

Your Serenity Limited

# Your Serenity Limited, Room 6

## Inspection report

74 Hambridge Road  
Newbury  
Berkshire  
RG14 5TA

Tel: 07969345338  
Website: [www.yourserenity.co.uk](http://www.yourserenity.co.uk)

Date of inspection visit:  
14 October 2021

Date of publication:  
15 November 2021

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Your Serenity Limited, Room 6 is a domiciliary care agency providing care and support to people living in their own homes. It provides a service to older adults, people living with dementia and people living with a physical disability. Not everyone who uses the service receives personal care. CQC only inspects where people receive personal support with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of the inspection the service was providing personal care to 18 people living in the Newbury, Thatcham and surrounding areas.

### People's experience of using this service and what we found

People experienced excellent continuity and consistency of care from designated staff who made them feel safe. Staff had completed safeguarding training and knew how to recognise and report abuse. Risks to people were identified and managed safely. The registered manager ensured enough suitable staff were deployed to meet people's needs. Staff underwent a robust recruitment process, which explored and confirmed their suitability to support people in their own homes. People received their medicines safely from staff, in accordance with recognised guidance. People and staff consistently praised the registered manager for keeping them fully informed regarding changes in government guidance relating to infection control during the pandemic. Lessons from accidents and incidents were used to drive continuous improvements in the service.

Staff assessed all aspects of people's physical, emotional and social needs and delivered support to ensure these were met to consistently achieve good outcomes for them. The registered manager effectively operated a system of spot checks, supervision, appraisal and staff meetings, which supported staff to deliver care based on best practice. Staff emphasised the importance of eating and drinking well and reflected best practice in how they supported people to maintain a healthy balanced diet. Staff worked in partnership with healthcare professionals to make sure care and treatment met people's changing needs.

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

People experienced caring relationships where staff treated them with kindness and compassion in their day-to-day care. People were supported to make decisions about their care and these choices were respected by staff. Staff encouraged people to maintain and develop their independence, and to direct their own health and care whenever possible.

People were placed at the heart of the service and experienced individualised care, which was responsive to their needs and reflected their choices, preferences and wishes. Staff felt valued and well supported by the registered manager who had created an open and honest culture, which reflected in the approach of the staff. Staff spoke passionately about the people they supported and strove to achieve good outcomes for

them. At the time of inspection, the service was not supporting anyone with end of life care. When the service had supported people at the end of their life, they had received extremely compassionate care, which respected their wishes to remain at home and ensured they experienced a comfortable, dignified and pain-free death.

The service was well organised and well managed. People, staff and professionals described the registered manager as an inspirational manager. The registered manager understood their responsibilities to inform people when things went wrong and the importance of conducting thorough investigations to identify lessons learnt to prevent reoccurrences. The governance structure of the service ensured there were robust measures to monitor quality and safety of the service. Quality assurance was embedded within the culture and running of the service, to drive continuous improvement. The registered manager had developed effective partnerships to ensure people experienced the best possible outcomes.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (published 2 March 2020).

#### Why we inspected

We undertook this inspection as part of a random selection of services rated good and outstanding, to test the reliability of our new monitoring approach.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Your Serenity Limited, Room 6

## **Detailed findings**

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

This inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

This service is a domiciliary care agency, providing personal care to people living in their own homes. The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. The registered manager was also the nominated individual and the proprietor of the service. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection. Inspection activity started on 14 October 2021 and ended on 29 October 2021. We visited the site office on 14 October 2021.

#### What we did before the inspection

We reviewed other information we had received about the service, including notifications received from the provider. The law requires providers to send us notifications about certain events that happen during the running of a service. We sought feedback from the local authority, community professionals who work with

the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We reviewed the provider's website. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with nine people who used the service and three relatives about their experience of the care provided. We spoke with the registered manager, needs assessor and nine staff. We reviewed a range of records. This included five people's care records, medication records and daily notes. We looked at five staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed, including the provider's policies, procedures and quality assurance audits.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with three community professionals who engaged with the service

