

Ash Care Services Salisbury Ltd

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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?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

This inspection took place on 26 July 2016 and is the first inspection of the service. This was an announced inspection which meant the provider knew two days before we would be visiting. This was because the location provides a domiciliary care service. We wanted to make sure the manager, or someone who could act on their behalf would be available to support our inspection.

Ash Care Services Salisbury Limited is a small domiciliary care agency, which provides care and support to people in their own homes on a short and long term basis. The agency currently supports people in Salisbury and the surrounding villages.

This agency was first established in 2014. The agency had a registered manager in place. 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. The registered manager was present throughout the inspection.

People were complimentary about the service they received. They said the service was responsive to their needs and all visits took place at a time, which was convenient to them. Staff arrived to support people on time and no missed visits were experienced. People were supported by a small team of staff who knew them well. They were always introduced to a new member of staff so were never supported by staff they did not know. Each person had a detailed support plan, which informed staff of their needs and the support required. Care was regularly reviewed to ensure it remained effective. People were aware of how to make a complaint but did not feel the need to do so. They were happy with the support they received with their meals and the management of their medicines.

There were enough staff to support all care packages provided. Staff were given sufficient time with people and enough time between visits for travel. This meant they were rarely late and did not arrive to people feeling stressed. To ensure continuity, the registered manager or deputy manager undertook all visits when staff were on leave or unwell. More staff were to be recruited if the numbers and complexity of care packages increased. Staff told us they received sufficient training to help them to do their job effectively. They were confident when talking about how they kept people safe. Staff told us they were very well supported and received regular informal and formal support from the management team.

The agency was well managed, with clear leadership and an understanding of people's needs. The registered manager had a strong value base which was implemented by staff throughout their work. Systems had been developed to ensure the smooth running of the service. This included effective scheduling of people's visits and good communication with the staff team. There was clear monitoring of the service through discussions with people and observations of staff practice. The registered manager regularly met with people or undertook their support to assess the quality of the service they received. Specific audits were in the process of being developed.

## 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 is safe.

People told us the service was reliable and there were no issues with late or missed visits.

Individual risks to people's safety were appropriately identified and acted on to enhance people's safety.

There were enough staff to effectively meet people's needs.

### Is the service effective?

Good ●

The service is effective.

People received support from a small team of staff who knew them well.

Staff felt valued and were well supported. Staff received a range of training to help them do their job effectively.

People were happy with the support they received from staff to eat and drink.

### Is the service caring?

Good ●

The service is caring.

People were very complimentary about the staff and the service they provided.

Positive relationships between people and staff had been developed.

Staff promoted people's rights to privacy, dignity, choice and independence.

### Is the service responsive?

Good ●

The service is responsive.

Staff were responsive to people's needs and provided what help

people required.

Each person had a care plan, which identified their needs and the support required.

People received regular reviews to ensure their care remained appropriate and no changes were required.

People knew how to raise a concern but did not feel the need to do so.

**Is the service well-led?**

**Good** ●

The service is well-led.

The registered manager provided clear leadership and was committed to providing a good standard of personalised care.

There was a clear ethos of the service which staff demonstrated throughout their work.

Current monitoring of the service was undertaken by gaining people's views, monitoring their care and assessing staff's performance. More formal quality audits were in the process of being developed.

# Ash Care Services Salisbury Ltd

## **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 26 July 2016. The inspection was undertaken by one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

We spoke with nine people who used the service and three relatives on the telephone. We spoke with the registered manager and four members of staff. We looked at people's paper records and documentation in relation to the management of the agency. This included staff supervision, training and recruitment records, quality auditing processes and policies and procedures.

Before our inspection, we looked at previous inspection reports and notifications we had received. Services tell us about important events relating to the care they provide using a notification. We asked the provider to complete 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. The PIR was fully completed and returned to us on time.

# Is the service safe?

## Our findings

People told us they felt safe. One person told us "I just have a carer coming in the morning just to make sure I'm alright and to help me to wash and dress. It has made me feel so much safer and I know that my family don't worry about me half as much as they did before". Another person told us "my family all insisted that I had a carer come in twice a day. I wasn't keen to start with but my carer is so lovely that she really makes me feel a lot safer". Another person told us "for me, it's just about knowing there is somebody coming in to check up on me, three times a day".

