

RV Extra Care Limited

# RV Care Limited - Devon

## 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?

Good 

# Summary of findings

## Overall summary

This announced comprehensive inspection took place on 15 and 20 August 2018. The provider was given short notice because the location provides a domiciliary care service and we needed to be sure that someone would be in. This was RV Care Limited – Devon' first inspection since registering with the Care Quality Commission in August 2017.

RV Care Limited - Devon is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community in Honiton and surrounding areas. Not everyone using the service receives 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 our inspection 63 people were receiving 'personal care.'

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

The service provided people with exceptional care and support from staff who valued them as individuals. Staff were highly motivated to ensure people received care which was compassionate and kind. People and their relatives praised the care provided by RV Care Limited – Devon. Comments included: "Nothing is too much trouble; the care is exceptional. I am so lucky." Staff treated people with utmost respect and ensured their privacy and dignity.

People, relatives and staff described the service in outstanding terms. They spoke fondly of the registered manager and their staff team. They felt the service was an inspiration due to how it was run. Comments included: "Exceptionally well run" and "Very good service from highly motivated carers, excellent management behind the scenes."

Without exception, the management team and all staff respected and valued people as individuals and worked with them as partners in their care. They promoted a sense of compassion, kindness and caring for everyone involved within the organisation which extended to people, families, friends and pets.

People received exceptionally personalised care and support specific to their needs and preferences. There was an excellent understanding of seeing each person as an individual, with their own social and cultural diversity, values and beliefs.

The service strived to provide the best possible person-centred care and support for people. One professional commented: "I have been consistently impressed with RV Care they have always been very responsive, caring, thoughtful and person centred."

RV Care' ethos is one of life fulfilment and people leading a meaningful and active life. People were encouraged to engage in meaningful activities to aid both their physical and emotional well-being.

People were supported to have a peaceful, comfortable and dignified end of life care in line with national best practice guidance.

The registered manager was forward thinking. They provided strong leadership; were a good role model for all staff and drove up excellent practice to provide people with opportunities. They had established a service where staff were clear about the values and ethos of the service.

RV Care had a positive culture that was person-centred, open, inclusive and empowering. Staff were motivated and proud of their service.

Staff were supported to reach their true potential. They were encouraged to obtain additional qualifications and suggest training which would benefit the people they supported. The service was creative in how they ensured staff had the necessary information to support them in their roles.

There was excellent partnership working with other health and social care professionals. Comments from professionals included: 'In my opinion RV Care provide a gold standard service to those lucky enough to be working with them' and 'I cannot praise the care and professionalism more highly.'

The management team strived to provide the best possible service for people. A number of effective methods were used to assess the quality and safety of the service people received and changes and improvements were made in response.

People felt safe and staff demonstrated a good understanding of what constituted abuse and how to report if concerns were raised. Measures to manage risk were as least restrictive as possible to protect people's freedom. People's rights were protected because the service followed the appropriate legal processes. Medicines were safely managed on people's behalf.

There were effective staff recruitment and selection processes in place. Staffing arrangements were flexible in order to meet people's individual needs. Staff received a range of training and regular support to keep their skills up to date in order to support people appropriately.

There were regular opportunities for people and people that matter to them to raise issues, concerns and compliments.

## 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 said they felt safe. Staff were able to demonstrate a good understanding of what constituted abuse and how to report if concerns were raised.

People's risks were managed well to ensure their safety.

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

There were effective recruitment and selection processes in place.

Medicines were safely managed on people's behalf.

Staff ensured infection control procedures were in place.

### Is the service effective?

Good 

The service was effective.

Staff received training and supervision which enabled them to feel confident in meeting people's needs and recognising changes in people's health.

People's health needs were managed well.

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 exceptionally caring.

Staff were highly motivated to ensure people received care which was compassionate and kind.

People and their relatives praised the care provided by RV Care

Limited – Devon.

