

Eclipse Care (Southwest) Ltd

# Eclipse Care 26b The Strand

## Inspection report

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

This announced comprehensive inspection took place on 21 and 24 January 2019. This was the first inspection since the service was registered with the Care Quality Commission (CQC) in January 2018.

Eclipse Care is a domiciliary care agency. It provides personal care to people living in their own houses and flats. It provides a service to older adults based in the Bideford, Holsworthy and Okehampton areas of North Devon. The service has packages of care in extremely rural areas which other providers may not be able to cover. Care visit times ranged from 30 minutes to two hours. Frequency of visits ranged from once a day to four times a day. The service did not undertake care visits lasting 15 minutes. At the time of our visit, the service provided 300 care hours a week.

Not everyone using Eclipse Care receives the 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. At the time of the inspection, the service provided personal care to 16 people and employed 12 staff, along with the nominated individual and registered manager.

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

People, relatives and care professionals described the service in outstanding terms. They were all unanimously complimentary about how the service was led and that everyone worked together to achieve the best outcomes for people. Two relatives said, "I am firmly convinced that Eclipse are the best care company in the area by far" and "I am really, really pleased we have this company and I can't praise them enough".

The service was exceptionally caring, kind and compassionate to the people it supported. People received personalised care suitable to their individual needs. Care staff were highly motivated, passionate and proud of their jobs. They regularly went the extra mile for people as part of their normal working roles. The providers also cared for the staff who worked for them.

People unanimously told us staff respected them and delivered care in a way they wanted. People were matched with staff who had similar interests. Positive and trusting relationships had been built up and people were treated like extended family members. People were extremely complimentary of the staff and how well they were cared for. Staff were encouraged to spend quality time with people and get to know them.

People were treated with extreme dignity and privacy, with people encouraged to do as much for

themselves as they were able. The providers acted as advocates to ensure people received the support they were entitled to.

The service was extremely responsive to people's changing needs and the service was truly led around those people's needs. The providers supported staff out of hours and regularly went out to support staff in the community.

The providers led a service with an open, positive and inclusive culture. They were passionate, motivated and purposeful. They kept in close contact with each of the people they supported and knew them and their families well. People, relatives and care professionals all gave excellent feedback about how the service was managed and that nothing was too much trouble for the providers. One relative said, "They (providers) are brilliant and have no faults".

Staff were safely recruited, well trained and supervised in their work. Staff were flexible to meet people's needs. Staff felt valued, supported and included. They could approach the providers at any time and knew they would be listened to. The providers recognised when their staff 'went the extra mile' and were recognised and thanked for their work. One care worker said, "What an amazing company ... it's a pleasure coming to work."

Staff encouraged people to develop community links and this was given as much importance as meeting personal care needs. The providers recognised the importance of 'social prescribing' and there were success stories of where people had found new interests in the community.

People were supported to eat a balanced diet, take their medicines and see health care professionals when needed. They were supported by staff who had a good understanding of what constituted abuse and how to report it if they had concerns. People's rights were protected because the service followed the appropriate legal processes. People's risks were assessed to keep them safe.

The providers led the service in line with their vision and values which were also reflected by the staff group. They were role models for the staff team and well respected by them. The service worked closely with other health and social care professionals for the benefit of the people they looked after. Care professionals gave very good feedback about the service and how they valued the input from the service, particularly with people's changing needs. Two professionals said, "Eclipse are excellent and a pleasure to work with" and "I really value the work they do to support and care for our community."

The providers had systems in place which gave them an oversight of the service at all times. These were embedded in the service to monitor the quality and safety of the service. They strived to make continuous improvements in the way care was delivered. There were processes in place for people and relatives to raise issues or concerns and these were fully investigated. We received no complaints about the service, only compliments from everyone we spoke with. One relative said, "I would recommend them to anyone who needed care."

Where incidents and accidents occurred, the providers looked upon these positively as a learning curve and systems reviewed to prevent a reoccurrence.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good 

The service was safe.

People felt safe with Eclipse Care. Staff were able to demonstrate a good understanding of what constituted abuse and how to report it.

Staffing arrangements were flexible to meet people's individual needs.

People were protected by a safe and robust recruitment procedure.

People received their medicines in a safe way.

Staff ensured infection control procedures were adhered to.

People's risks were managed to ensure their safety.

### Is the service effective?

Good 

The service was effective.

People were supported by staff who had received training and supervision to feel confident in doing their job roles properly.

Staff ensured people's health needs were managed and professionals involved where necessary.

People's rights were protected because the service followed the appropriate guidance in terms of the Mental Capacity Act 2005.

People were supported to maintain a balanced diet.

### Is the service caring?

Outstanding 

The service was extremely caring.

