

Nurse Plus and Carer Plus (UK) Limited

NurseplusUK

Inspection report

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Truro
Cornwall
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Ratings

Overall rating for this service	Outstanding 
Is the service safe?	Outstanding 
Is the service effective?	Good 
Is the service caring?	Good 
Is the service responsive?	Outstanding 
Is the service well-led?	Good 

Summary of findings

Overall summary

About the service:

Nurseplus UK is a domiciliary care agency that provides personal care to people living in their own homes in the community. When we inspected they were providing the regulated activity, personal care, to 14 people in the Truro and surrounding areas in Cornwall.

The service provides care to people of all ages with a variety of care needs, such as learning disability, mental health, dementia and sensory needs. Staff supported people to access the local community, do their shopping and prepared meals. Some people received 24 hour care from staff at NurseplusUK to enable them to remain safely in their own homes.

People's experience of using the service:

- People were protected from potential abuse and avoidable harm by staff that had regular safeguarding training and knew about the different types of abuse.
- Staff went above and beyond their roles as carers to ensure people were protected further from risks in their own homes.
- People received outstanding service from Nurseplus UK in relation to the risks they may be exposed to by their accommodation and their method of heating their home.
- Risks to staff working alone late in the evening had been identified.
- The registered manager had provided staff with personal emergency alarms to further protect them when working alone in the community in the evenings.
- There were sufficient numbers of staff to meet people's needs. The provider ensured people had a consistent staff team.
- Medicines were managed safely to ensure people received them safely and in accordance with their health needs and the prescriber's instructions.
- People received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant qualifications to meet their needs. The provider had a good system to monitor all staff had regular training and refresher training to keep them up to date with best practice. Training methods included online, face to face training and competency assessments.
- Staff provided some shopping services for people. There were procedures in place to ensure that people's money was protected and managed safely.
- Staff treated people with kindness, compassion and were respectful. Staff interacted well with people and their relatives when providing care.
- One relative told us that she lived out of county and when she visited her relative, she felt 'she was not needed' as the carers were so attentive.
- People, and where appropriate their representatives, were involved in decisions made about their care. The management team from Nurseplus UK had visited people prior to them receiving care visits, to discuss their care needs and to develop a care plan. Where necessary, they sought external professional help to support decision-making for people.

- The registered manager was very keen to ensure the service was as responsive to the needs of the people they supported as they could possibly be. The service was outstandingly responsive to people's needs.
- One person told us they had only the night before, made an out of hours request for a carer to visit them the following morning to give them a shower; this was acted upon swiftly and accommodated in line with the relative's request.
- Staff knew the people they supported well, several people had had a relationship with Nurseplus UK for many years. Staff were aware that some people were isolated and lonely alone at home. Staff put forward a suggestion that they set up the 'Young at heart club'.
- The 'Young at heart club' was held in the service offices once a month and people were brought in, by staff, to enjoy tea, cake and the company of others. A variety of information and offers of support and advice would be provided at the events to further enhance their quality of life.
- There was a complaints policy and process in place which people were aware of.
- Staff were provided with specific end of life care training.
- Staff often stayed on at people's homes supporting the families of people who had died even after their own shift had concluded.
- The registered manager recognised a member of the care staff each month for an award. This was seen as motivational and recognition of staff showing commitment to good care.
- Staff received chocolates, flowers and a certificate to evidence their good work.
- Annually a member of staff was recognised to going above and beyond the call of duty and offered a night in a hotel and a meal as a thank you.
- Everyone we spoke with about Nurseplus UK told us they thought they provided a very good effective service.

More information is in Detailed Findings below

Rating at last inspection: At the last inspection the service was rated Good. The report was published 27 September 2016.

Why we inspected: This was a planned inspection based on the rating at the last inspection. At our last inspection we rated the service Good. At this inspection the service has been found to be Outstanding

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was exceptionally safe

Details are in our Safe findings below.

Outstanding 

Is the service effective?

The service was effective

Details are in our Effective findings below

Good 

Is the service caring?

The service was caring

Details are in our Caring findings below.

Good 

Is the service responsive?

The service was exceptionally responsive

Details are in our Responsive findings below

Outstanding 

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good 

NurseplusUK

Detailed findings

Background to this inspection

The 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.

Inspection team: This inspection was carried out by one 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 care service.

Service and service type:

Nurseplus UK is the Cornwall branch of a national agency providing care and support to people in their own homes and supported living. Services include care for those with; dementia, eating disorders, learning disabilities, mental health conditions, sensory impairments.