People told us the service they received from the agency was reliable. They said they had never experienced a "missed" visit, where a member of staff had not arrived to support them. People told us staff arrived to support them on time. One person told us "I have to say my carers are really good and it is really rare for them to arrive late. If anything, they probably arrive more times earlier than late but I don't mind that". Another person told us "the carers are never usually any later than five or 10 minutes depending on whether they've got held up with their previous client. On the rare occasion when they've been running later than that, the office has always phoned me to let me know, but this has probably only happened once or twice in the last year".

The registered manager told us the reliability of the service was important to ensure people's safety. They said they always made sure the visits allocated to staff on a daily basis were manageable. This included making sure staff had sufficient time with people to meet their needs effectively and enough time to travel between visits. The registered manager told us they did not want staff rushing from one person to another and getting stressed as they did so. Staff confirmed they had sufficient time to support people and were rarely late arriving for each visit. They said they supported the same people regularly, which minimized the risk of any missed visits. The registered manager told us this consistency also ensured people's safety, as staff knew individuals well and could identify any issues at an early stage. The registered manager told us to minimise the risk of missed calls further, they were in the process of considering an electronic call monitoring system. This would enable staff to log their visit, which would then show on a computer in the office. In the event of a staff member not arriving to support a person, this would be identified and addressed without the risk of harm.

People were confident they would inform the registered manager, if they experienced any poor practice or were mistreated. One person told us there had been an occasion when they had heard a member of staff say something, which they thought was inappropriate. The person told us "I really wasn't comfortable for the carer to come back to me again and the manager straightaway agreed with me and said she would ensure that the carer was reminded of what was and what was not appropriate. We had a new carer from then on. I was very satisfied with how the matter was handled".

Assessments had been undertaken and updated to identify potential risks to people's safety. The information stated what measures were in place to minimize such risks and therefore protect people from harm. The registered manager told us all staff had received updated training in keeping people safe. Staff confirmed this and said they would immediately inform the registered manager if they witnessed or were

told about an allegation of abuse. Staff were confident any allegation would be properly addressed. They said they would be given support during the process if needed.

Staff were confident when describing how they would manage an accident or incident such as not being able to gain entry to a person's property. They said they would immediately contact the emergency services, if they were concerned about a person's wellbeing. The registered manager told us they had a competent staff team who were "perfectly capable" of dealing with any emergency. They said they always told staff "if you have a gut feeling something is wrong, then it probably is so 999 it. It's better to be safe than sorry". The registered manager was clear of their responsibility to report any suspicion or allegation of abuse to the local safeguarding team. They told us information about promoting people's safety was given to staff when they started work with the agency.

The registered manager told us they had enough staff to support the current number and needs of people who required a service. However, they said they would need to recruit more staff if they decided to develop the business and increase the number of care packages provided. The registered manager told us they did not currently accept referrals for "very heavy" care packages or "double ups". "Double ups" are visits, which require two staff to provide a person's support. This was because they did not currently have sufficient flexibility within the staff team to undertake such care packages safely and effectively. The registered manager told us more complex care packages might be an option in the future, if appropriate staff were to be recruited. Staff confirmed there were sufficient staff to meet people's needs. One member of staff told us the registered manager would only accept new people to the service, if they knew the agency could meet their needs. They said this was positive, as it minimised any risks of people not being safely supported. The registered manager told us they or the deputy manager provided cover and completed any visits when staff were on holiday or unwell. They rarely asked staff to undertake additional visits, as they did not want them to become too tired.

The registered manager was clear about the calibre of staff they wished to recruit. They said would recruit new staff on a gradual basis to ensure the agency did not grow too quickly and remained able to meet people's needs safely. Staff personnel files showed a clear and organised recruitment procedure. This included ensuring the applicant completed an application form and demonstrated they were suitable for the job during an interview. Two written references showing the applicant's performance and character were gained and a Disclosure and Barring Service check (DBS) was undertaken. A DBS check supports employers to make decisions about an applicant's suitability to work with vulnerable people. Whilst references were in place, the capacity of the person providing the applicant's reference was not always clearly stated. This did not ensure the information was provided from the most appropriate person. The registered manager told us they discussed any declared issues such as health conditions with the applicant during their interview but this was not always documented. They told us in future they would address these areas during future recruitment.

Clear systems were in place to support staff with managing people's medicines safely. However, whilst the medicine administration records gave staff clear instructions about each medicine, the information was handwritten and not countersigned by another member of staff. This meant if the medicine administration record had been written incorrectly, staff would follow this when administering the medicines and errors would occur. The registered manager told us they would address this without delay. They said they would ensure all written instructions were checked and signed for accuracy, as a matter of course.

