

Greenhurst Care Limited

Greenhurst Care

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?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

Greenhurst Care is a small family run community service that provides care and support to people in their own homes. The service provides help with people's personal care needs, meal preparation, shopping and housework in Bognor Regis and surrounding villages. Staff also support people to go out in to the local area. The provider was also the registered manager of the service.

The service mainly provides care and support for people at key times of the day to help people get up in the morning, go to bed at night and give support with meals. This includes supporting people with mobility and dementia care needs. At the time of this inspection 36 people were receiving a service. These services were mostly funded privately.

We carried out this announced inspection on 1 November 2017. The inspection was announced two days advance in accordance with the Care Quality Commission's current procedures for inspecting domiciliary care services. At the last comprehensive inspection on the 14 April 2015 the service was found to be meeting the requirements of the regulations. The rating of this service was Outstanding. At this service we found the service remains Outstanding.

People and their relatives told us they were extremely pleased with the care and support they received from Greenhurst Care. Comments from people included, "I would not want anyone else coming to me, they are all wonderful" and "Time keeping is excellent as is the communication between everyone involved in the care needs of my relative."

People were treated with respect by staff. People were asked how they wished their care to be provided. Staff respected people's wishes. For example, people were asked what they wished staff to prepare for their meal and what clothes they wished to wear. Some people were supported to go out each day in to the local area and were able to choose where they went on each trip.

Staff had received training in how to recognise and report abuse. Staff were confident about how to report any concerns and were confident that any allegations made would be fully investigated to help ensure people were protected. People received consistent support from care workers who knew them well. People felt safe and secure when receiving care. Comments included, "Staff are very well trained, especially in skills regarding safety, hygiene and looking after dementia clients" and "All staff have good communication skills."

Greenhurst Care were fully staffed at the time of this inspection. Any short notice absences of staff were covered by existing staff. There were sufficient numbers of suitably qualified staff to meet the needs of people who used the service. The service was very flexible and responded quickly to people's changing needs. Staff told us, "We are a small service, we just support people locally, so if someone is unable to come to work we can all run around to cover everything" and "The manager comes out too regularly to provide care and to support us." People told us, "Time keeping is excellent, as is the communication between everyone involved in the care needs of my relative. We always discuss any changes to their condition and

daily routine and I feel able to ask for advice as without exception, the Greenhurst carers show experience and expertise in caring for the elderly" and "They (management) have been very accommodating when we have asked, in advance, for care outside of usual planned visits."

People received care from staff who had the knowledge and skills to meet their needs. There was a strong emphasis on key principles of care such as compassion, respect and dignity. People who used the service felt they were treated with kindness and said their privacy and dignity was always respected. People and their relatives spoke well of staff. Comments included, "I am confident that the carers are well trained and well supported by management who also visit my relative's home frequently," "Staff appear well trained and informed and communicate what they are doing in a caring manner," "Staff are very well trained, especially in skills regarding safety, hygiene, looking after dementia clients" and "All staff have good communication skills."

Staff knew the people they cared for very well and knew how to recognise if people's needs changed. Staff were aware of people's preferences and interests, as well as their health and support needs, which enabled them to provide a personalised service. Staff were kind and compassionate and treated people with dignity and respect.

The management and staff had a clear understanding of the Mental Capacity Act 2005 and how to make sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected. The policy held by the service was in the process of being reviewed to take account of changes in the legislation and to include information for staff regarding the application to the Court of Protection for any restrictions in place on people in their own homes.

People had care plans held both at the office of the service and in their own homes. Care plans contained information to direct staff how to care for each person according to their needs and wishes. Regular reviews took place to ensure staff were aware of any changes in people's care needs. Information about any changes were communicated to staff via text message or telephone call. People were fully involved in their own care plans.

Staff were recruited safely to help ensure they were suitable to work unsupervised with vulnerable people in their own homes. Staff received regular supervision meetings with senior management. Annual appraisals were also carried out. This provided staff with an opportunity to discuss any training needs or professional development needed.