Staff were highly motivated, enjoyed their jobs and were proud to work for Eclipse Care. Staff went the extra mile for people as part of their normal jobs.

People and relatives told how staff treated them with the utmost respect, dignity and compassion.

People received care and support from an extremely kind and caring staff. They were valued as individuals and worked with them as partners in care.

The providers cared for their staff as well as the people they supported.

The providers acted as advocates for people and valued the use of outside advocacy services.

### **Is the service responsive?**

The service was extremely responsive.

People received extremely personalised care and support specific to their needs, preferences and choices.

The service strived to provide the best possible person-centred care and support for people.

The service was very responsive to people's needs and the service was run for the people it supported.

People were encouraged to lead a meaningful and active life and were encouraged to undertake activities in the local community.

The service worked closely with care professionals to provide a team approach to care.

The providers regularly sought feedback on the service. There was a high degree of satisfaction from people and relatives about how the service responded to people's changing needs.

**Outstanding** 

### **Is the service well-led?**

The service was extremely well-led.

The providers led and managed the service exceptionally well. They provided strong leadership and promoted an open and inclusive culture.

The providers valued and respected their staff who in turn spoke highly of the way the service was managed.

There was excellent partnership working with other care professionals to get the best outcomes for people.

**Outstanding** 

There were governance systems in place which monitored the quality of the service.

The providers learnt from incidents and events and saw these to improve their systems.

The providers were excellent role models for their staff and ensured they shared the same vision, values and ethos of the service.

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# Eclipse Care 26b The Strand

## **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 checked 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 announced comprehensive inspection took place on 21 and 24 January 2019. We gave the provider 24 hours' notice because it is small and the providers are often out of the office supporting staff, providing care or visiting people. We need to be sure they would be in. It also allowed us to begin arranging to telephone and visit people using the service.

The inspection team comprised of an adult social care 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 service.

Due to technical problems, the providers were not sent a Provider Information Return by the Care Quality Commission. This is 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 the improvements they plan to make. We took this into account when we inspected the service and made the judgements in the report.

We spoke by telephone to four people and six relatives to gain their views and experiences of the service. We visited and spoke with three people and one relative in their own homes. We spoke with the two providers; one of whom was the nominated individual and the other the registered manager and three staff. Following the inspection, we received feedback from a further ten staff, two relatives/friends and six health/social care professionals.

We looked at: three people's care and medicines records; two staff recruitment, training and supervision files; minutes of meetings; accident and incident reports; complaints and compliments; quality monitoring systems; quality feedback surveys, and policies and procedures.

# Is the service safe?

## Our findings

People felt safe with support received from Eclipse Care. They felt comfortable, relaxed and at ease with the staff who supported and cared for them. They were unanimously complimentary of the way they were looked after. One relative told us they felt so safe with the agency, they were able to plan an overdue holiday as they knew their family member would be well looked after.

People were protected by a safe recruitment and selection process. Staff completed application forms and interviews were jointly undertaken by both providers. All other pre-employment checks, including the Disclosure and Barring Service (DBS) checks, were completed before people started work. The DBS helps employers make safer recruitment decisions and helps prevent unsuitable staff from working with vulnerable people.

People knew which staff they were expecting to visit them in their homes. People were supplied with a 'one-page profile' of all staff who supported them. This included a photograph and information on the care worker's background and interests. This helped the person to recognise and relate to the staff member when visiting them.

People were very appreciative of being supported by a regular team of care workers which had enabled them to develop trusting relationships. One person said, "I see the same people. They will have a chat with me and they make sure I have everything I want. We get on quite well". One relative was particularly pleased it was the same staff who always visited their family member. They told us how important it was to have regular care workers entering their private home. They told us staff arrived on time, visits were not missed and, if anything, staff stayed longer than their contracted hours.

People were supported by sufficient staff to fully meet people's needs. The providers ensured staffing levels were at least always matched, if not more, to the commissioned hours; staff skills were integral to this to suit people's needs. On regular occasions, the providers supported people with extra hours for which they received no payment to enhance people's lives (refer caring/responsive).

When a person's needs increased or decreased, staffing levels were adjusted accordingly. Both providers gave hands on support when needed and provided emergency or routine cover. For example, short term staff sickness or holiday cover. A professional commented, "They (providers) organise runs efficiently to reduce time care workers are travelling and to maximise capacity available."

People received a regular rota of planned visits and if there were any changes to be made, they were informed by the providers. The providers ensured all staff were introduced to people at least once before they went into their homes on their own. People's comments included, "When they first start, they will always send the regular carer first to introduce them", "They (new staff) usually come with an existing carer ... the new carer came with my carer" and "I have had a new carer come to visit ... (Provider) came along with them to introduce them to me on their first visit here." A care worker said, "(The providers) come out with us to meet and show us to any new clients." One of the providers said, "We do not allow anyone to go in

blind ... this is not fair on either our clients or staff."