Without exception, the management team and all staff respected and valued people as individuals and worked with them as partners in their care. They promoted a sense of compassion, kindness and caring for everyone involved within the organisation which extended to people, families, friends and pets.

### Is the service responsive?

The service was exceptionally responsive.

People received exceptionally personalised care and support specific to their needs, preferences and diversity.

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

RV Care' ethos is one of life fulfilment and people leading a meaningful and active life. People were encouraged to engage in stimulating activity to aid both their physical and emotional well-being.

People were supported to have a peaceful, comfortable and dignified end of life care, in line with national best practice guidance.

There were regular opportunities for people and people that matter to them to raise issues, concerns and compliments.

**Outstanding** 

### Is the service well-led?

The service was well-led

The registered manager was forward thinking. They provided strong leadership; were a good role model for all staff and drove up excellent practice to provide people with opportunities. They had established a service where staff were clear about the values and ethos of the service.

The service had a positive culture that was person-centred, open, inclusive and empowering.

The management team strived to provide the best possible service for people.

Staff were supported by the management team to reach their

**Good** 

true potential.

There was excellent partnership working with other health and social care professionals.

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# RV Care Limited - Devon

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This announced comprehensive inspection took place on 15 and 20 August 2018. The provider was given short notice because the location provides a domiciliary care service and we needed to be sure that someone would be in.

The inspection team consisted of 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 service.

Prior to the inspection we reviewed the Provider Information Record (PIR) and the questionnaires sent out by the Care Quality Commission (CQC). The PIR 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. We also reviewed the information we held about the service and notifications we had received. A notification is information about important events which the service is required to send us by law.

We spoke to 14 people and eight relatives to ask their views of the service they received. We also spoke with eight members of staff, which included the registered manager. We visited two people in their own homes.

We reviewed three people's care files, three staff files, staff training records and a selection of policies, procedures and records relating to the management of the service. After our visit we sought feedback from health and social care professionals to obtain their views of the service provided to people. We received feedback from six professionals.

# Is the service safe?

## Our findings

People felt safe and supported by staff in their homes. Comments included: "Yes. I have been with them quite a few months now. A very good standard all round. I feel safe with them and a lot of care is taken by them, and I have been impressed"; "Coming here I feel very safe because I know that if RV Care know I am under the weather I know they pop in or ring up. They are very good at it"; and "They (staff) know what they are doing, they keep me safe." A relative said, "Yes, they do make her feel safe. It's all been good. They did originally explain what they are doing, but now it's routine, but they do say 'we are going to move you', things like that"

Staff demonstrated an understanding of what might constitute abuse and knew how to report any concerns they might have. For example, staff knew how to report concerns within the organisation and externally such as the local authority, police and the Care Quality Commission (CQC). Staff had received safeguarding training to ensure they had up to date information about the protection of vulnerable people.

The registered manager demonstrated an understanding of their safeguarding role and responsibilities. They explained the importance of working closely with commissioners, the local authority and relevant health and social care professionals on an on-going basis. There were clear policies for staff to follow. Staff confirmed that they knew about the safeguarding adults' policy and procedure and where to locate it if needed.

People's individual risks were identified and the necessary risk assessment reviews were carried out to keep people safe. For example, risk assessments for moving and handling, falls and skin care. Risk management considered people's physical and mental health needs and showed that measures to manage risk were as least restrictive as possible. This included ensuring necessary equipment was available from other services to increase a person's independence and ability to take informed risks.

There were sufficient staff to meet people's needs. People confirmed that staffing arrangements met their needs. They were happy with staff timekeeping and confirmed they always stayed the allotted time. There had been no missed visits.

Staff confirmed that people's needs were met and felt there were sufficient staffing numbers. The registered manager explained staffing arrangements always matched the support commissioned and staff skills were integral to this to suit people's needs. They added that people received support from a consistent staff team. This ensured people were able to build up trusting relationships with staff who knew their needs.