Staff were happy working for Greenhurst Care. The registered manager and staff were clearly committed to providing a good service for people often going the extra mile for people who did not have anyone to assist them other than care staff. One relative told us, "We always discuss any changes to their condition and daily routine and I feel able to ask for advice as without exception the Greenhurst carers show experience and expertise in caring for the elderly, a recent incident illustrates this clearly. There was a blocked drain which caused a flood into the house. Fortunately a Greenhurst carer was at the house and immediately raised the alarm. The situation was handled calmly and efficiently. We realised that (person's name) could not stay at home so Greenhurst helped and guided me with finding respite care."

People received a service that was based on their personal needs and wishes. People spoke very highly about the management of Greenhurst Care, "The service is very well managed with communication from the office personnel by phone and email, we both feel very lucky to have found such a caring and responsive agency," "They (management) issue the rota in good time and we are delighted that we have a small number of carers giving us continuity," "Very well managed. You can see management's influence in all

aspects from office management to staff selection and training" and "The management of this company is excellent too and quickly responds to queries and contact is made via email or phone, I feel fortunate I have Greenhurst Care to turn to" and "The service is very well managed with communication from the office personnel by phone and email, we both feel very lucky to have found such a caring and responsive agency."

Staff were very highly motivated and proud of the service. They told us there was good communication with the management of the service. Comments included, "There is always someone at the end of the phone if you ever need anything" and "We are a very small company and we all know that we have each others backs always."

The registered manager was very committed to continuous improvement and feedback from people, whether positive or negative, was used as an opportunity for improvement. The registered manager demonstrated a good understanding of the importance of effective quality assurance systems. The provider visited people in their homes regularly to check on their experiences of the service provided to them. A survey completed by people and their families was very positive about the care and support provided. The registered manager demonstrated strong values and a desire to learn about and implement best practice throughout the service. People, and their families where appropriate, were provided with information on how to raise any concerns they may have. The service had not had any concerns raised at the time of this inspection. Compliments were received from grateful and happy people and their families thanking the service for their kind care and support.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? The service remains safe.	Good ●
Is the service effective? The service remains effective.	Good ●
Is the service caring? The service remains caring.	Good ●
Is the service responsive? The service remains Outstandingly responsive	Outstanding ☆
Is the service well-led? The service remains Outstandingly well led	Outstanding ☆

Greenhurst Care

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.

The inspection took place on 1 November 2017. The inspection was carried out by one adult social care inspector. We told the provider two days before that we would be coming in accordance with our current methodology for the inspection of domiciliary care agencies.

Before the inspection the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the PIR and other information we held about the service. This included past reports and notifications. A notification is information about important events which the service is required to send us by law.

During the inspection we went to the provider's office and spoke with the provider who was also the registered manager. We also spoke with two care staff and the administrator. We looked at four care plans, six staff files, training and supervision records and other records relating to the running of the service. We visited two people in their homes and met one relative. We received feedback from six people who received a service. Following the inspection we spoke with four people who received a service and two care staff on the telephone.

Is the service safe?

Our findings

A safeguarding policy was available and care workers were required to read this and complete safeguarding training as part of their induction. Staff were confident of the action to take within the service, if they had any concerns or suspected abuse was taking place. They were aware of the whistle-blowing and safeguarding policies and procedures. Most staff had received recent training updates on safeguarding adults. People received consistent support from care workers who knew them well. People and their families told us they felt very safe and secure when receiving care from Greenhurst Care. The registered manager reported any concerns or incidents appropriately to the local authority safeguarding unit and the Care Quality Commission.

Assessments were carried out to identify any risks to the person using the service and to the staff supporting them. This included environmental risks and any risks in relation to the health and support needs of the person. People's individual care records detailed the action staff should take to minimise the chance of harm occurring to people or staff. For example, staff were given guidance about using moving and handling equipment and walking aids. Staff were always informed of any potential risks prior to them going to someone's home for the first time. For example, if there were pets present. The safety of people who used the service was taken very seriously and the registered manager and staff were well aware of their responsibility to protect people's health and well-being. Some staff took people out in their own cars, or drove the person's car under their insurance. However, the service had not assessed and recorded the potential risks involved in this particular activity. This was fully addressed at the time of this inspection with completed risk assessments being placed in the relevant person's care file.