The providers operated an on-call and out of hours service 24 hours a day, seven days a week. People and relatives used the main office telephone number and were transferred directly to the on-call person. Staff regularly used the office telephone to seek advice from the providers if they were unsure of anything, such as key safe numbers, location or to pass on information.

Staff demonstrated an understanding of what might constitute abuse and knew how to report any concerns they might have. Staff had received training in the protection of vulnerable adults to ensure they had the most up to date information available. Up to date policies and procedures were in place to use for guidance. Both providers had undertaken safeguarding training and were experienced in the safeguarding process. This meant they were able to offer support, guidance and advise to staff on any safeguarding issues or concerns they might raise.

People received the support they required to take their medicines. For example, from prompting through to administration. Staff received training on medicine administration and competency checks before they were able to give medicine support to people. Staff then undertook a 3-month medicine management course by an outside provider. People told us they received their medicines as prescribed.

People were kept safe as their individual risks had been identified and reduced as much as possible in the least restrictive way. Care records had completed risk assessments within them. However, risk assessments would benefit from being more detailed and give more guidance for staff to follow in a consistent way. For example, where people had a risk of falls from poor mobility, it was not always clear of the process for staff to take to reduce this and what equipment was required. This was discussed and agreed with the providers at the inspection. Following the inspection, they sent us revised documentation they planned to use.

The providers ensured people had the necessary equipment they required to keep them safe. Where people had been discharged from hospital without the essential equipment to support them, the providers chased this up with the appropriate health and social care professionals. On one occasion, a person was unable to leave their home due to unsuitable and unsafe access to and from their home. The providers followed this up which resulted in arrangements being made to fit a ramp to prevent avoidable injury and social isolation.

Staff followed infection control procedures. Personal protective equipment, such as gloves and aprons, were freely available and accessible for staff. Staff had undertaken infection control training and had a good knowledge of how it applied to their practice.

## Is the service effective?

### Our findings

People, relatives and professionals unanimously agreed staff were well trained, competent and efficient in their jobs. Two relatives said, "... if there is an issue that comes up or something that they are not familiar with, then the office puts enormous effort into getting them trained into being able to do that job" and "They are definitely well trained and I am surprised at just how well trained they are." A health care professional commented, "Training/supervision is of good quality."

When new staff started work at Eclipse Care, they completed induction training. This induction included new members of staff supervised by more experienced staff (shadowing) to ensure they were competent and confident to carry out their roles before working alone. The induction formed part of the probationary period so the providers could assess if staff were suitable to work for the service and the people they supported. For those staff who fit the criteria, they undertook the full Care Certificate (recognised as best practice induction training). They were supported by the providers to achieve the competencies and skills required.

Staff received regular training which enabled them to feel confident in meeting people's changing needs. Staff received training on a variety of subjects, such as safeguarding, safe moving and handling, medication, food safety, health and safety and fire safety. Where necessary, staff undertook enhanced skills to enable people to continue to be supported at home. For example, staff had been trained and assessed as competent to give insulin injections, so they could do this at the regular care visits. Some staff had extended skills to enable them to train other staff, such as 'train the trainer' in safe moving and handling. This meant assessments could be carried out quickly if people's needs had changed. Three care workers said, "I feel well trained and confident in my job", "Training is always up to date" and "(Providers) make sure training is up to date which makes me feel I am trained to do my job."

Staff received on-going supervision and appraisals for them to feel supported in their roles and identify any future professional development opportunities. Regular competency and 'spot' checks took place to monitor staff performance. All staff unanimously said they felt supported by the providers. One care worker said, "I feel well trained, confident in my job and have regular supervision." Another said, "(Providers) are very easy to talk to ... they are very supportive and approachable."

The providers and staff knew how to respond to people's specific health and social care needs, such as recognising changes in a person's health. Staff spoke confidently about the care they delivered and involved care professionals where necessary. The providers gave us examples of where partnership working had added to the wellbeing of people's lives. One relative explained how care staff had noticed a change in their family member's skin and a second relative told us how staff had noticed a change in a person's demeanour when they had not noticed themselves. A relative commented, "They (staff) are very good at spotting things ... particularly when (family member) is unwell."

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 so do when needed. Where they lack mental capacity to take decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

We checked whether the service was working within the principles of the MCA and found they were. People's legal rights were protected because staff knew how to support people if they did not have the mental capacity to make decisions for themselves. People's capacity to make decisions about their care and support were assessed on an on-going basis in line with the MCA. Before people received any care and treatment, they told us they asked for their consent and staff acted in accordance with their wishes. People's individual choices and preferences were acted upon, such as how they wanted their personal care delivered.