The agency is registered for Personal Care and Treatment of disease, Disorder or Injury, caring for children (0 to 18 years), and caring for adults of all ages.

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

Notice of inspection:

This inspection was announced. We gave the service 24 hours' notice of the inspection visit in line with our methodology for inspection domiciliary services. This ensures there are appropriate people available at the office to provide necessary information to us.

We visited the service on the 20 February 2019 and looked at records, spoke with the registered manager and two office staff. We visited one person in their own home. Prior to the inspection we spoke with five relatives of people who received a service. After the inspection we spoke with one

Person.

What we did:

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The provider returned the PIR and we took this into account when we made judgements in this report. We reviewed other information that we held about the service such as notifications. These are events that happen in the service that the provider is required to tell us about. We also considered the last inspection report and information that had been sent to us by other agencies.

During the inspection, we had discussions with the registered manager and two office staff. We looked at the care and medication records of three people who used the service, we also examined records in relation to the management of the service such as staff recruitment files, quality assurance checks, staff training and supervision records, safe guarding information and accidents and incident information.

Is the service safe?

Our findings

Safe –this means people were protected from abuse and avoidable harm

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

Systems and processes to safeguard people from the risk of abuse.

- People were protected from potential abuse and avoidable harm by staff that had regular safeguarding training and knew about the different types of abuse.
- The provider had effective safeguarding systems in place and all staff had a good understanding of what to do to make sure people were protected from harm or abuse.
- Regular staff meetings discussed safeguarding and any concerns staff may have had.
- Everyone we spoke with told us they felt the service provided by Nurseplus UK was safe.
- One relative told us, "I feel very reassured that [person's name] is receiving the best care. They have had the carers for around seven to eight months." They felt safe knowing that staff were with them each day, as they were cared for in bed, "[Person's name] has 24-hour care, two 12 hour shifts from 8am to 8pm and 8pm until 8am, so around the clock, 24 hr care. It's fantastic."
- People liked the fact that there were the same carers coming in to see them, so they recognised them. People liked the consistency of having the same carers, "[Person's name] feels the safest by knowing that the three main carers that come to visit do things in the way that they recognise."

Assessing risk, safety monitoring and management

- Staff understood where people required support to reduce the risk of avoidable harm.
- Risk assessments included how to access people's houses and any risks to staff including environmental risks, poor lighting, parking arrangements, and if any pets were present in the home.
- Staff went above and beyond their roles as carers to ensure people were protected further from risks in their own homes.
- From these assessments and staff getting to know the person well, it had been recognised that some people were at risk from fire in their homes due to smoking cigarettes or cluttered environments.
- People received outstanding service from Nurseplus UK in relation to the risks they may be exposed to by their accommodation and their method of heating their home.
- The fire service had been contacted by the registered manager and asked to visit some people's homes to support them with fitting smoke alarms and other advice to help keep them safe from the risk of fire.
- Some people were living in homes which were solely heated by wood burning stoves. The staff recognised that this could pose a specific risk to people. The registered manager arranged for a specialist company to visit these homes and assess the safety of the wood burner and give people advice and guidance on safety.
- Staff also recognised that older people, living alone with wood burning stoves, would need to ensure they had their chimney swept regularly to reduce the risk of chimney fires. This was again arranged by the service.
- The registered manager checked all accident and incident records to make sure any action was effective,

to identify any patterns or trends and to see if any changes could be made to prevent incidents happening again.

- Risks of lone working to staff were recognised by the registered manager.
- Some staff provided care visits in the late evening. The registered manager had a policy which required staff to message the out of hours manager to let them know they were safe and going home when leaving a visit late in the evening.
- The registered manager had also provided staff with personal emergency alarms to further protect them when working alone in the community in the evenings.
- There were procedures in place to ensure that people's money was protected and managed safely.

- Sometimes the service was asked to take on packages of care that they were unable to accommodate safely. In these circumstances the registered manager worked with another agency to offer them the opportunity to take on the work. We were told, "We only do this with that agency as we trust them to do a good job for people and we know them."

Staffing and recruitment.