Where a person's needs increased or decreased, staffing was adjusted accordingly. The registered manager commented: "If people's needs change, we need to change with them." We asked how unforeseen shortfalls in staffing arrangements due to sickness were managed. The registered manager explained that regular staff undertook extra duties in order to meet people's needs. In addition, the service had on-call arrangements for staff to contact if concerns were evident during their shift. Contingency plans were in place to deal with adverse weather conditions. People and relatives praised the efforts staff made to

continue providing care during the snow earlier this year.

There were effective recruitment and selection processes in place. Staff had completed application forms and interviews had been undertaken. In addition, pre-employment checks, which included references from previous employers and Disclosure and Barring Service (DBS) checks, were completed. The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services.

People received varying levels of staff support when taking their medicines. For example, from prompting through to administration. One person commented: "The carers help me with my medicines." Staff had received medicine training and competency assessments to ensure they were competent to carry out this task. Staff confirmed they were confident supporting people with their medicines. The registered manager and other members of the management team checked medicine practice whilst working with staff in the community and via records. This was to ensure staff were administering medicines correctly.

Staff followed infection control procedures. Personal protective equipment was readily available to staff when assisting people with personal care. For example, gloves and aprons. Staff had also completed infection control training.

## Is the service effective?

### Our findings

People said they thought the staff were well trained and competent in their jobs. One person commented: "They (staff) are very well trained. I never feel at unease." A relative commented: "Oh yes, the carers clearly know what they are doing."

Staff had completed an induction when they started work at the service, which included training. The induction required new members of staff to be supervised by more experienced staff to ensure they were safe and competent to carry out their roles before working alone. The induction formed part of a probationary period, so the organisation could assess staff competency and suitability to work for the service. Also, to check whether new staff were suitable to work with people.

Staff received training, which enabled them to feel confident in meeting people's needs and recognising changes in people's health. They recognised that in order to support people appropriately, it was important for them to keep their skills up to date. Staff received training on a range of subjects including, safeguarding vulnerable adults, the Mental Capacity Act (2005), moving and handling, equality and diversity and a range of topics specific to people's individual needs. For example, dementia awareness and diabetes management. Staff had also completed nationally recognised qualifications in health and social care, including the care certificate. The care certificate aims to equip health and social care staff with the knowledge and skills which they need to provide safe, compassionate care. Staff commented: "I received training when I started" and "We have regular training, which is made fun."

Staff received on-going supervision and appraisals in order for them to feel supported in their roles and to identify any future professional development opportunities. Staff confirmed that they felt supported by the registered manager. Staff commented: "The support has been really good" and "I receive regular supervision." This showed that the organisation recognised the importance of staff receiving regular support to carry out their roles safely.

Staff knew how to respond to people's specific health and social care needs. For example, recognising changes in a person's physical health. Staff were able to speak confidently about the care they delivered and understood how they contributed to people's health and well-being. For example, how people preferred to be supported with personal care. Staff said they felt that people's care plans and risk assessments were really useful in helping them to provide appropriate care and support on a consistent basis. One commented: "The care plans are very good. I always make sure I read them before seeing the person so I am well prepared."

People were supported to see appropriate health and social care professionals when they needed to meet their healthcare needs. One person commented; "They noticed I wasn't well and they rang the doctor and she came right out. They seem to be able to get the doctor out easier than I can." We saw evidence of health and social care professionals' involvement in people's individual care on an on-going and timely basis. For example, GP and district nurse. These records demonstrated how staff recognised changes in people's needs and ensured other health and social care professionals were involved to encourage health promotion.

Before people received any care and treatment they were asked for their consent and staff acted in accordance with their wishes. People's individual wishes were acted upon, such as how they wanted their personal care delivered. People commented: "They (staff) always ask permission to do things" and "Yes, of course. They (staff) will always ask."