Staff had consistently signed the medicine administration records to show people had received their medicines as prescribed. There was an assessment of risk and support plan in place with regard to each person and their medicines. The information was clearly written and showed what support people required.

Staff told us they had received training and an assessment of their competency before being able to administer medicines. Information about the safe management of medicines was available for reference if required. One relative told us staff managed their family member's medicines appropriately. They told us "X's carer makes sure that she has her tablets every morning. They arrive from the pharmacy in the dosset box and the carer hands them to her with a drink and then make sure she takes them because she has a habit of hiding them. The carer will then write in the notes to say X has taken them".



## Is the service effective?

### Our findings

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be legally authorised under the MCA. For people receiving care in their own home, this is as an Order from the Court of Protection. This did not apply to any person using the service at the time of the inspection.

Staff told us they always encouraged people to make decisions and give their consent. They asked people at the start of the visit, what they wanted them to do. One member of staff told us "we know people well, so know what they need, but we always ask and they decide what order we do things in". Another member of staff told us "when you see people often, you can do things on different days depending on how they feel and what they want. It's very much down to what each person wants you to do".

Staff told us they assisted some people with meal preparation. This often involved making a snack from the food available although many people had frozen meals, which could be reheated in a microwave. Staff always offered people a choice of food. They said whilst preparing the meal, they might also make a snack such as sandwiches, which the person could have later in the day if they were hungry. One member of staff told us they always made the person a hot drink just before they left. They said they also left cold drinks near the person to encourage fluids and minimize the risk of dehydration. They felt good nutrition and hydration were important if the person's health was to be maintained effectively. Staff told us they would inform the registered manager if there were any concerns about a person's food or fluid intake. One person said staff helped them with their meals. They said "my carer comes and gets my meal for me every day. I have [brand of frozen food] delivered but she always makes sure that I know exactly what I've got so I can make a choice about what I'd like to eat, before she puts it in the microwave".

People told us they had the opportunity to talk to the registered manager about their needs and the support they required, before using the service. This enabled people to direct their care and ensure the agency provided what they wanted. One person told us "I first met the manager when she came round to talk about what help I needed. As soon as I met her I knew she was someone I could get on well with. She seemed very genuine when she asked me about what times I would like my visits and she also said that if I preferred female carers, that wouldn't be a problem". A relative told us "when the agency started looking after mum, we had a meeting with the manager and we sat down and she asked us about exactly what help mum needed and which days and at what time mum would like the visits".

People confirmed their visits were arranged at a time, which was convenient to them. One person told us "I was asked what time I wanted my visit in the morning and that's when my carer comes". Another person told us "I was asked what times I'd prefer and that's when I see my carers". A relative told us "I phoned the office the other day to change the time of X's visit, as we needed to go out and nothing was too much bother. I was very impressed". The registered manager told us they always tried to accommodate people's wishes regarding the times of their visits. They said it was important to "give people what they wanted" as

this would enhance satisfaction.

The registered manager told us they ensured people were supported by the same staff and not by staff they did not know. People confirmed this and said they were supported by a small number of staff, who knew them well. One person told us "I've been fortunate that I've only had two regular carers since I started with the agency over a year ago. At weekends, or when one of my regular carers is on holiday or off ill, it will usually be Lisa from the office who will come and cover for them, so I haven't really had anybody new at all". Another person told us "I only have three carers who manage to cover all my visits so they know me really well. When I have someone new, they will usually come with one of my regular carers to meet me and see what I need help with before they come on their own". Other comments were "because I have my regular carer, I always know who is going to be coming the next day" and "I only see my regular carers, so each time one of them comes, they will usually tell me who will be coming next".

People told us staff were well trained and good at their job. One person told us "I think they are very well trained for what I need them to help me with. They have never struggled to do anything for me". Another person said "my carers are lovely and I don't really think they need any extra training for what it is they help me with". Staff confirmed they had sufficient training to do their job effectively. They said the training provided was "very good". One member of staff told us "we've done so much. More recently we've done safeguarding, medicines, equality and diversity, moving people safely and infection control". Another member of staff told us "they're very good with keeping us up to date with things. If a person has a new piece of equipment for their mobility, we always have training on it. We can always ask if there's something we need more training on. The manager is very good to sort what we need". Another member of staff told us they had recently completed safeguarding and equality and diversity training. They said they would receive up to date training in catheter and stoma care if this was relevant to a person they would be supporting.