The service had a contingency plan regarding all their service users and their support networks and who could be contacted should an emergency occur, such as severe weather preventing staff travelling to visits. Records stated which people could rely on family or friends and who would need to have a carer visit to support and care for them. Many people could be reached on foot by staff who lived locally.

An innovative scheme for sharing information in the event of an emergency with healthcare practitioners was in use in the area. People held information relating to their health conditions, their prescribed medicines and if any pets were dependent upon them in their homes. This information was kept in sealed pots held in their refrigerators. This was deemed to be an easy place for people to find information in an emergency in every home. The refrigerator door and the inside of their front door displayed green cross stickers to alert emergency services to seek out this information. One pot we saw held the results of a recent electro cardiogram (ECG) carried out by the ambulance service during a visit to the house. The system enabled important information to be shared between services in an emergency when the person may not be in a position to explain themselves.

Staff were aware of the reporting process for any accidents or incidents that occurred. The registered manager told us that there had been no accidents or incidents reported to them in the last year.

There were sufficient numbers of staff available to meet people's needs. Staffing levels were determined by

the number of people using the service and their needs. At the time of the inspection the service had no staff vacancies. Staff told us that, as the service was small and only covered a relatively small area, any short notice absences were covered by staff, with management support. The registered manager informed us that the agency had not had any missed visits. People confirmed they were contacted if staff had been unavoidably held up and that their visit would be a little delayed or if another carer was coming in place of their regular carer.

The service produced a staff roster each week to record details of the times people required their visits and what staff were allocated to go to each visit. The roster showed some travel time between visits. Staff told us travel time was not always needed but was used to provide additional care and support for people, such as having a chat or going for a walk. Greenhurst Care covered Bognor Regis and the surrounding villages. This meant visits were relatively close together. If staff found they were running late for any reason they would contact the office and this information would be passed to the person waiting for them. People and their relatives told us they were always telephoned to be advised if staff were going to be unavoidably delayed and if a replacement care worker was going to be arranged for them. We saw this taking place at the time of this inspection when a member of staff had to stop their visit run due to their child being unwell.

People told us they had a consistent team of regular carers and their visits were mostly at the agreed times. One relative confirmed they had a team of carers who knew their family member and the relative well.

A member of the management team was on call outside of office hours and carried details of the roster, telephone numbers of people using the service and staff with them. This meant they could answer any queries if people phoned to check details of their visits or if duties need to be re-arranged due to staff sickness. People had telephone numbers for the service in their care file, so they could ring at any time should they have a query.

Recruitment systems were robust and new employees underwent the relevant pre-employment checks before starting work. This included Disclosure and Barring System (DBS) checks and the provision of two references.

Care records detailed whether people needed assistance with their medicines or the arrangements for them, or a family member, to take responsibility for any medicines they were prescribed. Staff were only required to prompt some people to take their medicines, others required them to be administered to them from blister packs wherever possible. The service had a medicine policy which gave staff clear instructions about how to assist people who needed help with their medicines. Staff were required to keep some people's medicines securely so that they were not inadvertently taken at the wrong times. Staff locked these medicines away and the key was held at the person's home in a location known to staff. Daily records completed by staff detailed what assistance had been given with people's medicines. These records were returned to the office for checking and auditing regularly. All staff had received training in the administration of medicines.

Staff were provided with appropriate personal protective equipment (PPE) such as aprons and gloves. During our visits to people's homes we saw staff used this appropriately. This helped ensure people were protected from the risks associated with transfer of infection. Some staff prepared meals for people in their own homes. All staff had received appropriate training in food hygiene.

The registered manager was very committed to continuous improvement and feedback from people, whether positive or negative, was used as an opportunity for improvement. The service learned from feedback and made changes to address any issues raised. The managers monitored the quality of the

service provided by regularly speaking with people to ensure they were happy with the service they received.

Is the service effective?

Our findings

People received care from staff who knew them well, and had the knowledge and skills to meet their needs. People and their relatives spoke well of staff and told us, "I am confident that the carers are well trained and well supported by management who also visit my relative's home frequently," "Staff appear well trained and informed and communicate what they are doing in a caring manner," "Staff are very well trained, especially in skills regarding safety, hygiene, looking after dementia clients" and "All staff have good communication skills."