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 Mental Capacity Act (MCA) (2005). People's capacity to consent had been assessed and best interest discussions and meetings had taken place. Care records demonstrated consideration of the MCA and how the service had worked alongside family and health and social care professionals when there were changes in a person's capacity to consent to care. For example, a best interest meeting had taken place to discuss whether a person needed residential care. People were supported to maintain a balanced diet. Staff helped people by preparing main meals and snacks. People commented: "They do my breakfast, lunch and tea... They ask me what I want at tea time and breakfast"; "Yes. I have a choice. They leave something to drink" and "They ask me 'can we get you anything?', 'do you want me to get your breakfast?'. They are always offering."

Care plans and staff guidance emphasised the importance of people having a balanced and nutritious diet to maintain their general well-being. Staff recognised changes in people's eating habits and in consultation with them contacted health professionals involved in their care.

## Is the service caring?

### Our findings

The service provided people with exceptional care and support from staff who valued them as individuals. Staff were highly motivated to ensure people received care which was compassionate and person centred.

People and their relatives consistently praised the care provided by RV Care Limited – Devon. Comments included: "Nothing is too much trouble; the care is exceptional. I am so lucky"; "The carers genuinely care"; "They are kind and gentle"; "I can't speak too highly of them. They are efficient and friendly"; "They (staff) are absolutely lovely, kind and considerate" and "They (staff) are like friends. I look forward to their visits." One questionnaire we received stated: 'They are caring and respectful of my father's needs and take the time to listen and interact with him. They are also very supportive of my mother who is my father's main carer. They have the same carers regularly, and have built up a good rapport with them, this also means that my father is more likely to recognise them with his mixed dementia, routine is important in my father's condition, and the carers come in at the same time every day and are always on time. I cannot praise them enough and cannot find the words to thank their wonderful carers.'

Staff showed compassion towards people. For example, during one care worker's visit they noticed that the person's home was very cold. They approached this sensitively with the person, who explained that they did not have any money for their heating. The care worker contacted the registered manager and immediately organised for money to be put on the meter. The person expressed their thanks and said, "No-one has ever done anything like this for her before." Following this, the registered manager liaised with outside agencies to remedy any future financial issues.

The organisation recognised how important pets were to people's wellbeing and included them in the support package. The service had introduced 'pet care plans' to ensure their welfare was considered should a person have to be taken into hospital. The 'pet care plan' includes a pet's diet, medicines, vaccination dates and routine. All to enable them to be cared for at a kennel or cattery if the need arose. The registered manager commented: "I don't think we can underestimate the relationship between owners and their animals, the love and support they give to each other, the companionship and comfort that an animal provides has a massive impact on our clients personal and emotional wellbeing."

The service provided care for many people living in rural parts of Devon. The registered manager was concerned for people who would be at risk during the snow earlier in the year. They put plans in place to assure people that they would continue to provide for those most at risk. They ensured people were left with extra drinks and food. They hired a suitable vehicle to enable care workers to drive where possible. Where necessary, care staff walked from one person to another to ensure their care needs could be met. A social worker commented: "This acted to avoid unnecessary hospital admissions at a time when acute hospital trusts were already at capacity. In my opinion, RV Care provide a gold standard service lucky enough to be working with them."

One person's heating system failed. The registered manager contacted the local authority and arranged for respite care in a care home. They also drove the person to the home as other transport to the care home

could not be arranged.

Without exception, the management team and all staff respected and valued people as individuals and worked with them as partners in their care. They promoted a sense of compassion, kindness and caring for everyone involved within the organisation which extended to people, families, friends and pets. The Provider Information Return (PIR) said the principle objective was to 'ensure the carers we employ to join our team have the same caring attitude and values towards care that we do, we also recognise that everyone is different and as such we need diversity within our team. Our team recognise the importance of person centred care and how important that is to our customers, they also recognise that no two care packages will ever be the same.' One person commented: "They are very careful in the way they interview people they take on."

Staff were asked to provide care and support to a person with a different cultural lifestyle who would not normally be accepting of support from those other than their family. Staff sensitively and professionally worked alongside the person and their family. As a result, the package was successful and care staff were welcomed into their home.