- There were sufficient numbers of staff to meet people's needs. The provider ensured people had a consistent staff team.
- Each person's staffing needs were calculated based on an individual needs assessment, which were reviewed and updated regularly as people's individual needs changed.
- People and their relatives told us they received care in a timely way. People received their visits at the time agreed, carers met their care needs and stayed for the expected amount of time.
- Staff had been recruited safely. All pre-employment checks had been carried out including reference checks from previous employers.
- The service had an emergency plan in place to manage weather emergencies such as snow. Recent snow fall in the area had put this plan to the test and everyone who needed a visit from staff was able to have this support provided due to the use of a 4 x 4 vehicle owned by the registered manager. An emergency list showed which people required visits from the agency as they had no family or neighbours to support them. Staff would walk to these people if no vehicle was available.
- Care plans clearly showed which people had family or friends to support them if staff were unable to visit due to bad weather.
- Sometime staff had difficulties with their own vehicles and were unable to travel to visit people. The service had a pool car which was provided to staff to use to make visits when their own care was unavailable. This helped ensure visits were made to people in such circumstances
- The staff group were stable with many long-standing staff having worked for the service for many years. In cases where a person's regular carer was not on shift, the person was told that they would receive a replacement carer that had visited the service user's home before. This helped ensure continuity for the person.
- New staff received an induction. People told us that the new carer shadowed their regular carer and before they were brought to the service users home, permission to do so was obtained from the service user and/or their relative.
- Carers never appeared to be 'rushed'; and relatives had never witnessed carers rushing their relative when providing care.

Using medicines safely

- Medicines were managed safely to ensure people received them safely and in accordance with their health needs and the prescriber's instructions.

- Risk assessments were completed for the safe management of people's medicines at the beginning of a care package.
- The service recognised the need to ensure people remained as independent as possible with taking their own medicines. The staff only prompted people, or administered the medicines when the person needed assistance. When staff supported people in this task appropriate medicines records were completed by staff.
- Staff were trained in medicines management and regular competency checks were carried to ensure safe practice.

Preventing and controlling infection

- Staff were provided with appropriate personal protective equipment, such as aprons, gloves and hand gel.
- Staff had been provided with infection control training.
- People were happy with the infection control measure used by staff.

Learning lessons when things go wrong

- Accidents and incidents were reported and monitored by the registered manager to identify any patterns or trends.
- The registered manager discussed accidents/incidents with staff as a learning opportunity. For example, ensuring staff were clear on how to report and record incidents and any action taken to help reduce any re-occurrence.

Is the service effective?

Our findings

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

- Good: People's outcomes were consistently good, and people's feedback confirmed this.
- Assessing people's needs and choices; delivering care in line with standards, guidance and the law
 - People's needs were assessed before the service began to provide support and people and their relatives confirmed this.
 - Care was planned and delivered in line with people's individual assessments, which were reviewed regularly or when people's needs changed.
- Staff skills, knowledge and experience
 - People received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant qualifications to meet their needs. The provider had a good system to monitor all staff had regular training and refresher training to keep them up to date with best practice. Training methods included online, face to face training and competency assessments.
 - The service had its own training room next to the office complete with hospital bed and equipment. This meant training in moving and handling etc could be provided to staff when needed it.
 - Staff felt well supported and had regular supervision and an annual appraisal to discuss their further development and any training needs.
 - Regular spot checks were also carried out which focused on appearance, manual handling, records and infection control.
 - New staff had completed a comprehensive induction and shadowed experienced staff till they felt confident to work alone.
- Supporting people to eat and drink enough to maintain a balanced diet
 - Staff provided some shopping services for people.
 - Staff from Nurseplus UK carried out meal preparation for some people and this was carried out in a satisfactory manner.
 - Staff had been provided with training on safe food preparation.
 - Staff provided for people's specific needs. One person told us, "[Person's name] is Guyanan and likes a particular type of rice and the carer will make up the rice and meals that they knows they like. Carers are respectful of them being vegetarian too and had accessed recipes to provide them with a vegetarian meal."
- Staff providing consistent, effective, timely care within and across organisations
 - People received care in a timely manner. No one reported staff rushing them in any way.
 - One person told us, "I think in four years, the carer has only been late once and that was for a very good

reason, so really, no, I would say they are a very reliable service."

- Adapting service, design, decoration to meet people's needs
 - The service had painted two large 'dignity trees' on to the walls in the offices of Nurseplus UK. Each branch was named with a different aspect of caring, dignity, diversity and respect. This was a very visual reminder to everyone how to respect diversity.
 - The office walls also held a large pictorial display of the Care Quality Commission five domains of inspection, Safe, Effective, Caring, Responsive and Well led. This also provided staff with a very visual information about the aspects of care and support that is inspected.
 - The office of the service was modern and airy. There was space for interviewing new staff or meeting with people and their families.
 - The premises were well maintained by the landlord.
 - Equipment provided for staff to use in people's homes was regularly checked as safe to use and serviced in accordance with best practice.