Staff completed an induction when they commenced employment. The service had an induction programme in line with the Care Certificate framework. New employees were required to complete training identified as necessary for the service, and familiarisation with the organisation's policies and procedures. There was also a period of working alongside more experienced staff until such a time as the worker felt confident to work alone. The registered manager told us that all staff would undertake the Care Certificate to ensure all the staff had the same level of knowledge and skills.

There was a programme to make sure staff received relevant mandatory training such as moving and handling, medicines management and infection control. Refresher training was kept up to date as the registered manager monitored staff training requirements. Training was mostly provided in face to face sessions, this was sourced from appropriate healthcare professionals. Additional training was provided for staff to meet specific needs of people using the service, such as dementia care and end of life care. Staff told us they felt they had the necessary knowledge and skills to meet people's needs. Staff had received training in equality and diversity and this helped ensure people were protected from discrimination.

Some people who used the service made their own healthcare appointments and their health needs were co-ordinated by themselves or their relatives. However, staff were available to support people to access healthcare appointments if needed. The staff liaised with health and social care professionals involved in people's care if their health or support needs changed. The service had a close working relationship with the local district nurses and GP's with whom they had a good reputation for reporting any concerns in a timely manner. The service referred regularly to the district nursing team for any support and equipment needs.

Staff supported some people at mealtimes to have food and drink of their choice. For most people food had been prepared in advance and staff re-heated meals and made simple snacks as requested. People told us, "They (staff) know what I like, they bring me anything I want" and "We go out for a coffee or a hot chocolate depending on how I feel." Where people were identified as being at risk of losing weight due to not eating and drinking enough care workers recorded and monitored their food and fluid intake. Care staff confirmed that before they left their visits they ensured people were comfortable and had access to food and drink.

The management team provided staff with regular supervision and annual appraisals. The registered manager monitored this support and recorded when the next session would be due for individual staff members. This meant that staff had the opportunity to discuss their performance and identify any further training they required. Staff felt supported by the management team. They commented, "They

(management) are always on the end of the phone" and "They (management) are very approachable and will always respond quickly you can bank on it." Staff received regular memos to pass on information via text messaging and telephone calls to provide them with the necessary information for any short notice changes that took place. Staff meetings were held regularly and these were minuted. Staff felt involved in the day to day running of the service.

Staff asked people for their consent before delivering care or treatment and they respected people's choice to refuse care and support. People confirmed staff asked for their agreement before they provided any care or support and respected their wishes to sometimes decline certain care or specific carers. People told us any issues were effectively dealt with in a timely manner by the management team.

The management team had an understanding of the Mental Capacity Act 2005 (MCA) and how to make sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected. 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. We checked whether the service was working within the principles of the MCA. Mental capacity training was included in the training programme that all staff were required to participate in. Staff were clear on this legislation.

Staff applied the principles of the MCA when they provided care and support for people. Care records showed that people, where able, had signed to give their consent to their own care plans. The service had records of the people who had appointed any lasting powers of attorney (LPA) to act on their behalf when they were not able to make specific decisions for themselves. We saw people's LPA's had been asked to consent on behalf of some people to their care plans.

Care records clearly set out for staff where people were able to make simple choices and decisions for themselves. For example, what food they would like to eat and what clothes they wished to wear. Where people were unable to make other specific decisions for themselves the service worked closely with LPA's, family and other professionals, involved in the person's support, to make decisions in the person's best interests. The MCA policy held by the service was in the process of being reviewed to include information for staff regarding the application to the Court of Protection for any restrictions in place on people in their own homes. The registered manager sent us the updated policy following the inspection visit.

Is the service caring?

Our findings

People received care, as much as possible, from the same care worker or team of care workers. People and their relatives told us they were extremely happy with the staff and got on well with them.

There was a strong emphasis on the key principles of care such as compassion, respect and dignity. People who used the service felt they were treated with kindness and said their privacy and dignity was always respected. Everyone, without exception, told us they were treated with kindness. People had developed close relationships with their carers over time. Relatives told us, "Greenhurst carers have become close to my relative and have developed a warm relationship with her. It is a great comfort to know how well she is being cared for at all times," "We were so grateful for them calling the ambulance it was absolutely the right thing to do" and "Amazed at their kindness when they organised the medicine collection."