Staff encouraged people to explore their care and support options to remain as independent as possible. Staff adopted a positive approach in the way they involved people and respected their independence. People commented: "The carers always encourage me to do as much for myself as possible to keep my independence" and "They (staff) recognise how important it is for me to maintain my independence."

Staff had recognised an increase in a person's needs meaning it was likely they would need to move into a care home. This person wanted to remain at home. The service worked alongside a health care professional to consider what options were available for this to happen. The outcome was an increase in support, enabling the person to remain in their own home. The health professional commented: 'I just want to say thank you all at RV Care for all the work with (person) and for working so closely with me to keep (person) at home. If it wasn't for your input she would not still remain at home. You have gone above and beyond for this lady.'

Another example showing the service promoted people's dignity and independence was someone whose eyesight had deteriorated. They were determined to continue to administer their own medicines. Staff contacted the pharmacist, with the person's consent. They arranged for blister packs suitable for people with a visual impairment. With this care and attention from staff the person was enabled to continue to manage their own medicines.

Staff adopted a strong and personalised approach in how they worked with people. There was evidence of commitment to working in partnership with people in imaginative ways, which meant that people felt consulted, empowered, listened to and valued. Staff spoke of the importance of empowering people to be involved in their day to day lives. For example, staff noticed tensions between a couple because due to circumstances were not able to have as much time apart to do their own things. Staff brought this to the attention of the registered manager. They worked alongside a health professional to put in extra hours to enable the couple time apart. As a result, the couple were now able to carry on doing certain activities by themselves, with support from care staff. While one of the couple is enabled to leave the house, the care workers spend time with the other person. They had taught the care workers how to play draughts, do jigsaw puzzles, build models and lego and play scrabble. This has helped their dexterity, cognitive processing and mental well-being. When the couple get back together, they have more to talk about. The caring nature of staff has enabled their relationship to be further enriched.

The caring nature of the service extended to all members of staff as well. Staff had been supported due to personal circumstances. The care and compassion clearly extended to these people. For example, organising accommodation, buying food and clothes and ultimately being there for them. One word stated by the registered and deputy manager that stood out was "humanity."

The service had received several compliments from people using the service, relatives and professionals. These included: 'My heartfelt thanks for the amazing domiciliary support your agency has provided over the past six months. You work creatively and respectfully alongside the clients, families and professionals'; 'RV Care you are amazing. Thank you so much for all your care and kindness with my mum. I would definitely recommend you to anyone, you're a perfect team'; 'You are all very special and are very professional and compassionate carers' and 'I felt I must write and say how much (relative) appreciates the marvellous care he receives... All of you are always smiling and efficient and we both realise how fortunate (relative) is to be so well looked after.'

Staff treated people with utmost respect and ensured their privacy and dignity. From talking to people, we recognised their sense of identity and maintaining their dignity was extremely important to them. Staff maintained people's privacy and dignity when assisting with personal care. For example, asking what support they required before providing care and explaining what needed to be done so that the person knew what was happening. People commented: "The carers always ensure my privacy and dignity are maintained. This is so important to me" and "The door is partly open, but they don't come in until I say. They are just there if I need them. They don't hover." All 22 questionnaires the Care Quality Commission received rated 100% for 'always being treated with dignity and respect by staff.'

Staff explained that it was important that people were at the heart of planning their care and support needs. People confirmed they had a care plan, which was discussed with them and no care was given without their consent. People and relatives commented: "There's a little bit of history in her care plan...We had it reviewed on Monday. (Staff member) comes out every few months to assess Mum. The care plan was updated on Monday because Mum's needs have changed" and "Yes, they came and discussed what I needed, what I wanted. If I want to change a time they will sort it. It has been updated as I am often very slow in the morning. The manager has been out to me. They will always do their best to accommodate my needs."