# Is the service safe?

## Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People received safe care from reliable staff they knew well. People and relatives consistently told us they experienced very good continuity and consistency of care from a small dedicated team of staff. One person told us, "Yes I do feel safe very safe. They [staff] help me get up, we have a little chat, balance is my problem. I am not rushed." A relative told us, "Yes he [family member] is safe. He is pretty vocal if things go wrong."
- Professionals consistently said the registered manager prided themselves on the responsive, person-centred approach of the service, ensuring people were safe and well cared for. One professional told us, "She [registered manager] and the care staff are very caring and will raise things quickly if they are worried."
- The provider had systems, policies and processes in place which meant that any concerns were reported appropriately to relevant authorities and investigated. For example, staff appropriately raised concerns when they became worried a person was being subject to familial abuse, which protected them from harm.
- Staff knew the procedures to report concerns. They were able to describe various forms of abuse, as well as the protocol to follow. Staff consistently told us they would whistle blow to the local authority safeguarding team or the Care Quality Commission if they felt the provider had not acted upon their concerns.

Assessing risk, safety monitoring and management

- The service had clear processes to assess and manage risks to people, which were reviewed regularly in response to people's changing needs, to ensure they were met safely.
- Support plans provided staff with the information and guidance necessary to enable them to mitigate identified risks, such as moving and positioning and developing pressure area breakdown.
- The registered manager had arranged for three other staff members to complete further training to improve and afford resilience in relation to care planning and risk management.
- People's independence was actively promoted, whilst ensuring they were safe. Staff worked closely with people and their families to understand how to manage their risks safely, in the least restrictive way.
- People and relatives consistently told us the registered manager had fully involved them developing their needs and risk assessments. One person told us about their assessment process, "They [registered manager] are very good. They go the extra mile."
- Staff were knowledgeable about people and could explain how they supported people to minimise risks to their health and wellbeing.

Staffing and recruitment

- There were enough staff, with the right mix of skills, to support people safely in accordance with their support plans.
- People told us staff were extremely reliable, always arrived on time and were never rushed.
- The registered manager refused to compromise on the quality and safety of people's care. To achieve consistency and continuity of care, people had a team of staff specifically designated to them.
- Documents demonstrated how the registered manager had declined care packages, where they could not guarantee enough suitable staff to meet people's needs. A professional told us, "I have always found [registered manager] completes thorough needs assessments and you have confidence they can deliver the care and support required, when they take a package on."
- The registered manager completed a staffing needs analysis, based on people's dependency assessments. This ensured enough staff were deployed, with the right mix of skills to deliver care and support to meet people's needs safely.
- The provider effectively recruited and retained staff who were able to develop meaningful relationships and nurture trust in people.
- Staff had undergone relevant pre-employment checks as part of their recruitment, which were documented in their records. These included references to evidence the applicants' conduct in their previous employment and a Disclosure and Barring Service (DBS) check. The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services.
- When required the registered manager had completed individual risk assessments to support staff with protected characteristics to work for the service safely. One staff member told us, "I personally feel extremely lucky for finding such an amazing team to work with and [registered manager] is a wonderful boss because she makes me feel valuable as an employee."

#### Using medicines safely

- People received their prescribed medicines safely from staff who had completed the required training and had their competency reassessed annually by the registered manager and independent trainer.
- The provider's policies and procedures gave staff clear guidance how to manage people's medicines safely. The registered manager completed regular observations to ensure staff managed medicines in practice, in accordance with their training, current guidance and regulations.
- The registered manager and designated staff completed regular audits to check staff administered medicines safely and clearly identified any issues or actions to be taken. Staff understood the action to take if a mistake happened, to ensure any potential harm to a person and any future recurrence was minimised.

#### Preventing and controlling infection

- People and staff consistently praised the registered manager for keeping them fully informed regarding changes in government guidance relating to infection control during the pandemic.
- Staff adhered to the provider's infection control policy and procedures and told us the registered manager had ensured there were ample supplies of personal protective equipment (PPE). People and relatives were reassured that staff used PPE in line with government guidance.
- Staff overwhelmingly praised the tenacity of the registered manager during the pandemic for ensuring they were protected, particularly in relation to accessing Covid-19 testing and vaccinations. One staff member told us, "During the pandemic [registered manager] ordered a big amount of PPE and I liked that there was a big diversity of them in order for us to find the most suitable and comfortable for each of us. She was very kind and personally delivered the PPE to our doorstep when the office had to be closed."
- People and relatives told us that staff demonstrated the required standards of hygiene and cleanliness whilst delivering care and support.
- People's health was protected because staff consistently followed good food safety and hygiene practice



when preparing or handling food. Staff had completed relevant training in relation to infection control and food safety.