People were supported to maintain a balanced and nutritious diet. Staff provided different levels of support including making meals from scratch, reheating previously cooked meals, snacks such as sandwiches or heating ready meals in a microwave. One person said, "They (care staff) encourage me to help with making a sandwich and a cup of tea." People told us staff would make any food requested. One person told us, "They (care staff) make me a snack at lunch and then prepare my evening meal for me. They put it in the oven to cook and when the next carer comes in, all they have to do is take it out and it's ready for night-time."

Another person told us how they sometimes liked to have their lunch in their dining room and other times in their lounge; staff supported them in their choices. People and relatives told us staff always left snacks and drinks within easy reach between care visits. One relative said, "They make sure they have everything at hand before they leave."

## Is the service caring?

### Our findings

People benefitted from receiving exceptional care. Their needs were put at the forefront of the agency and staff went out of their way to ensure people were valued and supported in a person-centred way. People, relatives and staff spoke of the 'family feel' of the service and the providers treated people as their extended family at this caring service.

The agency provided a bespoke package of care to people, many of whom lived in extremely rural areas which other agencies were unable to cover. For example, one person was forced to remain in hospital for over 300 days as no other care provider could cover the visits in the area in which they lived. Eclipse care took on this package and now provide support to this person who was to eventually return to their own home.

People and their relatives consistently praised the providers and care workers who supported them. They described them as extremely kind, compassionate and caring. People's comments included, "They are 100% caring ... you never feel that you're a routine object but that you're a 'person' ... they are an absolute pleasure", "They (staff) help me with everything and they do everything I need them to do .... I'm happy with them" and "I moved from another service to this one and they are so much better". One relative commented, "They are kind and caring and they really perk up (family member) when they visit."

People received support from a regular team of care workers who developed positive and caring relationships together. Staff knew people well and important details about people's lives, such as their previous life experiences, jobs, interests and hobbies. One care worker supported one person who they knew very well. They had visited them earlier in the day but during the evening they had a 'funny feeling' something was wrong. They travelled to the person's house to check on them. They found the person had fallen and could not get up; they later passed away. Another person told us how much they appreciated the care worker taking the time to put their make up on. They commented, "She's (care worker) such a sweet girl." One person we spoke with showed us their striped socks which had been bought for them by a care worker. They said, "(Care worker) saw these in a shop and said she must get them for me ... they are nice and warm ... I really appreciate them as they are lovely ... I would never have bought them for myself. You can see from the rota they haven't done duty for me since Christmas, but they still thought of me."

Staff, relatives and professionals told us of staff going 'over and above' what was expected of them. One professional said, "I find them an excellent care agency to work with ... they always go above and beyond for their people". Staff told us of the extra tasks they did for people that they regarded as just part of their jobs. For example, one care worker told us how they did shopping for one person in their own time. A second care worker told us how they did one person's shopping in a certain supermarket which was several miles away as this was a cheaper option than the local village shop; they were concerned about saving the person money. A third care worker told us how much they loved their job and understood the people they looked after. For example, the care worker had noticed how one person needed new slippers and they also knew they needed wide fit. They had gone to the shops in their own time to "have a look around" and then spent time on the computer searching online shops for a specific type they knew the person wanted.

Staff were matched with individual people who the providers thought would get on together. For example, one person had been matched with a care worker who had an interest in craft work. They now shared time together knitting and attending a 'Knit and Natter' group; the person proudly showed us their knitting progress to date. They jovially said, "(Care worker) is a better knitter than me ... they leave their knitting here for me to look after ... we do it together." This person spoke very fondly of the team of care workers who supported them. They went on to tell us they appreciated the little things care staff did for them that meant a lot to them. They commented, "They keep the fire going great for me and bring the coal in."

Without exception, people and relatives told us how staff treated them with the utmost dignity, privacy and respect which was very important to them. Staff gave us examples of how they maintained this whilst giving personal care to people. Two people commented, "They are respectful in all that they do for me every day" and "I feel happy with them ... they are very respectful in everything they do for me." Two relatives commented, "They are respectful and especially when providing their personal care" and "It's not always easy for an older man to have care from a younger woman, but they do all they need to do in a very respectful way ... they have a very natural way about them and do everything with ease."

People and relatives unanimously told us how care staff worked with people to help them remain independent for as long as possible. One person said, "They help me to do things for myself and encourage me ... they help me with my exercises and some of the carers will join in with me; it's nice to have someone doing them with you instead of on your own" and "They encourage me ... we share doing my personal care ... we do everything between us and they encourage me to do that." Two relatives commented, "The carers will give (family member) the tools to do something for themselves but will also reassure them that they are there to support them if they need assistance" and "They encourage them to do what they can and is always done tactfully." Another relative told us how the care workers knew their family member's mobility was poor, but they still encouraged them to do as much as possible to maintain their independence.