## Is the service responsive?

### Our findings

People received exceptionally personalised care and support specific to their needs and preferences. There was an excellent understanding of seeing each person as an individual, with their own social and cultural diversity, values and beliefs. There was a strong, visible person-centred culture. This was evident from all staff within all roles. The person-centred culture was embedded at all levels. For example, staff valued people and knew their preferred daily routines, like, dislikes and wishes. The service ensured that staff focused on building and maintaining open and honest relationships with people and their families, friends and other carers. This really helped to promote and ensure the service was person centred. The service's vision and values centred around the people they supported. The organisation's statement of purpose documented a philosophy of maximising people's life choices, encouraging independence, inclusion and people having a sense of worth and value. Staff expressed a passion for providing high quality care. Our inspection found that the organisation's philosophy was definitely embedded in RV Care Limited.

The service strived to provide the best possible person-centred care and support for people. Professionals commented: "I have been consistently impressed with RV Care they have always been very responsive, caring, thoughtful and person centred" and "Really impressed with the knowledge the carers have of their clients in terms of making the interactions meaningful with positive outcomes." Other professional comments included: "(Registered manager) personifies truly person-centred care with our clients and their families who are enabled to get involved in care planning alongside the professionals" and "Kind and caring and most of all will routinely go 'above and beyond' in how they engage with clients and work in a very person-centred manner."

Staff were effective at responding to people's needs. For example, the need for an increase in support due to a person's frailty and involving professionals to enable people to remain as well as possible. Professionals praised the responsiveness of the service. Comments included: "My team are so impressed with feedback that has been received where RV Care are involved. You are making a significant positive impact that many of our other agencies could do with taking a leaf out of your book" and "I just wanted to give my appreciation in getting (person) out of her home and safely into respite. Without your responsiveness, knowledge of her personality and ability to be able to calm her down it would have been a very different scenario."

People were encouraged to engage in meaningful activity to aid both their physical and emotional well-being. For example, a person who was very independent never saw themselves receiving outside care and had started self-neglecting. Regular care workers worked with them and built up trust to a point that they now were accessing the community again. Care workers took them to places of interest and local pubs and restaurants. As the person stated, "enjoy life again." Now they took pride in their appearance and look forward to dressing up ready to go out. They were gaining weight and their hospital admissions had reduced significantly. They now had a zest for life which has had a positive impact on their physical and emotional well-being.

The provider gave us another example of them promoting life fulfilment was a person who was having to be nursed in bed due to their frailty following a hospital admission. Staff noticed the person's mood began to

drop. Noticing this, they spoke with them and asked what was wrong and if there was anything they wanted to talk about. The person said they wanted to be able to get out of bed again and start spending time doing activities again. The staff member said that this indeed was a possibility. Alongside the consent of the person and their primary carer, the care worker contacted relevant health professionals to arrange suitable moving and handling equipment. Assessments took place and care staff cleared out another bedroom to make it a day room. The person's mood has lifted and now talks excitedly about the new day room, stating "how much longer." They were now taking more of an interest in life due to the responsiveness of care staff. The person's primary carer complimented the staff stating, "We are fortunate that we have RV providing our care. They always go the extra mile with the genuine care and support they provide. We are both extremely grateful.'

The service has introduced 'cupcake day' to raise money for charity. Staff bake cakes and ask local businesses to donate raffle prizes. People, their families, professionals and staff are all invited and picked up if unable to get to the event. Some people had mobility issues which prevented them from attending the event. Staff promoted inclusion through home visits. RV Care sees social inclusion to be so important, enabling people to meet others receiving care and building new relationships to aid people's sense of purpose and well-being. Feedback from people was very positive about the cupcake days.

The Registered Manager recognised that Christmas can be a lonely and socially isolating time for some people. To reduce social isolation the RM cooked and delivered Christmas dinner to people's homes and also stayed to socialise with them. They recognised how this gave people a sense of overall well-being and helped reduce their feeling of loneliness. In the run up to Christmas, staff also assist people to put up Christmas decorations and try to ensure they feel a part of the festive spirit.