#### Learning lessons when things go wrong

- Staff understood their responsibility to report concerns and were aware of the provider's whistle blowing policy, which gave them confidence to speak up if they had concerns.
- Staff accurately recorded all incidents and accidents, in accordance with the provider's policy, which the registered manager analysed and investigated thoroughly. Any learning or changes to risk assessments were discussed with staff. The registered manager had ensured that staff took the required action to keep people safe, by reducing the risk of further incidents and accidents.
- Staff consistently told us the registered manager had created a blame-free culture, where staff understood accidents and mistakes happen and were encouraged to be open and honest to prevent future occurrences.

# Is the service effective?

## Our findings

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

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

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

- People and relatives found the thorough assessment of their needs and following assurance visits reassured them and instilled confidence in the service.
- The service achieved good outcomes for people by delivering care based on detailed assessments and care plans. Care plans considered all aspects of people's lives, clearly detailing their needs, individual preferences and choices, and how they wished to be supported. This enabled staff to support people effectively to achieve good outcomes, such as working to increase their strength, mobility, nutrition or to maintain healthy skin.
- The registered manager also used such information to allocate the most suitable and compatible staff member to develop meaningful relationships with people to ensure the best outcomes.
- At the time of inspection, the service was changing from a paper-based system to an electronic care planning system. This enabled people and their relatives to access the care planning system through a mobile telephone application if they wished to, provided appropriate consent had been given.

Staff support: induction, training, skills and experience

- People and their relatives consistently told us they were confident carers had the right training and skills to support them. People spoke highly about the skills of staff, reporting they were knowledgeable, competent and conscientious.
- Supervision and appraisal were effectively used to develop and motivate staff, review their practice and focus on professional development. Staff consistently told us they received effective supervision, appraisal, training and support, which enabled them to carry out their roles and responsibilities effectively.
- The registered manager had direct oversight of all staff training and induction. This ensured all staff had completed required training before starting to support people and that these skills were regularly refreshed.
- Staff were supported to access training and develop skills relevant to their role. For example, all staff were being supported by the provider to attain nationally recognised health and social care qualifications in addition to the provider's core training. One staff member told us, "I have almost completed my level 3 diploma in health and social care, I was very thankful to Your Serenity for giving me the opportunity to complete this as I do feel ready for a more senior role and I am looking forward to assisting more with care plans and risk assessments."
- Staff normally experienced individualised face to face training with an external trainer. During the pandemic the registered manager had enhanced their training with recognised on-line training to complement the face to face training.
- Staff told us they felt well supported during their induction to the service, with face-to-face induction training and shadow shifts with more experienced staff. One person told us, "They [Your Serenity] have a

system where new staff are supervised by the carers [staff] who know me and that works well. Before [with alternative care provision] we had a constant change of staff. These [Your Serenity] are extremely good and I am very happy with them"

- Staff consistently praised the quality of their training and made positive comments such as, "I was very surprised with the training. It was much more detailed than I have previously experienced. The face to face training was exceptional and I found it all very useful. The online training was also very helpful as there was some bits in there that I wasn't trained on before" and "I also appreciated the fact that [registered manager] made sure I was comfortable and confident within the job role before sending me to carry out calls on my own. The carers I did shadow were amazing and made sure I understood everything that was being done." Another new staff member said, "I have all the support possible from management at any time I need it, no matter how big or small my problem is. The training that I have received from Your Serenity has been more than I expected when I joined. It was a lot more in-depth and well-informed than I had received at my previous care job, which was all online."

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

- People and relatives praised staff for encouraging them to eat and drink, preparing meals they liked and ensuring they were well hydrated.
- People were supported to have enough to eat and drink to remain healthy. The registered manager placed strong emphasis on the importance of eating and drinking well to maintain people's health and well-being. For example, one evening staff asked a person with a poor appetite what they would like to eat. They replied, "fish and chips from the chippy". The staff member went to get fish and chips, which made the person feel special and invoked happy childhood memories whilst they were eating them.
- Staff knew about people's specific diets, and what they liked to eat and drink.
- People's care plans explored whether they had a good appetite, if they had any dietary restrictions or preferences and if they were at risk of malnutrition, weight loss or weight gain.
- Staff followed guidance from relevant professionals to protect people from the risk of poor nutrition, dehydration, swallowing problems and other medical conditions.
- When required staff had effectively used recognised tools and systems to monitor identified risks, to ensure any changes or concerns were noted and advice was sought from relevant professionals when necessary.