Staff spoke fondly of the people they supported and how much they enjoyed their jobs. Staff were able to care for people without being rushed and actively encouraged to 'spend time' getting to know them. In return, staff regularly went the 'extra mile' for people as part of their jobs. For example, one care worker said, "I had a break in between visits; I chose to go and sit with a service user and spend longer with them and get to learn who they are and their past life which I find fascinating to listen to." The provider said, "Staff are encouraged to visit people if they have spare time during their care visits; this benefits people greatly by having more social contact and less isolation." A relative said, "They (staff) would do anything for them and reassure them that they have plenty of time and that they don't feel rushed ... this is important to them."

The providers ensured their high standards of care continued by only recruiting the most suitable staff who shared the same vision and values as themselves. Recruitment procedures were value based and local staff employed where possible. For example, in one area the care team had lived in the village for all their lives. They had known the people and the families they supported since they were children. It was a small closely-knit village where 'everybody knew everybody'. The providers also considered it very important that the care workers acted as a 'team' together and were happy to cover for each other when needed. This helped people to feel safe and looked after by staff they knew and trusted which was important to them.

The providers were both passionate about acting as people's advocates themselves and speaking up on their behalf. They had acted for several people if they considered they had not received what they should be entitled to, such as financial payments, equipment, contracted care hours and social prescribing. The providers also recognised the importance of using outside advocates when necessary. They gave an example of when an outside advocate had been used to act on behalf of one person.

The caring nature of the providers also extended to staff. Staff unanimously told us the providers treated them with kindness and compassion in their job roles. This made the staff team feel valued and included. Staff comments included, "What an amazing company, it's a pleasure coming to work ... management is amazing." The providers knew the locations of some people's homes were hard to reach on narrow country lanes with no lighting or parking available. In response to this, they had supplied each care worker with a backpack containing essential equipment but also safety equipment, such as a hi viz jacket, torch and first aid kit. The providers checked staff were home safe at the end of the evening and ensured staff got home safely in bad weather. One care worker said, "It's the best company to work for as they go over and beyond to make you are ok and happy with the job."

The providers showed how much they appreciated one care worker who walked to people's homes in the recent snow. They travelled through snowdrifts to get to people and after three days their footwear was wet and dirty. The providers were aware of this and as a token of appreciation, they purchased the care worker a new pair of boots. One of the providers said, "(Care worker) went over and above what we would expect of them ... they deserved it and they did it for us." Staff who used their cars for work, received a mileage allowance towards their fuel and running costs. The providers felt this disadvantaged those people who were 'walkers', as they had to replace footwear more often. As a result, staff who walked to their visits also received the same mileage allowance as if they were using a car.

## Is the service responsive?

### Our findings

People received an exceptionally personalised and responsive service specific to their individual needs, preferences and choices. The providers and staff had an excellent understanding of recognising each person was an individual with their own values and beliefs. The providers managed a service where there was a strong, visible and person-centred culture. One of the providers said, "People receive care in the way they actually want it." This ethos was evidenced by the feedback and examples given from people, relatives, health and social care professionals and staff. A care professional said, "I find them (Eclipse) very responsive to requests". A relative said they appreciated all the help from the staff and that "... they all don't just do the job but think about ways to improve life for them (people)".

The agency strived to provide the best possible person-centred care and support for people. They worked closely with health and social care professionals to provide joined up working and a team approach to care. One professional said, "I find them an excellent care agency to work with ... I hold them at very high regard." They providers responded to challenges immediately and resolved them as quickly as possible. One professional told us of two recent examples where the service had worked in close liaison with them to support people with complex needs. The professional said, "In both cases, Eclipse went above and beyond in their support ... both maintained very good, open and flexible communication ... were proactive as we worked to find solutions in the care provided."

The first example related to a person who required several joint home visits to allow them to remain in their home. The professional said, "The client had unrealistic expectations, but Eclipse worked hard to find solutions to difficulties in the care provided." The professional said, "...they managed (person) will great empathy and humour providing a very personalised support in a challenging situation."

The second example related to a late evening hospital discharge of a person. The staff member visiting the person had telephoned one of the providers for advice and guidance. The provider responded by making a 50-mile round trip to visit this person, stopping off on the way to pick up essential groceries as well as continence products from supermarkets. The person had been discharged unexpectedly with no supplies of either items in their home.