Care plans reflected people's health and social care needs and demonstrated that other health and social care professionals were involved. All staff took pride in their work and our conversations with them showed they worked as a team to create a better quality of life for people. People, relatives and professionals commented: "RV Care are one of the best care agencies, I have ever dealt with, their staff are second to none"; "The staff are fantastic, they have really got to know me"; "I am treated as an individual by all the carers, they are exceptional" and "They (staff) know how I like things done."

Care files were presented in an orderly and easy to follow format, which staff could refer to when providing care and support to ensure it was appropriate. Relevant assessments were completed and up-to-date, from initial planning through to on-going reviews of care. Staff commented that the information contained in people's care files enabled them to support them appropriately in line with their likes, dislikes and preferences. Care was taken to include very detailed information for staff to follow to meet people's preferences. For example, one care plan documented: 'Make (person's) sandwiches, (person) has one piece of bread with a choice of cold meat and tomato with crusts removed. Place these on a plate and cover with a smaller blue print plate.' Another documented: 'Make up the flasks with four teabags and just hot water. When putting on the lids don't tighten them up fully as (person) will be unable to undo them.'

People's histories were also taken into account, which provided a timeline of significant events which had impacted on them, such as, their physical and mental health. This demonstrated that when staff were assisting people they would know what kinds of things they liked and disliked in order to provide appropriate care and support.

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 with, and understand each person's requests and changing moods as they were aware of people's known communication preferences. Care records contained clear communication plans explaining how people communicated. For example, through hand gestures.

People were supported to have a peaceful, comfortable and dignified end of life care in line with national best practice guidance. At the time of the inspection there was no-one receiving this type of service. The registered manager said, in the event of this type of support, they worked closely with the community nursing team; GP's and family to ensure people's needs and wishes were met in a timely way. The registered manager recognised how their care staff are a massive part of families lives, sometimes for many years. When a person passes away that care then just stops at the saddest time of people's lives. As a result, the registered manager ensures they pop around to see families with flowers and cards to make sure they feel supported and cared for. For some people they are still in contact.

There were regular opportunities for people, and people that matter to them, to raise issues, concerns and compliments. This was through on-going discussions with them by staff on a regular basis and through resident meetings. Relatives were also made aware of the complaints system. The complaints procedure set out the process which would be followed by the provider and included contact details of the provider and the Care Quality Commission (CQC). This ensured people were given enough information if they felt they needed to raise a concern or complaint. The service had not received any complaints. However, the registered manager recognised that if they received a complaint, they would attend to it in line with the organisation's procedure.

## Is the service well-led?

### Our findings

People and relatives spoke fondly of the registered manager and their staff team. They felt the service was an inspiration due to how it was run. Comments included: "Exceptionally well run"; "Very good service from highly motivated carers, excellent management behind the scenes"; "They (staff and management) are absolutely brilliant, I certainly would recommend them"; "You (registered manager) oversee an incredible team and they are a credit to you and you should be proud of the faultless service they provide...I would recommend RV Care without hesitation"; "The support I have received from (registered manager and other members of the senior team) has been absolutely brilliant" and "Absolutely well led."

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

The registered manager was forward thinking. They provided strong leadership; were a good role model for all staff and drove up excellent practice to provide people with opportunities. They had established a service where staff were clear about the values and ethos of the service. It had a positive culture that was person-centred, open, inclusive and empowering. The registered manager commented: "I am blessed to have such an amazing team who have helped me to make a childhood dream a reality. Each and every member of the team bring something special." They appreciated the sense of working together as a team. Staff commented: "The registered manager is amazing, so supportive" and "The management team always are striving to do better and provide the best possible service for people."

Staff were motivated and proud of their service. They said the management team listened to them and took on board their suggestions. For example, the service had implemented the 'blue marshmallow.' This was an initiative for staff to bring new ideas to the service. One blue marshmallow idea from a member of staff led to the implementation of the pet care plan. The staff member had recognised how important people's pets were to them and wanted to ensure they were looked after if they needed to spend time in hospital.