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

- Staff worked well with other agencies and organisations to ensure people had access to the support they needed for their healthcare and wellbeing needs. The service made prompt referrals and liaised with other healthcare professionals when the need arose. For example, one relative told us, "It is very easy to get in touch with them, the manager always gets in touch, [named staff] was there when [family member] felt unwell, the carer [staff] was very calm and capable and got [family member] downstairs and decided that [family member] needed medical care, called the paramedics. She stayed and looked up after the paramedic took [family member] to hospital." This support achieved a successful outcome for the person.
- When people's needs changed staff quickly liaised with health and social care professionals to seek their guidance, which they implemented effectively.
- Healthcare professionals overwhelmingly told us that staff supported people well, in accordance with their guidance and liaised promptly regarding concerns about people's health and mental well-being. Records accurately reflected the guidance provided and implementation by staff.
- People experienced consistent, well-coordinated, person-centred care and support when they were referred to, or moved between different services, for example; admissions and discharges from hospital.

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 when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Staff demonstrated their understanding of mental capacity and how this impacted people, including how to promote choice and control wherever possible for people. Staff obtained valid consent from people before starting care provision.
- People's capacity to consent to their care had been assessed, where appropriate, and accurately recorded.
- The registered manager had a good understanding of the different forms of legal authority. During the initial assessment process, they recorded and checked details provided to ensure people's human rights were protected.
- Where people lacked capacity to make decisions, their relatives and those important to them were involved in best interest decision processes.
- Care plans clearly detailed how staff should support people to make choices, using their preferred methods of communication.

# Is the service caring?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question had remained the same. This meant 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

- People shared meaningful relationships with staff, who took a genuine interest in their lives and treated them with kindness and empathy. One person told us, "I would recommend them [Your Serenity], they are extremely caring, I always get on with them well." Another person told us, "They [staff] really care, which sets them apart from others [alternative providers]."
- People experienced good continuity and consistency of care from regular staff, with whom they developed strong bonds. People and relatives told us staff were focussed on caring for them and not completing tasks. Staff spoke with immense pride and passion about people they supported and their achievements.
- Staff training covered equality and diversity, which prepared staff to meet people's diverse needs arising from their individual cultures. People's diverse needs were clearly identified in their care plans and staff provided support to meet them, including those related to disability, gender, ethnicity and faith.

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

- People and relatives explained how they were fully involved in decisions about all aspects of people's care and support. People told us this meant their opinion and preferences really mattered and made them feel valued and respected.
- Relatives told us the registered manager and staff explained options in a way people could easily understand and ensured their individual preferences and choices were accurately recorded and respected.
- Care plans with people, their relatives and relevant professionals, were enhanced over time by staff with their knowledge gained from working closely with people.
- The registered manager reviewed people's care plans and risk assessments monthly or whenever people's needs changed. This ensured they were accurate and reflected people's current needs and preferences.
- People received monthly quality assurance visits from the registered manager, where they were able to share their experience about the quality of their care and identify any areas for improvement.

Respecting and promoting people's privacy, dignity and independence

- People received care which promoted their independence and respected their privacy. Care plans were written using respectful language, promoting people's dignity and choice. People's needs were regularly reviewed and any change in their independence was noted. People and relatives consistently told us staff encouraged them to be as independent as they could be.
- Staff skilfully persuaded people to take the lead in decisions about their care, using an encouraging approach. People told us that staff held their privacy and dignity in high regard. Staff ensured people were given space and privacy in their care when needed. People told us that staff respected their individuality and

their personal wishes. Relatives consistently told us that staff knew when and how to comfort and reassure people, which made them feel special. For example, staff gently held people's hands and used photographs and other treasured possessions to stimulate conversations about happy memories.