The registered manager told us they were looking to further develop the training opportunities for staff. They said the deputy manager had the responsibility of staff training and was in the process of developing individual staff training profiles. This involved reflecting on the training staff had already undertaken and identifying and addressing future training needs. The registered manager told us they aimed to enable staff training to be face to face, through workbooks and by watching DVDs with accompanied discussion. They confirmed all newly appointed staff undertook a range of training, which was deemed mandatory, before supporting people. The registered manager and staff said in addition, all new staff shadowed more experienced members of staff and aimed to meet each person who used the service. This ensured they were a "familiar face" to people, when they started working on their own.

Staff told us they had the required equipment to do their job effectively. This included an identity badge, uniform, protective clothing, a torch and the necessary forms for daily recording of their visits to people. They said they felt very well supported by the team and the registered manager. One member of staff told us "I feel very supported. I can pop into the office at any time or call the manager just to have a chat. You can talk things through and always get an answer. Any concerns, you just say and it's sorted. Yes I feel supported, 100%". Another member of staff told us "the manager can always be contacted by phone or email. She's always there for us and staff care about each other. It's very supportive. I love it here". Staff told us they regularly met with the registered manager informally when they called in to the office to collect their work schedules. They said they also had more formal meetings where they could discuss their performance and any concerns.

## Is the service caring?

### Our findings

People were very positive about the staff who provided their support. One person told us "I would run out of words to say about my carer. I really don't think she could be any more caring than she is. Just the fact that nothing is too much trouble makes all the difference to me". Another person told us "I get on so well with my carer that it's just like talking to a best friend now. There is certainly nothing I'd be embarrassed to ask her to help me with". Other comments were "I don't worry at all about asking my carer to do anything for me. I have known her so long that she is like a member of the family now" and "I like the fact that we can have a good old natter. Sometimes, I won't see another soul all day, so the time I spend with my carer is really important to me". Another person told us "I know that my carer never minds me asking her to do anything".

There were further comments about the staff and the agency as a whole. These included "for me it's all about the fact that everybody seems to care about me at this agency, from the people who work in the office, to the carers themselves, to the manager, nothing is too much trouble" and "when I think about my mother's care it is in terms of being very good, reliable, trust worthy and caring". Another person told us "my carer always listens to me. She always asks if there's anything extra she can do for me before she goes and I do sometimes get her to just help tidy up in the kitchen, as I do find it a bit of a struggle these days. She never minds doing this and always tells me that I'm not to worry about holding her up". Another person told us "I will phone the office and they always say I only have to ask". A relative told us "we have used a number of different agencies over the years, but I have to say this one I would recommend to anybody. They have such a lovely group of carers who will go out of their way to ensure that my mum is happy and well looked after".

People confirmed staff promoted their privacy and dignity. One person told us "my carer always makes sure that curtains are closed before she starts undressing me and in the winter, she warms my nightdress up for a few minutes as well". A relative told us "I can hear my X's carer when she goes up to the bedroom, as she always knocks on the door and says who it is and then asks before she goes straight in. I know it's only a little something but it really makes a big difference to both me and X that she treats our home in this way".

Staff told us the agency had strong values and really cared about people. They said staff were given time to get to know each person as an individual. They said it was not a case of just "popping in" to get people up, washed and dressed and then leaving to support the next person. It was more about completing tasks but also having a chat and recognizing things which were important to each person, such as family and hobbies. The registered manager confirmed this and said the agency would not undertake visits to people of any duration less than 30 minutes. They told us "we don't do 15 minute visits because what can you do in that time. It's not fair on the person". Staff spoke of people with fondness and said they really enjoyed their job. One member of staff told us "I love coming to work and really enjoy what I do. We support some lovely people. I'm really lucky. We get to know people and their families so it's nice".

Staff were confident when describing how they promoted people's privacy and dignity. During the inspection, a member of staff called in to the office to inform the registered manager of a person's fall. The person had not been fully clothed and wanted the member of staff to assist them with getting dressed

before they went to hospital. The staff member said they apologised to the person as they did not feel, with the person's injuries, that they should be moved. They said they made sure the person was covered and told them they would ask the ambulance staff, to maintain their dignity at all times. The person was appreciative of this and the staff member said they reflected on how it must feel to be exposed and vulnerable. Another member of staff told us they always promoted people's privacy by being aware of other people who might be in the house. They said they always closed doors, drew curtains and told family members "just a minute, we won't be long" so they were not disturbed. The member of staff told us they ensured items such as continence aids were never "on show" and stored away in cupboards. They said they made sure any used continence aids were disposed of properly and not left in a kitchen bin, for other people in the house to see. Another member of staff told us "I go to X a lot and they are very private. They don't divulge any information about themselves or their family but that's fine. I still chat along like I do, but I never ask any questions or put pressure on them to talk. It's fine and their choice".