The service responded to urgent situations in a planned and calm manner. For example, one person lived alone and was found to have no heating. Their bottled gas supply had run out and their home was found to be very cold. The local community nursing team wanted the person to move out as it was too cold to remain there. However, the care worker knew this was the person's greatest fear. The care worker said, "I was not going to let this happen ... not on my watch". They contacted the providers who told them to "do whatever they needed" to resolve the issue. The care worker sourced a local handyman to disconnect the gas, take the bottles to a local supplier to be filled, return the bottles and then reconnect. Meanwhile, the provider and care worker arranged to source and buy electric radiators in the meantime as a substitute. The care worker carried on with their other care visits but kept going back to check on progress. As a result, the person had their heating resumed in a few hours and no care visits were disrupted. They now had electric radiators as a secondary source of heating. This was as a direct result of the provider and staff's immediate

and effective response.

A relative told us how the agency had responded to an emergency and "went above and beyond ... showing what a good company they are". They had been delayed abroad by a cancelled flight and would not be returning home until the following day. Whilst they were away, their family member had stayed in a care home. The care home were unable to look after their family member for another night. The family contacted Eclipse Care and the providers responded quickly. They organised a care worker to pick them up from the care home, bought them a fish and chip supper on the way home, took them safely home and stayed with them overnight until the family members returned. The relative commented, "Being so far away at the time was so reassuring." The care worker had to make a 35-mile round trip to the care home and covered the care visits on their day off.

The providers provided a service which was very flexible. A relative told us how they planned to go on a family holiday abroad for the first time in several years and had organised for their family member to stay in a care home. However, the care home then unable to take the person for the first two days of the holiday. The agency agreed to respond to this need by providing extra care for the person by making extra care visits. They would then take the person to the care home themselves and ensure they were settled in safely. The provider would then return to the person's home to make 'double sure' the house was secure. The relative said this had been the perfect solution to the problem and without this response, they would not have been able to go on holiday. They said, "It's not like work to them ... they are brilliant."

When people asked the providers for changes to their care visits, the providers responded as quickly as possible. For example, one person had been allocated a visit of 8.00am. They requested a later time as this was too early for them to get up. The providers responded to this by making a later visit and said, "You're entitled to a lie in at 90!"

Each person was visited and assessed before the agency agreed to provide care and support. Both providers carried out the assessments together to make sure they agreed the person's needs could be met fully. They providers felt this was very important as they only received basic information in referrals from the commissioners and said "95% of referrals do not give a true reflection of care".

Following the assessment, a care plan was drawn up involving the person, family and professionals. Care plans reflected people's health and social needs and demonstrated where other health and social care professionals were involved. Care records were in an organised and easy to follow format which staff could follow. Care records included information on the person's history and details about how they wished their care to be given. Some of the care files would benefit from more detail which was discussed and agreed by the providers on the day of inspection.

We looked at how the provider complied with the Accessible Information Standard. The Accessible Information Standard is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. Staff were able to communicate and understand each person's requests and changing moods as they were aware of people's communication preferences. For example, staff had learnt to recognise people's nonverbal communications to gauge people's moods and behaviour.

People were encouraged to engage in meaningful community activity to aid both their physical and emotional wellbeing. Both providers recognised the importance of 'social prescribing' which enabled people to lead a fulfilling life and encouraged people to try new interests. For example, staff had identified one person who had been very active in their past. They worked on a plan to support the person with

activities which they enjoyed, such as being involved with the theatre, going to local community clubs and going to the pub to meet with friends. From gaining confidence, the person had recently agreed to speak at a local school a 'Day of Difference' event. This involved them talking about their life experiences and share some of their stories with the schoolchildren. The person spoke enthusiastically and excitedly about the event and was full of ideas about how they were going to deliver their presentation to the schoolchildren. They were clearly looking forward to it. They said, "Until I got involved with Eclipse, I lived on my own for 13 years... suddenly I got involved with Eclipse. This has introduced me to lots of new people."

One person's support hours had decreased and therefore they were no longer able to undertake activities. The providers noticed a deterioration in the person's wellbeing following this. They told us "We fought on their behalf for an extra hour a week". Due to their response in this matter, this person received an extra hour a week to take part in community activities again. A friend commented "(Person) is in good spirits. Your crew are doing a very good job and they now get out regularly, so well done to you all."

All staff were proud and passionate of their work and it was clear the providers and staff worked as a team to enhance people's wellbeing. Care professionals commented, "I have consistently found them to be very professional, caring and personal in their approach to people we worked together to support" and "Eclipse are excellent and a pleasure to work with". One care worker told us how proud they were to be a care worker and that "... being able to provide high quality care and providing person centred care makes me feel great."