- Staff had completed training and demonstrated knowledge in relation to their responsibility to maintain the confidentiality of people's care records to protect their privacy. The provider had appropriate systems in place to protect people's confidential information, whilst ensuring this was readily available to those authorised to view it.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question had remained the same. This meant people's needs were met through good organisation and delivery.

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

- People and relatives told us they experienced personalised care that was responsive to their needs. Staff planned and promoted person-centred care to deliver good outcomes for people.
- This covered the physical, emotional and social aspects of a person's life and provided opportunities for people to enhance their social lives. For example, one staff member had established a book club, where donated books were shared amongst people receiving the service who were avid readers.
- When staff provided respite for one person, they experienced their favourite treat when staff arranged for them to watch, sing and dance along to 'The Sound of Music'. The registered manager also proactively visited people, providing them with activity packs, craft materials, jigsaws and games. This had a significant positive impact on their mental wellbeing.
- Support plans reflected things that were important to people as well as their support needs and demonstrated effective engagement with other organisations.
- Staff supported people to take part in activities according to their wishes and abilities. For example, staff supported people to access local facilities and take part in activities which increased their sense of independence and enriched the quality of their life. One person was supported to access the community and walk their dog, which had a significant positive impact on their mobility and emotional well-being. The highlight of another person's day who was a dog lover but now unable to care for one, was when staff visited them with their own dogs and allowed the person to pet them.

Meeting people's communication needs

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

- Staff provided care in accordance with the AIS. People's communication needs had been assessed and communication support plans detailed what support they required to communicate effectively.
- People and relatives confirmed that staff knew how different people expressed themselves and took time to listen and engage with people. People were provided with information in a way they could understand which helped them make decisions about their care.

Supporting people to develop and maintain relationships to avoid social isolation; Support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to maintain relationships that were important to them. Some of the visits provided by the service were commissioned to prevent people becoming socially isolated.

- Staff encouraged social contact and supported people to engage in social activities, which helped protect them from the risk of loneliness. For example, people were supported to access the community and visit their favourite places, such as garden centres and coffee shops.
- Care plans contained comprehensive details about people's life histories, hobbies and interests. This enabled staff to learn about them and informed the registered manager as to which staff may have interests in common with people using the service.

#### Improving care quality in response to complaints or concerns

- The service had received no formal complaints since the last inspection. However, people and their relatives had the opportunity to provide feedback about the quality of the service during care reviews, meetings and surveys. This feedback was overwhelmingly positive, with many complimentary comments about the support provided. One person told us, "I would have no hesitation in complaining, the manager is 100%. It is her attitude and her way of expressing herself, she is making the world go round."
- The service had an effective complaints procedure in place. The registered manager treated any concern as a learning opportunity to drive continuous improvement. We reviewed one concern, which had been dealt with in accordance with the provider's policy and regulations.
- People knew how to raise a complaint or concern and told us when they had, these had been swiftly resolved by the registered manager and staff. People and relatives consistently told us that staff encouraged and supported them to express their views if they had a problem or were unhappy about the service.

#### End of life care and support

- People had been given the opportunity to discuss their wishes in relation to end of life care and their preferences, wishes and advanced decisions had been recorded. People's wishes were reviewed regularly.
- The registered manager was passionate about delivering the best possible end of life care to people. At the time of inspection, the service was not supporting anyone with end of life care. However, when the service had supported people at the end of their life, staff had worked closely with family members and relevant healthcare professionals. This had ensured people had rapid access to the appropriate specialist support, equipment and medicines.
- Testimonials demonstrated that people had received compassionate care from staff, which respected their wishes and ensured they experienced a comfortable, dignified and pain-free death. Correspondence from family members consistently referred to the kindness and compassion shown to them by staff whilst their loved one was receiving end of life care and after their passing. For example, one relative wrote, "Thank you for caring for [Family member] so beautifully. You [staff] have all been lovely and made the last weeks of her life comfortable and cheerful. She was always so pleased to see your kind faces, and the practical care you gave her was efficient and tender. My lasting memory will be of [staff member] stroking [family member's] hair and chatting to her" and "We are so happy we found you at exactly the right moment to enable us to keep [family member] at home in comfort and love until the end."