## Is the service responsive?

### Our findings

Each person had a support plan, which they kept in their home. There was a duplicate copy which was securely stored in the office. The plans were well written, up to date and contained information about the person's need and the support they required. There was information about people's preferences and their medical history. However, not all information contained detail about what staff needed to consider in terms of individual health care conditions. For example, one person was prone to ulcers but their support plan did not direct staff to check the vulnerable area when providing personal care. Information from a review stated another person often declined a shower but it was important for them to have one to ensure healthy skin. The person's support plan did not inform staff how to manage the person's refusal effectively. Another person monitored their own blood sugar levels. There was a list of the results in their support plan but no information about what staff should do if the levels were too high or too low. The registered manager explained these people were independent, had full capacity and were able to recognise and manage difficulties in their health. They said in addition, due to the consistency of visits, staff knew people well and were aware of such issues despite them not being clearly written down. The registered manager explained they would revisit people's support plans and ensure the information enabled a member of staff without prior knowledge, to support each person effectively.

The registered manager told us they tried to enable the agency to be as flexible as possible and undertake the support people wanted. They said they often supplied additional visits if a person's relatives were on holiday or accompanied people to a hospital appointment if they did not have anyone to go with them. Other additions to people's support included collecting prescriptions or calling into a shop for bread or milk. One member of staff told us "the manager goes well beyond the call of duty for the clients. One person was in hospital and she asked if they'd mind if we cleaned their carpet, as it needed doing". Another member of staff told us "one person has a brush that we sweep the floor with and it's really old and doesn't work very well. We tried to get the person to get another but had no joy. I came into the office one day and the manager had bought one. It's the little extra things that are good here".

People told us they were happy with their care and staff were responsive to their needs. One person told us "it's always me first thing in the morning who decides which way round we'll do things. If I'm not feeling like having a wash first thing when my carer arrives, I will have my breakfast and my carer will do a bit of tidying up for me until I'm ready to go and have my wash and get dressed". Another person told us "if there is something that I really need my carer to help me with, then I will ask her and she will always make sure she makes time to do it for me". People told us they never felt rushed and staff stayed with them for as long as required. One person told us "my carer will stay as long as I need her. I never feel rushed at all. I'm quite fussy, but she never minds doing things just how I like them". Another person said "I'm afraid at my age, even if my carer did want to rush me, I don't think there would be any chance that she could because I'm afraid I go at my own pace these days. My carer is lovely though and never tries to hurry me up. If I'm not quite ready to have my wash, she will go and do some other jobs and then come back to me when I am ready".

Staff told us they knew people well as they visited them regularly. One member of staff told us people had support plans, which detailed their needs, but they were always guided by what help people wanted on the

day. They told us if they had any concerns about a person's wellbeing, they would inform the registered manager. Another member of staff told us "the client always comes first so it's all about them and making sure they have good care". They told us that visiting the same people regularly, made them able to identify any deteriorating health or changes in the person's mood. This was then discussed with the registered manager, with further action taken if required.

People told us their care was regularly reviewed so that it continued to meet their needs. One person told us "when the manager comes to do a review she will take my care plan and we will have a look at it to make sure there is nothing that needs changing or if I need some extra help with certain things she will take it away and send it back to me when it has been altered". Another person told us "the manager from the office comes to review my care quite often. I make sure my daughter can be here when we do that. The manager will go through the records and have a look at the notes that my carers have made and then we will check to see whether there are any changes needed to my care plan. They will also always ask us if there is anything that we are not happy with and if there is anything she can sort out for me". Another person told us "yes, I have a care plan and this is looked at every time the manager comes to do a review". A relative told us "my X's care has been reviewed by the manager at least twice in the last year. Their care plan was also altered because we have increased their care to twice a day so that I don't have to do too much in order to get them ready for bed now".

The registered manager had a positive approach to complaints. They said working with people, each with different expectations and preferences, meant it would be nearly impossible to get everything right one hundred per cent of the time. They said they recognised the stresses and strains people might have in their life, which could increase their frustration if things were "not quite right". They also explained they felt the most important thing was that the agency was approachable and enabled people to feel confident to complain if needed. The registered manager told us they gave people opportunities to raise concerns on an informal basis and more formally in review settings. They said people were given a copy of the agency's complaint procedure when they started using the service.