- Supporting people to live healthier lives, access healthcare services and support
 - People were supported by their relatives to attend healthcare appointments as necessary. Where people did not have family Nurseplus UK staff took them to appointments and stayed with them and brought them home again.
 - People were supported to improve their health. For example, staff supported some people with their diet and smoking cessation.

- Ensuring consent to care and treatment in line with law and guidance
 - The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. We checked whether the service was working within the principles of the MCA.
 - Staff assumed people had the capacity to make decisions, unless they assessed otherwise. Some people who used the service lacked the capacity to consent to care and treatment.
 - Staff were provided with training on the Mental Capacity Act 2005
 - Staff were aware of how to protect people's rights.
 - People were asked for their consent before care and support was provided. One relative told us, "Yes, they will engage [Person's name] with talk to them about any decisions about their package of care."

Is the service caring?

Our findings

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

- Good: People were supported and treated with dignity and respect; and involved as partners in their care.
- Ensuring people are well treated and supported; respecting equality and diversity
 - Staff treated people with kindness, compassion and were respectful. Staff interacted well with people and their relatives when providing care.
 - One relative told us that she lived out of county and when she visited her relative, she felt 'she was not needed' as the carers were so attentive.
 - Another person told us that they felt that the carers enjoyed caring for their relative, as when additional shifts arose to cover absence they always put their names forward.
 - People were very happy with the care they received from Nurseplus UK. Carers were familiar with people's preferences, likes and dislikes. In general, people told us that the carers took the time to talk with people and took a genuine interest in them.
 - One relative told us. "Due to their dementia, [Person's name] may say some quite odd things, but the carers always deal with that sensitively. They may say things that aren't right and the carers deal with it in a way that does not make them feel uncomfortable."
 - Life history of people was provided for staff so that they had information which helped them to understand who the person was before they supported them.
 - People were given birthday cards when it was their birthday.
 - Christmas cards and hampers were given to people by the service at Christmas.
- Supporting people to express their views and be involved in making decisions about their care.
 - People, and where appropriate their representatives, were involved in decisions made about their care. The management team from Nurseplus UK had visited people prior to them receiving care visits, to discuss their care needs and to develop a care plan. Where necessary, they sought external professional help to support decision-making for people.
 - Care plans were regularly and formally reviewed, agreed and signed, by the service user and/or their relative and a representative from the agency.
 - Some people needed aids to help them communicate effectively. This was recognised and supported. Care plans recorded if people needed glasses or hearing aids.
 - One relative told us that the management team were 'brilliant when it came to paperwork and administration.'
- Respecting and promoting people's privacy, dignity and independence

- The registered manager had held a 'Digni-tea' day earlier in February 2019. This acknowledged the importance of dignity in care and provided information for staff, people and their families to share over a cup of tea and cake.
- There were 28 members of staff who had undergone Dignity Champion training and proudly wore their 'champion' badges to show they upheld the dignity of people at all times.
- Staff were caring and protected people's privacy.
- People told us care staff were respectful. Comments included, "Yes, the carer who comes is excellent and is very kind and respectful. They come for three to four hours each Monday afternoon and the last hour we bath [Person's name] together, in case they fall as they have poor sight and staff are very respectful of their privacy and dignity."
- Training was provided and policies guided staff to recognise and support people's diverse needs.
- People's confidentiality was respected. Records were kept securely.

Is the service responsive?