Staff treated people respectfully and asked them how they wanted their care and support to be provided. People told us they did not feel rushed. Staff were caring and had a good knowledge and understanding of all the people they supported. Staff had regular visits to the same people, which helped staff to get to know them and their needs well. Staff spoke with passion and enthusiasm about their work. They told us, "I love my job we really provide a good service" and "I am very happy, if they (Greenhurst Care) were not a really good service I would not carry on working for them."

Staff respected people's wishes and provided care and support in line with those wishes. People told us staff always checked if they needed any other help before they left. For people who had limited ability to move around their home staff ensured they had everything they needed within reach before they left. For example, drinks and snacks, telephones and alarms to call for assistance in an emergency.

Some people who used the service had a relative who was their unpaid carer. We found staff were respectful of the relative's role as the main carer. Relatives told us that staff always asked how they were coping and supported them with practical and emotional support where they could. The service recognised that supporting the unpaid carer was vital in helping people to continue to be cared for in their own home. Relatives comments included, "They (staff) are absolutely amazing, they have changed my life, as I am a daughter of a person who needs care. They are kind and compassionate," "We changed to Greenhurst Care because we were unhappy with the poor care we were receiving from another agency and are extremely happy that we did. What a contrast the staff are professional, knowledgeable and efficient in a friendly helpful way" and "They (staff) have endless patience and are very thoughtful."

People were supported to express their views and to be involved in making decisions about their care and support. The registered manager had regular contact with people both in person and by telephone where they discussed their care. Everyone that we spoke with referred to the registered manager by name and confirmed that they or the deputy manager maintained regular contact with them and involved them in decisions about their care.

Is the service responsive?

Our findings

At the last inspection we found Greenhurst Care was providing an Outstanding service in this area. At this inspection we found the service continued to provide an outstanding responsive service

Everyone we spoke with was exceptionally positive about the service provided by the staff from Greenhurst Care. People's feedback received about the service told us they were 'satisfied with their punctuality, smart uniform and courtesy'. Many people told us that staff were always offering, and often providing, thoughtful extra support. One person told us, "My gate latch was stuck with rust due to the rain and I could not open it to get out. The wonderful carer came and we oiled it together and it opened in no time. They did not have to do that they are so helpful." A relative told us, "There was a blocked drain which caused a flood into the house. Fortunately a Greenhurst carer was at the house and immediately raised the alarm. The situation was handled calmly and efficiently. We realised that (person's name) could not stay at home so Greenhurst helped and guided me with finding respite care." This demonstrated staff worked to meet people's needs in all aspects of their lives. Staff were very proactive in their approach to care and support.

When people's care was being planned when they first started using the service, the registered manager spent a lot of time with them finding out how they wanted their care to be delivered, including identifying people's preferences and dislikes. The registered manager also discussed how the service could meet their wishes and expectations. From these assessments care plans were developed including details of their care and support needs. The registered manager ensured people were aware of how to contact them to change anything at all at any time.

Care plans were constantly changing to meet people's needs. We reviewed one care plan of a person who had begun receiving a service a few weeks before this inspection visit. The office copy of the care plan had been changed twice over the weeks to suit the person and their family. The staff were very flexible in their approach, providing support and care when the family were not able to do this. This meant visit times often changed to meet the family's needs. Staff were kept fully informed about the changes in visits and the support people required either in person or via text or email.

When visiting the agency office we saw staff come in to the office to raise their concerns about one person with the provider. As a result arrangements were made for a GP to visit the person to review their skin condition. We visited this person later that day in their own home and met with the GP who was visiting. An urgent appointment was made for the person to be seen at the local hospital. This demonstrated how staff, who were familiar with a person, noticed changes and reported these in a timely manner so that the person could receive appropriate medical assistance.

