Staff told us managers ensured they understood what they were doing and why to ensure the quality of care and that they were encouraged to do additional training.
- Staff told us they felt well supported and received feedback from the registered manager. One care worker said, "We have regular meetings where you can sit with your manager and offload. They will always tell you if there is anything you're doing wrong and what you need to do to correct it. They give you positive feedback and it gives you a good boost."
- Staff morale was clearly high as all staff feedback was extremely positive. One care worker told us, "I wouldn't change anything, and I am very proud that the people I look after are very well looked after. They are clean and tidy and happy. It is very important they are happy because otherwise what's the point?" Another care worker told us, "I'm proud I make a difference in people's lives and contribute to them having a good life."
- The registered manager told us that they did not want to grow the business too large as it was important to them that they knew each person they cared for.
- Registered managers are required to notify CQC about events and incidents such as abuse, serious injuries and deaths. No such events had been notified to us as none had occurred. The registered manager clearly understood their role and responsibilities and had met all their regulatory requirements.

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

- People and those important to them were engaged with the service. One person told us, "I like (registered manager) she listens. I asked for extra help and she arranged it."
- One relative told us, "(Registered manager) is always available to speak to. Nothing is ever too much trouble for them."
- Surveys had been completed with relatives and feedback was positive, for example around staff consistency. These showed that 100% of people felt their needs were being met, felt safe and secure in their home and that they could contact the registered manager to discuss any problems.
- The registered manager had an 'open door' policy which allowed staff to go to the office and speak to them at any time. This enabled good communication between the registered manager, deputy manager and staff team.
- Care workers were clearly valued by senior staff and told us they felt valued. The registered manager gave each staff member a gift at Christmas and on their birthday. A care worker told us "(Registered manager) and (deputy manager) offer praise and appreciate all the work we do, it is really nice for your hard work to be recognised."
- Staff spoke very highly about the registered manager and provider and told us they felt involved and listened to. One care worker told us "I enjoy working here and for a care company it is very well led I couldn't ask for better."