Staff were supported to reach their true potential. They were encouraged to obtain additional qualifications and suggest training which would benefit the people they supported. Staff were supported to develop their skills through induction, national recognised care certificates together with a wide range of additional courses which assisted in providing staff with the skills and knowledge needed to care for people appropriately. Staff were encouraged and supported to specialise in certain areas. The service had end of life care 'champions.' They had been encouraged to undertake specialist training to ensure evidence based information was disseminated to the entire staff team which was current and up to date in order to support people appropriately. For example, increasing staff understanding of the importance of good communication in end of life care.

'Flash cards' had also been created for staff to back up essential training. These were a collection of 20 cards that contain bullet point information about certain key information, such as responding to medical

emergencies. All staff were issued with them on a key chain for them to refer to when carrying out their caring roles. The registered manager had also identified a need for staff to have sepsis training. The sepsis training along with the flash cards managed to successfully identify three possible cases of sepsis. Staff had enough knowledge and confidence to act quickly in order to ensure the affected people received appropriate emergency medical treatment. The quick responses enabled the sepsis to be managed and the people made a full recovery.

RV Care Limited also encouraged medical and occupational therapy students to work within the service to gain work experience. The emphasis being on showing them the importance of person centred care and how this is very much important to people. They valued their time working within the service and how it has taught them the importance of individualised care. One student commented: 'Working in care has opened my eyes to how important these people all are and I am proud to have been part of such a compassionate and dedicated team of carers who truly care and make a difference to the community.'

There was excellent partnership working with other health and social care professionals. Comments included: 'Fundamentally RV Care is extremely well led by (registered manager) ... her high standards in relation to both service and training results in the delivery of high quality and safe care'; 'In my opinion RV Care provide a gold standard service to those lucky enough to be working with them'; 'I can honestly say this is the most professional and efficient provider I have worked with since I began care management six years ago' and 'I cannot praise the care and professionalism more highly.'

The service was currently introducing the 'Herbert protocol.' This initiative was designed by the police for people living with a dementia who were at high risk of wandering and may go missing. Forms were being completed with people and their relatives/advocates which contained specific information, such as daily habits, places they may go, in order for them to be found quickly and returned home safely.

Staff confirmed they had regular discussions with the registered manager. They were kept up to date with things affecting the service via team meetings, weekly newsletters and regular conversations. The registered manager had also introduced daily 'flash meetings.' These had proved a vital part of the running of the service. Senior staff sit down each day and run through people's daily notes. Thus, enabling any concerns or actions required being seen through in a timely, effective and responsive way.

There was evidence of quality monitoring leading to continuous improvement. Surveys had been completed by people using the service and relatives. The surveys asked specific questions about the standard of the service and the support it gave people. All comments received were positive. The registered manager was also in regular contact with people and their families, via phone calls and visits. The registered manager recognised the importance of ever improving the service to meet people's individual needs. This included the gathering of people's views to improve the quality and safety of the service and the care being provided.

There was evidence that learning from incidents and investigations took place and appropriate changes were implemented. For example, care plans and risk assessments updated. Actions had been taken in line with the service's policies and procedures. Where incidents had taken place, where needed involvement of other health and social care professionals was requested to review people's plans of care and treatment. The registered manager and their staff team were also very good at promptly requesting additional equipment to ensure people's safety and enable their independence to be promoted as much as possible. This demonstrated that the service was both responsive and proactive in dealing with incidents which affected people.

A robust governance framework was in place. Audits were completed on a regular basis. For example, the audits reviewed people's care plans and risk assessments and incidents and accidents. This enabled any trends to be spotted to ensure the service was meeting the requirements and needs of people being supported. Where actions were needed, these had been followed up. For example, care plans reviewed. Spot checks were also conducted on a random but regular basis. 'Secret squirrel' checks were also carried out. These involved a member of the management team parking nearby people's houses to observe carers turning up. Both these types of checks enabled the registered manager to ensure staff were arriving on time, staying allotted times and supporting people appropriately in a kind and caring way.