People and their families told us the carers were very flexible and responsive to changes in people's needs. Relative's told us, "I have nothing but praise, they do pretty much everything for (person's name) put the rubbish out, laundry, shopping, even date the food in the fridge so we know when things need to go," "Time keeping is excellent, as is the communication between everyone involved in the care needs of my relative. We always discuss any changes to their condition and daily routine and I feel able to ask for advice, as

without exception, the Greenhurst carers show experience and expertise in caring for the elderly" and "They (management) have been very accommodating when we have asked, in advance, for care outside of usual planned visits."

The service had an administrator who supported the day to day running of the service. During this inspection visit a carer had to leave her visits half way through the morning due to illness. This was dealt with efficiently and effectively by the administrator. The remaining visits were covered by other carers, with the registered manager also going out to provide visits to some people. The recording system detailed what change was required, action taken, completion date and by whom. Each person who was due to receive a visit from the carer received a telephone call to advise them of the proposed change of carer and asked if this was acceptable to them.

The registered manager contacted people after a few weeks of starting to receive a service to check on their experiences of the care provided and check that it was meeting their needs. This contact was either made face to face or by telephone and was recorded on a review sheet in their care file. It was clear that people were very much at the centre of their own care package and had complete control over it.

Care plans clearly recorded details of each person's specific care and support needs including the times and days of their visits and their choices and wishes. The service had ensured that they were aware of the person's end of life wishes. This was clearly recorded in their care files. Care files provided staff with clear guidance and direction about how to provide care and support that met people's needs. Care plans were regularly reviewed to help ensure they continued to meet the person's needs and wishes. Greenhurst Care prided itself in providing excellent end of life care to people in their own homes, supported by the district nurses and GP's. A relative told us, "Greenhurst Care were involved in caring for my husband during the last weeks of his life. Without exception his carers showed compassion and sensitivity to his situation. Greenhurst became part of our family during this stressful period and were a great support to me too." We saw a thank you card that read, "Your wealth of experience and knowledge has helped us through this difficult and strange time. I will always be grateful for having you at my side."

People confirmed they received a service that was based on their personal needs and wishes. One family told us, "The manager acts promptly on feedback from her carers if they have any concerns at all, sometimes resulting in calling out a doctor, or contacting us to help us resolve other issues particularly regarding safety for mum. Sometimes we have called out an occupational therapist on their advice, or arranged for mobility aids."

Everyone we spoke with was exceptionally complimentary about the care and support they received from the care staff at Greenhurst Care. They told us, "I am very satisfied and happy with the quality of care my relative receives from their Greenhurst carers," "We feel we are very lucky in having such lovely, reliable, empathetic people looking after mum. We feel she is in good hands," "They are always prompt, and on several occasions have stayed late. We have not been let down. They are very intuitive and get on with whatever is needed straight away" and "Greenhurst has managed to accommodate our needs with ease, for which we are most grateful having experienced a low standard of care from some other agencies."

One healthcare professional told us, "Greenhurst provide such good care, the best I have ever experienced and I have experienced other agencies. They are so person centred, I would love them to care for me when I need care."

A relative told us, "Staff are very supportive of me too, as I work full time and am the carer for (person's name). They (staff) take the time to support (person's name) to their out-patient appointments. They (staff)

even stayed with her over and above their time when they were unwell and initiated the GP to visit."

Daily care records, kept in the folders in people's homes, were completed by staff at the end of each care visit. These recorded details of the care provided, food and drinks the person had consumed as well as information about any observed changes to the person's care needs. The records also included details of any observed changes to people's care and support needs. Daily care records were collected regularly from people's homes and returned to the office for checking and archiving. This meant the registered manager was able to ensure people were receiving the agreed care.

Care workers were knowledgeable about the people they supported and provided consistent care. They were aware of their time preferences for visits and interests, as well as their health and support needs, which enabled them to provide a personalised and responsive service. Staff told us they nearly always had the same people on their visit list each week.

Staff told us they always tried to visit at the agreed time but sometimes the previous visit overran or traffic delayed them. When this happened they contacted the office so that the person could be advised. People could not recall when any recent visits had been missed. People, relatives and healthcare professionals told us, "Staff arrive at agreed times, leave at agreed times, perform their duties in a proficient and friendly manner, tidy as they go and always ask if there is anything else they can do before leaving. What a refreshing change," "I don't know what I would do without them, they are part of the family" and "Staff act as advocates for (person's name) as they cannot communicate easily. They monitor people closely. I cannot fault them." Where the people who received a service could not easily communicate themselves either on the phone or by post the staff worked very closely and effectively with nominated family members who were clearly recorded in the person's records.