# Is the service well-led?

## Our findings

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

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

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People experienced individualised care from a dedicated, stable staff team who knew them well and were committed to delivering the best possible care to them. The registered manager and staff were focused on ensuring people came first and experienced good outcomes.
- People and relatives reported that staff treated them like members of their own family. Staff were aware of the provider's core values and consistently emphasised the importance of listening to what people want.
- The registered manager placed people and their needs at the heart of the service by ensuring their dignity, independence and choices were prioritised. The service had a strong, person-centred culture, which was reflected in the approach of all staff. For example, one person told us, "When I contact the manager, she is there straight away, I am glad we are with them [Your Serenity]." Another person told us, "We are relieved to have this one [Your Serenity], it is how care should be."
- People trusted the registered manager because they responded quickly if they contacted them. They consistently described the service as well managed. People and relatives consistently praised the registered manager for being empathetic and responsive, whenever they were worried or required support. One relative told us, "The manager is just a really kind and pleasant person, she is hands on, knows her staff and only employs those with the right skills."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider's policy detailed the action required by the registered manager and staff in response to events where the duty of candour applied.
- The registered manager and staff understood their responsibilities and the importance of being transparent when investigating circumstances where something had gone wrong.
- The registered manager had developed good relationships between people, family members and staff and actively encouraged critical feedback from people and staff to drive continuous improvement in the service.

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

- The provider had established effective systems and processes for reviewing the quality and safety of the service. The registered manager used feedback from people and their families to identify necessary learning and areas for improvement.

- Designated staff completed regular audits and reviews of care records and developed action plans to address any areas for improvement identified.
- The registered manager held daily meetings with the needs assessor, where significant events were discussed to identify any necessary learning and to ensure any required action was taken.
- The registered manager had the skills, knowledge, and experience to lead effectively. The registered manager was highly visible and provided clear and direct leadership. A repeated theme from staff was how they were inspired by the registered manager's commitment to do their very best for people.
- Staff told us they felt respected, valued and well supported. People and staff consistently praised the registered manager and described them as an excellent role model.

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

- We received exceptionally positive feedback from people, relatives and staff about the registered manager.
- The registered manager engaged in meaningful conversations with people and staff. This enabled them to seek people's views on a regular basis and involve people in any changes.
- The registered manager delivered hands on care to people regularly and knew them well. The registered manager told us they had no plans to expand, as they would not compromise on the quality of care provided to people. They told us, "I will not take other clients [people] unless I have the right staff available to match the persons individual needs. I recruit staff then take packages when I have resilience."
- People and relatives told us they felt fully involved in care decisions and shared excellent communication with the registered manager and staff.
- Staff consistently told us the registered manager valued their views, which they were encouraged to share during supervisions, team meetings and at any time they needed to talk. One extremely experienced staff member told us how they had left care disillusioned by the poor quality of care provided by some services. They told us the registered manager had persuaded them to return and said, "[registered manager] has been there for all of her carers [staff], and she shows us all how much she appreciates us [staff], which is very rare in most care settings. If we [staff] have any worries or concerns she is always on the phone for us to confide in, and she cares so much about our clients and each and every one of us. If we call her to talk about a worry with one of our clients, she deals with the matter quickly and efficiently."

Continuous learning and improving care

- Community professionals consistently told us the registered manager was open to their guidance and welcomed constructive advice.
- The registered manager had developed good relationships between people, family members and staff and actively encouraged critical feedback from people to help improve the service.
- The registered manager was committed to learning and continuing to improve the service. For example, they sought feedback from people about the new electronic care planning system. Feedback from some people and relatives who did not like to use technology, showed they preferred to have a paper care plan in their home, which was readily accessible and reassured them. The registered manager and staff were ensuring these preferences were met, whilst checking paper and electronic plans were consistent.
- The registered manager had invested in staff training and development to ensure people had positive experiences of care. The service commissioned an independent trainer to support the management team with in-depth induction and refresher training and had trialled different ways of supporting staff to complete the Care Certificate.
- The registered manager's continued professional development and performance was also reviewed and assured by the independent trainer.

#### Working in partnership with others

- The registered manager proactively sought advice and guidance from other organisations and professionals, which they used to inform and improve people's care delivery.
- The registered manager and staff worked well in collaboration with external agencies to ensure people received high quality, well-coordinated and consistent care.
- The service worked closely with commissioners who consistently provided positive feedback.