Our findings

Responsive –this means that the service met people's needs

- Outstanding: Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.
- Personalised care; accessible information; choices, preferences and relationships
- □ The registered manager was very keen to ensure the service was as responsive to the needs of the people they supported as they could possibly be.
- □ A staff suggestion box was set up and staff were encouraged to put forward ideas which they thought would improve the responsive support people received from Nurseplus UK.
- □ Staff knew the people they supported well, several people had had a relationship with Nurseplus UK for many years. Staff were aware that some people were isolated and lonely alone at home. Staff put forward a suggestion that they set up the 'Young at heart club'.
- □ The 'Young at heart club' was held in the service offices once a month and people were brought in, by staff, to enjoy tea, cake and the company of others. A variety of information and offers of support and advice would be provided at the events to further enhance their quality of life.
- □ During this inspection visit staff were heard telephoning people, arranging to collect them by car from their homes and bring them in to the next 'club' day.
- □ One person who lived alone, had not been eating well recently and staff noticed they had lost weight. Therefore, care staff had invited a frozen food delivery company to exhibit and offer tasters of their produce at the next 'club' day. It was hoped that this would tempt people into considering ordering the meals to enjoy at home and be tempted to eat more. The staff also liaised with the person's GP when they were concerned about people's weight.
- □ People told us, "It is so nice to get together" and "I really enjoy it."
- □ Staff went above and beyond their caring role to support people to improve their quality of life.
- □ One person was supported to lose weight where it was impacting negatively on their long-term health condition.
- □ Staff helped the person to make healthy meal choices which led to a reduction in their weight and an improvement in their condition.
- □ Another person had been supported with guidance and advice from care staff to give up smoking cigarettes which had impacted greatly on their well-being.
- □ One person was assisted by staff at Nurseplus UK to gain employment. Staff supported the family too. Staff became insured to drive the person's motability car and were able to take the person to work. This had improved their independence and has as a result decreased the amount of support needed from the service.
- □ Some people that were supported by Nurseplus UK were living with dementia. Staff suggested they may benefit from using 'twiddle' muffs. These were brightly coloured knitted woollen muffs with a variety of textures including buttons, tinsel and ribbons. A relative of one staff member offered to make them. They were intricate, decorative and beautifully soft woollen muffs. One person who we visited at home proudly showed us her 'twiddle' muff and was getting great enjoyment out of it.

- The registered manager had recognised that some people were living in property which did not have any central heating. They contacted a power company who would visit the person in their home and assess them for the installation of gas central heating without charge to them. This greatly enhanced the lives of people.
- One person had a health condition which put them at risk if they were left without the presence of someone with them at all times. This was restricting the person when they wanted to go on holiday. Staff made arrangements to go with the person on a camping holiday and stayed with them to help ensure they were always safely supported. This was greatly enjoyed by the person.
- One person's home was not safely meeting their requirements and care staff supported them to move house to a supported environment. Staff helped the person with all aspects of the move from one home to another.
- Where people had needed to make changes to their time slots, or cancel a visit a short notice, the management team had always been very accommodating.
- One person told us they had only the night before, made an out of hours request for a carer to visit them the following morning to give them a shower; this was acted upon swiftly and accommodated in line with the relative's request.
- Another person told us, "We've been having the carers for five years now. I book ahead and the office management is excellent in making sure that we book what I want for [Person's name] and also that we get the same carer visiting."
- People told us they received care from staff who knew them well. They told us, "We need a regular person as they are basically socialising with [Person's name], so they don't want to have to try and get to know lots of different people all of the time. At the moment it's the same carer each of the week"
- There was information in place to enable the provider to meet the requirements of the Accessible Information Standard (AIS). This is a legal requirement to ensure people with a disability or sensory loss can access and understand information they are given. Each person's care plans included a section about their individual communication needs. For example, about any visual problems or hearing loss and instruction for staff about how to help people communicate effectively.
- One person had experienced a stroke which had left them with difficulty in expressing themselves effectively. Staff recognised this and so arranged for the person to have an electronic tablet with an application loaded on to it which helped the person to communicate more easily.
- Staff wanted to further enhance their communication with people who did not hear well. Some staff members had learnt some British Sign Language (BSL) in order to help with communication.
- One person had stopped visiting the hairdressers due to not being able to drive any longer. The person had communication difficulties and lacked confidence when speaking with people who did not know them. The staff arranged a taxi company account for her who had been told about when to collect them, where to take them and how to arrange for payment. This had greatly increased the person's confidence.
- One relative told us, "If [Person's name] initiates conversation, which they are limited in doing, some of the carers are very good at picking up on that and drawing out a conversation, which gives [Person's name] a sense of well-being. It's more than just the caring element and they have a very natural conversation together." One member of the office staff had taken the time to get to know this person and their communication methods. This meant the office was able to receive telephone calls from them and understand them well and respond to them quickly.
- Care plans were regularly reviewed and included people in that review. One person told us, "We had someone from the office come to discuss the care plan and package of care with us and they have been since to review it. I recently took the reviewed care plan, which they get me to agree and sign off, back to the manager at the office."
- Another person told us, "Staff discussed the care package with me, my sister and my Mum as her needs have changed, we've had follow up meetings to review and agree the revised care plan."