The agency was located in the village where most of the people who received a service also lived. The agency only employed staff who lived locally. The service was well known in the area and had built up a very good reputation for providing excellent care and support to people. It did not advertise, with all people who received a service having made contact after hearing about its reputation through word of mouth. It also received a high number of referrals from a local GP practice and community matron as a result of working in collaboration with them to meet people's changing and individual needs. All the staff we spoke with had knowledge of the local area and were able to explain how this helped them meet people's needs when taking them out for trips. Their knowledge of the area also meant they were able to assist and advise people how to access equipment and specialist support where needed. During the inspection we heard the registered manager on the phone to another organisation, discussing the possibility of one person, who they were supporting, attending their local day centre to enjoy some sociable company with others. It was clear both organisations knew each other well and were jointly working to provide the right care in the right place at the right time for this person.

People were encouraged to maintain their independence and carry out their own personal care where possible. Staff took a supportive role of 'doing with' rather than 'doing for'. Some people only required prompting to carry out certain tasks. One care plan stated, "Prepares their own meals but enjoys a coffee and a chat." Staff had time to sit and enjoy a coffee with people.

The registered manager was motivated and clearly passionate about making a difference to people's lives. This enthusiasm was also seen in the care staff we spoke with. People's care was planned proactively in partnership with them and their families where appropriate. One relative told us, "They are outstanding, they have dealt with some very tricky family dynamics very well. Their attention to detail is amazing. Always contacting me with information to update me with any issue."

Staff told us, "We provide a really person centred service to people, we are flexible and can adapt to what people need. One person has needed increasing amounts of different types of support from us to help keep them safe. We work with them and their relatives. To start with we were only supporting them at home and now we also go out every day with them for a walk, coffee and cake or ice cream. We go wherever they want to go, it is bringing back their memories of where they used to live, we go there together. This week (person's name) came up with an address of a house locally, out of the blue, they just said the address, so I said do you want to go there, it was where they remembered living, so we are going tomorrow!" and "I love it, no two days are the same."

Two people we spoke with told us that the registered manager, who lived near to them, had told them they could call them at any time and they would help them. Care staff told us how they would stay over the planned visit time if someone was unwell or awaiting an ambulance, or pick up shopping for people outside of their care planned visits. This demonstrated the commitment staff and management had for helping people to have a better quality of life.

Details of how to make a complaint were included in care files in people's homes. People knew how to make a formal complaint if they needed to but told us issues would usually be resolved informally. People felt able to make requests and express their opinions and views when the registered manager contacted them regularly to check on how they were and if they had any concerns. This regular contact, helped forge a relationship with the person and build their confidence in the service. Greenhurst Care had not received any formal complaints. The registered manager felt this was due to the regular contact and relationship held between the service and the person and that any issues would be addressed early and not become a complaint.

The service had received compliments from people and their families for kind care and support that had been provided. Feedback received included, "Professional, knowledgeable and efficient with a friendly manner," "I don't know where to begin to thank you for all your support," and "Greenhurst has also managed to accommodate our needs with ease for which we are most grateful." One healthcare professional responded, "It has been a pleasure working with you. I will recommend your excellent service to others."

Is the service well-led?

Our findings

At the last inspection we found Greenhurst Care was Outstanding in this area. At this inspection we found the service continued to provide an Outstanding well led service.

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 also the owner of the service and the registered provider.

There was a clear vision and set of values at the heart of the service provided by Greenhurst Care. This meant that people receiving a service were the main focus and central to how their care and support was provided. These values were clearly held by all the staff and underpinned their practice. Management and staff ensured people were the main focus and central to the planning, assessment and delivery of care. The aims and objectives, which were included in the agency brochure, statement of purpose and staff handbook were discussed with people when they started to receive a service and with care workers when they were employed.