People told us they knew how to make a complaint but they did not feel the need to do so. One person told us "if I had a problem at all, I'd get my daughter to contact the manager and have a chat with her about what the problem was. I know there's a leaflet in my folder that tells me how to make a complaint but I've never had anything to complain about". Another person told us "I've certainly never had to make a complaint but I know there is the complaints leaflet in the folder that I keep all the information in. However, I really have nothing whatsoever to complain about with the agency. They have been good from start to finish. I think if I did have a problem though, knowing how I am treated at the minute, I'm sure they would listen to my concerns and do something about it".

## Is the service well-led?

### Our findings

The registered manager told us they had a variety of experiences in relation to domiciliary care services. They said this had promoted them to develop their own agency, Ash Care Service Salisbury Ltd in 2014. As the agency had been started from scratch, the registered manager had devised and implemented various systems to ensure the smooth running of the service. This included scheduling of people's visits, staff training and supervision, policies and procedures and a new care planning format.

The quality of the service was generally assessed through visits to people. One person told us "the manager always asks if they need to change or improve anything when she visits". Another person said "the manager asks me for my views during a review of my care". The registered manager told us they regularly met with people to gain their views and to ensure they were satisfied with the service they received. During the visit, the registered manager told us they checked the person's medicines, support plan and associated records. This was to ensure a satisfactory standard was being maintained and no errors were occurring. They regularly undertook people's support so they could ensure staff were caring for people effectively and as detailed in their support plan.

In addition to these visits, people had regular care reviews to ensure the service continued to meet their needs. Records showed regular "spot checks" had taken place to monitor staff and their performance. Staff confirmed these took place regularly and were unannounced. They said they were observed whilst they worked and their attitude and the way they spoke to people were taken into account. One member of staff told us practical issues such as their appearance and use of protective clothing were also assessed. The registered manager told us they were in the process of developing more formal audits covering areas such as medicine management and infection control. Records showed people had been given a questionnaire to complete in May 2015 to share their views about the service. The registered manager told us the questionnaires had not been repeated this year as yet, due to the regular contact they had with people.

People confirmed they regularly met with the registered manager to discuss their care and the service they received. They said there were also occasions, particularly when staff were on holiday or unwell, when the registered manager undertook their support. People told us they enjoyed this involvement. One person said "I like the fact that the management are very hands-on and have spent time getting to know me as a client". Another person told us "I like that the manager isn't afraid to come and help out when they are short staffed. I think this helped her understand me as a person a lot better than if she just spoke to me over the phone, or only visited once a year".

The registered manager had not managed their own business before and as a result, was experiencing a steep learning curve. They said they used a previous manager as a role model but had needed to learn about systems such as payroll and marketing. They felt as if the agency was "where they wanted it to be" and a good standard of service was being given to people. However, they realised the agency was still in its early stages and would be developing further over time. They told us developing the specialism of providing care to people at the end of their life, was an area they were interested in. They said they would be asking staff if they would like to be involved, but if not they would look to recruit new staff with the specialism.



Through discussion it was clear the registered manager had a strong value base and wanted to provide high quality, personalised care. They said they wanted all care provided to be good enough for their own family and staff were to treat people, as they would want to be treated. The registered manager told us they promoted staff to think of people using the service as loved ones, either their mum, dad, nan or granddad. They said they felt staff could not go wrong with this attitude.

There were many positive comments about the registered manager, their management style and work ethic. One member of staff told us "I can't praise the manager enough. She's amazing. She has a real willingness to please everyone and won't expect anyone to do anything she doesn't do herself. I can't speak highly enough of her. She's really concerned about the clients and staff. It's a real pleasure to come to work". Another member of staff told us "the manager is extremely fair, always approachable and will bend over backwards to support the clients. She goes well over and above what she needs to do". Staff were aware of the ethos of the agency and applied its values throughout their work. They felt the agency was well managed and people were clearly at the centre of the service.

People told us they valued the service they received. One person told us "I'm just grateful that I can continue to live here in the family home on my own with just a little support from my carer. I really don't want to have to move until it's absolutely necessary, and for me, my carer is the essential part of what helps me to continue living here". Another person told us "I honestly don't think I could suggest anything else that they could improve. All I would say is keep up the good work". Another person told us "I don't really see many people at all these days so to have my carer coming in four times a day is company for me and it makes a world of difference". A relative told us "I would happily recommend this agency to anybody. I have to say this is the only agency that I would ever dream of recommending to a friend".