For people who did not wish to leave their home, the providers encouraged staff to spend as much interactive time with them as possible in ways the person enjoyed. Staff really valued this and all expressed how they enjoyed spending time with people and not rushing their visits. One relative told us how, after discussions with the provider, care staff now ate their lunch at the dining table with their family member. This encouraged the person to eat whilst enjoying a social occasion. Two other relatives said, "They sit and talk or help them (family member) with a jigsaw and (family member) really enjoys this" and "(Family member) gets on very well with (care worker) who goes above and beyond ... if they finish their job early, they will sit with (family member) and do a puzzle or have a chat."

The providers ensured people received the care they wanted and this was regularly monitored. There were regular opportunities for people and relatives to raise issues, concerns or compliments. The providers did this by keeping in regular touch with each person either by a formal check on their care, a drop in and chat session when they were passing or by a weekly telephone call. One person said, "They give me a call every now and gain to make sure everything is alright. Even yesterday, came to see me to check everything was ok for us."

The complaints procedure set out the process to be followed by the provider. This ensured people had the right information if they felt they needed to raise a concern. Records showed that all concerns were investigated and an outcome reached. One person said, "They always sort everything out any problems they are as good as gold".

The service provided end of life care and worked closely with health care professionals. One person who had recently been discharged from hospital as at 'end of life'. As a result of the care given, their quality of life had improved. The providers were overseeing the care and ensured the person had all the equipment they needed, such as a commode and mattress. The liaised with professionals as necessary. One professional said, "They always look at ways they can help us provide any extra care for their patients at times or crisis or with deterioration in health."

## Is the service well-led?

### Our findings

People, relatives and care professionals consistently praised the exceptional high standards of care provided by the service and the way in which the service was led. One care professional said, "The providers are passionate about the service they deliver." Relatives commented, "I am firmly convinced that Eclipse are the best care company in the area by far", "I am really, really pleased that we have this company and I can't praise them enough. I would recommend them to anyone who needed care" and "The one thing I will say is that we have already passed on their names to two other people who wanted a care service and we have no hesitation in recommending them."

The service was led by two passionate, motivated and committed providers who worked together extremely well, utilising each other's individual skills. They promoted a culture that was person centred, open, inclusive and empowering. They were very visible. They both shared the same vision and values for the service and were extremely caring. The statement of purpose showed their aim was to "...improve the lives of the people it supports by providing high quality outcome focused care and support in the individual's own home". Their future aim was to double the care hours they currently provide but remain a small service where both providers knew each person they provided care for. One of the providers said, "I use my 'nan test'; If it's not good enough for my nan, then it's not good enough for anyone."

The second provider shared this ethos and said they wanted to deliver care "in the way people want it." Both providers felt they had to act as advocates when needed. One provider said, "If I have to challenge decisions for these vulnerable people, then so be it." They gave us examples of when this has happened and the positive outcomes they had achieved (as previously reported). One care professional said, "I have found my dealings with Eclipse Care always to be professional when trying to sort out issues surrounding patients ... they are good at expressing concerns."

Due to the small size of the agency, the providers knew each person receiving care exceptionally well, along with their family, friends and interests. They were put at the heart of the service and open and honest relationships had grown. People and relatives spoke highly of both the providers. It was clear from observations, conversations and feedback that positive, trusting and inclusive relationships had been successful. Relatives said, "They (providers) are brilliant and have no faults", "...we have no hesitation in recommending them as a care provider ... they are what they say they are (a caring agency)" and "The managers from Eclipse are brilliant."

The service had a systematic approach to working with other organisations to deliver a service based on good practice. The providers had been recognised by professionals as being an excellent role model for other services. They had established links with local communities to develop services in response to people's changing needs. A professional said, "I would highly recommend them as a care agency and really value the work they do to support and care for our community."

The providers were successfully involved in "Core Group" meetings with other care professionals. They attended these meetings to discuss people they were working with and improve their quality of care. One

professional said they found this "Invaluable as it really benefits the patients and helps us work as a team." Other professionals commented, "I have found them to be open and receptive, responsible and forthcoming to discuss challenges and risks and happy to work with me and my colleagues" and "Eclipse are excellent and a pleasure to work with."

One of the providers was an ambassador for the South West "Proud to Care" group, a partnership of the local authority and Health Education England working together at regional level to raise the profile of a career in care and health. This involved promoting jobs in care by taking part in events, advertising, visiting colleges and schools, arranging open evenings, distributing leaflets and networking with other organisations. The aim was to promote careers in care positively and help negative stereotyping.

Care professionals were unanimously complimentary about the positive outcomes achieved by this partnership working. For example, the service had been selected by a commissioner of care services to support emergency contingency planning for the winter period. This had resulted in the providers managing packages of care delivered by care workers, working for two other care agencies, from outside the area. The providers delivered the training, support and governance to these staff to provide seamless care. One professional said, "We were confident they (providers) were an organisation we could work with under pressure and who could manage the complexities that arise from quick discharges". They went on to say, "Eclipse have proven adept at working with the two agencies and their staff." A service commissioner expressed their thanks and appreciation for working with them and commented, "Your hard work does not go unnoticed ... we thoroughly appreciate all that you do to ensure our customers receive a high-quality caring service."