The registered manager was an excellent role model who was enthusiastically committed to the continuous improvement and development of the service. Feedback from people, whether positive or negative, was used as an opportunity for improvement. There was a positive culture at Greenhurst Care. Without exception people using the service, families and healthcare professionals all spoke very highly of the registered manager and the service provided by the care staff. We received outstanding feedback from people, their relatives and healthcare professionals who were very pleased with the management of the service. People told us, "The owner has a warm genuine manner and assures us that if we have any concerns or queries not to hesitate to contact them, very reassuring," "Very well managed. You can see management's influence in all aspects from office management to staff selection and training" and "They (staff) instill confidence and they are always in fresh uniforms. The manager insists upon this she has very high standards."

Families told us, "The management of this company is excellent and quickly responds to queries and contact is made via email or phone," "I feel fortunate I have Greenhurst Care to turn to," "The service is very well managed with communication from the office personnel by phone and email, we both feel very lucky to have found such a caring and responsive agency" and "They (management) issue the rota in good time and we are delighted that we have a small number of carers giving us continuity."

There was a clear management structure in the service which provided clear lines of responsibility and accountability. The registered manager/ provider had overall responsibility for the day to day running of the service. They worked full-time in the service's office, working closely with the deputy manager in the day to day managing of the service. The management team were passionate about providing good care and support. The service worked in partnership with other organisations in the area. The registered manager regularly met with the local authority to build strong relationships, they also ensured they were up to date

with all best practice and guidance by regularly meeting with other agencies and providers in the area.

Staff meetings were held at times to suit all staff, taking their family and personal commitments in to consideration. This demonstrated the registered manager recognised the importance of keeping staff informed of any developments. Staff were rewarded by the registered manager for their hard work and commitment to delivering an outstanding service. There were plans being made, at the time of this inspection visit, for the Christmas party with the registered manager arranging to take over the visits from staff on the day, to allow them to have time to get ready for the evening event. Staff birthdays were always remembered and celebrated with flowers and chocolates. Cash bonuses were paid to staff at the end of each year to thank them for their loyalty to the service. This meant the staff team were appreciated and valued.

Staff were very highly motivated and proud of the service. They told us there was very good communication with the management of the service. Comments included, "There is always someone at the end of the phone if you ever need anything," "We do everything we can to make people's lives better, we are good at it." and "We are a very small company and we all know that we have each others backs always."

The registered manager provided care regularly out in the local area, this meant they were aware of the needs of each person and could monitor the service provided. The service had effective systems to manage staff rosters and identify what capacity they had to take on new care packages. This meant that the service only took on new work if they knew there were the right staff available to meet people's needs. The service had good links with the local community. This led to effective support provided to people in a timely manner. For example, healthcare professional advice and equipment was sought out when necessary.

Healthcare professionals were extremely positive about the service provided by Greenhurst Care. They told us, "They (staff) mould their service to the client," "When I have referred a person to them they made a prompt initial visit and assessment to a client" and "The owner is very hands on, I have a lot of faith and trust in her."

The management team and all the staff demonstrated a good understanding of the importance of effective quality assurance systems. People were visited in their homes regularly to check on their experiences of the service provided to them. A survey completed by people and their families was very positive about the care and support provided. The registered manager demonstrated strong values and a desire to learn about and implement best practice throughout the service.

The managers monitored the quality of the service provided by regularly speaking with people to ensure they were happy with the service they received. People and their families told us the management team were very approachable and they were included in decisions about any changes to the service they received. People confirmed someone from the office rang and visited them regularly to ask about their views of the service and review their care plan. The management team were quick to respond to any issues that arose. People told us they saw both the registered manager/provider and the deputy manager regularly.

The registered manager was very proud of the service they provided and told us, "We are able to do it really well because we keep small and local. We don't want to get any bigger as I feel we would not be able to maintain the high quality we currently provide." The service had a mission statement, it said, "We aim to provide an exceptional, high quality level of care service to enable individuals to maintain and independent dignified lifestyle in the comfort of their own homes." Many compliments were received from grateful and happy people and their families thanking the service for their kind care and support. Comments included, "We are so happy to have found you," "I don't know where to begin to thank you for all your support and

wise advice throughout the period of (person's name) illness."