- The service had an appropriate Equality and Diversity policy and staff were provided with training to help ensure people they supported were protected from discrimination.
- Improving care quality in response to complaints or concerns
- There was a complaints policy and process in place which people were aware of.
- One concern had been raised by another service who shared the care of one person. We saw this had been fully investigated and discussed with staff. The matter was satisfactorily resolved.
- Everyone we spoke with told us they felt clear on how to raise any concerns they may have and were confident that they would be listened to and action would be effectively taken.
- One person told us, "I have never had to make a complaint in the three years. Not formally anyway, but there was someone we weren't happy with, we spoke with the manager and they weren't sent to us again. We didn't want to make a big deal about it and so we didn't feel we wanted to make a formal complaint."

- End of life care and support
- The registered manager told us no one was receiving end of life care at the time of our inspection. Care staff would at times support people with end of life care and the service would work closely with other healthcare professionals to ensure people had dignified and pain free death.
- Staff were provided with specific end of life care training.
- Staff often stayed on at people's homes supporting the families of people who had died even after their own shift had concluded.
- The registered manager told us they supported staff who wished to continue to remain with recently bereaved families and offer much valued support from someone who knew them well.

Is the service well-led?

Our findings

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

•Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

•Planning and promoting person-centred, high-quality care and support with openness; understanding and acting on their duty of candour responsibility

• People, relatives and staff told us that the service provided good care.

• The registered manager worked in the office each weekday and had care co-ordinators who worked alongside care staff, supporting them and leading by example.

• People were asked for their views on the service provided by Nurseplus UK.

• The feedback from surveys was positive.

• People told us, "Yes, we have been sent questionnaires at least once in the 13 months we've been receiving the carers and [Person's name] and I filled that out and sent it back to them. Nurseplus UK will also visit Mum when the carers are in attendance, every 2-3 months to check that everything is going ok and that Mum is happy with everything" and "Yes, I would say I have a feedback sheet, probably annually."

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

• People told us the service was well-led.

• In order to recognise the commitment made by care staff throughout the year, the care co-ordinators took over the visits needed over Christmas to enable the staff to have a good rest.

• There were care co-ordinators who carried out spot checks when staff were visiting people. The checks monitored appearance, timeliness, records, infection control and moving and handling competencies.

• People told us they felt that Nurseplus UK provided a good service.

• Staff took pride in providing a person-centred service.

• Staff were happy working for Nurseplus UK and felt well supported.

•Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

• Staff felt able to share their ideas and suggestions about how the service could develop further. This had been very successful via the option of using a 'suggestions box' which had led to innovative ways of supporting people beyond just their day to day needs detailed earlier in this report. The provision of electronic tablets with applications to aid communication and the support of people's dietary needs have all been reported.

• Staff were asked to complete a survey to give their views on all aspects of working for the service. The

responses were positive to this survey.

- Everyone we spoke with about Nurseplus UK told us they thought they provided a very good effective service.
- People told us the office staff were very good at communicating with people and their families. They told us, "Communications with the office is good. I have been given all of their contact details, including their email address, this is my main communication with them" and "Yes, there is always someone there when you ring them."
- The views of people who received a service were sought by the management team of Nurseplus UK in order to constantly improve the service.
- The service worked alongside other agencies to support good care provision to people.
- People felt able to contact the office staff when necessary and always found staff to be approachable.

- Continuous learning and improving care

- The registered manager recognised a member of the care staff each month for an award. This was seen as motivational and recognition of staff showing commitment to good care.
- Staff received chocolates, flowers and a certificate to evidence their good work.
- Annually a member of staff was recognised to going above and beyond the call of duty and offered a night in a hotel and a meal as a thank you.
- All aspects of the service were regularly audited by the registered manager. We noted improvements in records following an audit finding which was reported to staff.
- People were regularly visited by the management team with the aim to continually improve the service.
- People would recommend Nurseplus UK to anyone looking for a domiciliary care provider.
- One relative told us that they had already recommended Nurseplus UK to others.
- The registered manager met regularly with the area manager of the provider to receive support and guidance.

- Working in partnership with others

- As detailed in the Safe section of this report the service worked closely with many agencies to ensure the people they supported were protected from risk and were given guidance on improving their quality of life.
- The staff worked closely with social services, district nursing teams, GP's, community psychiatric nurses and community matrons to help keep people well and living at home