The providers had high standards and expectations for staff and led by example. Staff comments overwhelmingly told us how proud they were to work for Eclipse Care and how much they felt appreciated. They told us how they enjoyed working for the company, how much they felt supported and how they felt part of the service. Comments included, "They (providers) support me 150% in my job and this makes me do my job as best as I can", "I have found a fantastic company to work for now and I am so glad I am a part of their team" and "I have amazing managers."

Care staff were recruited for their attitude, personality and work ethos as well as their care skills and knowledge. They were motivated, enthusiastic and enjoyed their jobs. They consistently praised the good support, communication and teamwork. Comments included; "There is always someone on the end of the phone, these are the people I want to be with, I love my job"; "I am a happy worker, I am happy I have found a care firm that management listen" and "Management is amazing, it's like a small family run business."

Whilst the providers had excellent leadership and management roles, they also provided hands on care support to staff regularly. All staff told us how much they appreciated this approach and how they knew they only had to ring with a problem and it would be sorted. One care worker said, "You only have to ring the office if you need help and they just say, 'I'm on my way'. Another said, "I think it's brilliant that (providers) are prepared to work in the community as well." The providers regularly undertook the first care visit to a person, along with the care worker. This gave the providers more insight into what was needed at the visits. Staff told us the providers would not ask them to do anything they would not do for themselves. They also told us the providers respected their decision if they said 'no' to anything asked of them.

The providers recognised and valued their workforce. The provider supported leadership and management development within the staff team through education and training. They had recently recognised the skills of one care worker who they had promoted to a senior position. This care worker said, "They (providers) have helped and supported me ... they have made everything right ... it's lovely to work here."

The providers had a notice board in the office which contained examples of when staff had gone 'above and beyond' in their jobs. Some of these examples included: "...caring for a person's cats and dogs"; "... collecting pads for an individual as they could not get to chemist"; "... visited a person we support whilst in respite care"; "... went to a rural shop on her break to buy (personal items) for a lady who had ran out", and "... cooking meals for a lady so she doesn't need to have frozen meals." Staff were chosen every three months for their work and rewarded with a gift.

One care worker had recently been nominated to commissioners for a recognition award of their hard work. The providers celebrated the care worker's success at achieving a bronze award. This care worker told us, "I only do my job as best I can ... I really would be in this job unless I did." This was a statement shared with us by many staff, who told us they went over and above in their work but that it was 'just part of the job'.

The providers also celebrated special occasions with people and staff. They gave out cards and gifts at special times of the year. The providers told us people's gifts were tailor made to what people would like. They said this was easy as they knew people well and enjoyed buying individual gifts such as plants, chocolates or dates.

Without exception, the providers and staff respected and valued people as individuals and worked with them as partners in their care. Two healthcare professionals said, "I consider Eclipse to have a strong ethos around caring for people they support and their staff" and "...have a caring and personal in their approach to people."

The providers recognised the importance of good governance within the service. There was a range of quality monitoring systems in place which continually reviewed and improved the service. The service had developed systems which meant any deficits in practice were identified early and rectified. For example, the providers were in the process of changing the electronic records to a system that allowed the providers to continually monitor staff performance and not just at monthly intervals.

The service was committed to learning from accidents, incidents and concerns. The service monitored people's feedback, 'spot' checks, records, accidents/incidents and staffing levels. Where any gaps or areas for improvement were identified, these were resolved. For example, there had been one missed care visit. The providers had investigated why this had happened and as a result purchased a new electronic system which is monitored by the providers to ensure all care visits have been completed. We saw how this system worked and if staff were over ten minutes late to a visit, a red alert was sent to the providers who immediately telephoned the care worker to find out the reason. No further missed care visits had been made since.

Contingency plans were in place to deal with adverse weather conditions. In the recent snow, the providers had ensured all people had enough food, heating, blankets and to deal with the weather. After analysing their practice, they had learnt from this experience they needed to go one step further. As a result, they had purchased their own 4 x 4 vehicle, so they could get to the hard to reach places more easily next time to maintain people's continuity of care.

People's feedback, views and suggestions were sought through regular reviews. Comments seen from the last questionnaire sent out to people and their relatives contained both positive and complimentary comments about the whole service. These included, "I think overall your service is excellent"; "Happy with the service, made life a lot better"; "Very happy, I'm very well looked after", and "Very good, very professional and nothing is too much for them."

