

Nurse Plus and Carer Plus (UK) Limited

Nurseplus UK

Inspection report

Suite 1-2, Lowena House, Glenthorne Court
Truro Business Park,
Truro
TR4 9NY

Tel: 01872276444

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Outstanding 

Is the service responsive?

Good 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service

Nurseplus UK is an agency that provides personal care to people living in their own homes. At the time of this inspection six people were receiving a service and were in receipt of the regulated activity of personal care.

Nurseplus did not provide short visits. The packages of care provided at the time of this inspection included visits of several hours at a time, and one live-in care package.

CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People told us they felt safe with staff. There were systems to help protect people from abuse and to investigate any allegations, incidents or accidents.

People were protected from potential abuse and avoidable harm by staff that had regular safeguarding training and knew about the different types of abuse.

Risks were identified, assessed and recorded. Care plans were completed for each person and contained details of the person's needs and preferences. These assessments included any risks from the environment and included any emergency action needed in the event of a water leak or fire in the person's home. Risks to staff working alone late at night had been identified.

Staff did not just focus on meeting people's assessed personal care needs. We were told repeatedly how staff went above and beyond their roles as carers to ensure people were well supported in all areas of their lives. Staff took pets to the vet, ordered heating oil when necessary and helped arrange contractors to do necessary work in people's home.

People received outstandingly consistent support from their carers from Nurseplus, which continued throughout the COVID-19 pandemic. Many staff had been supporting the same person for many years.

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

There were sufficient staff to support people. Recruitment procedures were robust. Regular auditing took place of all records at the service by the area manager.

People's care and support needs were assessed before they started using the service. People were matched with specific care staff and people and their families were involved in the recruitment of their staff.

People received support to maintain good health and were supported to maintain a balanced diet where this was part of their plan of care. The service supported some people, who lived alone, with their food shopping and meal preparation. There was a strong emphasis on the importance of eating and drinking well. Positive staff relationships were used to encourage those who were reluctant or had difficulty in eating and drinking.

The service had innovative and creative ways of training and developing staff that helps them put their learning into practice delivering outstanding care that met people's individual needs.

The staff recognised that there was some wasted food each week which was surplus to the person's needs. So, the service designed a training package for all staff, to help reduce food wastage and focus on producing a wider variety of healthy well-balanced meals, saving people money and increasing their choice of meals.

People were supported and received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant qualifications to meet their needs. Nurseplus had a robust system to monitor all staff training requirements and offered refresher training to keep them up to date with best practice. Training had been provided face to face in the training suite and competency assessments were regularly carried out throughout the COVID-19 pandemic.

The registered manager had continued to support all staff in people's homes throughout the COVID-19 pandemic, by visiting and talking with staff and people to ensure the best service was being provided. The registered manager had recognised the staff were isolated during their shifts in people's homes and was keen to ensure they saw them face to face regularly to provide support.

Staff told us, "Working throughout the pandemic saved me, it was a life-line. My client needed me to be there and I needed to be there. It was a strange time but we got such fantastic support from Nurseplus management. We all needed each other. I cannot fault them in any way. They are amazing" and "The management come out regularly and do spot checks on us, and we have very regular medication training updates. It is surprising how quickly each update comes around again!"

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

Staff understood the importance of respecting people's diverse needs and promoting independence. Mental capacity assessments had taken place where necessary.

The registered manager was very keen to ensure the service was as responsive to the needs of the people they supported as they could possibly be. The service was outstandingly flexible in supporting people's needs. Staff told us, "We can be super flexible and if a person wants to change a time or a day of their visit, it is done."

People told us, "Outstanding, all parts of the organisation are outstanding as far as I can see. All phone calls, and emails are replied to promptly and the finance department is very efficient at sorting stuff out," "It appears to be outstanding, even when they had COVID-19 they were able to provide the same service" and "The office always get back, I've never had to chase them. Their communication is very, very good."

Relatives comments included "The staff at the office are outstanding. If I email a medication change, it's changed immediately. The communication is also outstanding" and "I usually ring if I want extra cover or to

change. If the person who deals with it is not there, they call back quite soon. They accommodate me whenever they can. They really do try."

There were robust auditing or monitoring processes in place. The service had implemented effective quality assurance systems to monitor the quality and safety of the care provided. Spot checks were carried out to monitor staff performance. The service was regularly audited by the quality assurance advisor and was scoring 'green' at the time of this inspection, which meant there were no concerns.

The registered manager recognised a member of the care staff each month for an award. This was seen as motivational and recognition of staff showing commitment to good care. Staff received chocolates, flowers and a certificate to evidence their good work. Annually a member of staff was recognised to going above and beyond the call of duty and similarly rewarded.

Everyone we spoke with about Nurseplus UK told us they thought they provided an outstandingly consistent effective service. We were told staff were friendly, they were treated with kindness and compassion and their privacy and dignity was respected.

Comments included, "I only have one person and she comes at the same time, stays the right amount of time. I've never had anyone else; it's always been the same one I'm pleased to say," "It's been really consistent since we started," "They work really hard to provide a regular team" and "Mum's care is outstanding, and her clothes are all clean and the flat is clean, it's outstanding" and "The current carer is outstanding and very experienced; she has picked up on lots of bits and pieces and acted upon them."

The service worked in partnership with other organisations to make sure they were following current practice and providing a high quality service. The service had sustained their outstanding practice since the last inspection as their previous location.

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection:

We registered this service on 20 January 2021 and this was the first inspection for this service at a new location.

The last rating for the service at the previous premises was outstanding published on 4 April 2019.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe
Details are in our safe findings below

Is the service effective?

Outstanding ☆

The service was exceptionally effective
Details are in our effective findings below

Is the service caring?

Outstanding ☆

The service is caring
Details are in our caring findings below

Is the service responsive?

Good ●

The service was responsive
Details are in our responsive findings below

Is the service well-led?

Outstanding ☆

The service was exceptionally well-led
Details are in our well-led findings below

Nurseplus UK

Detailed findings

Background to this inspection

The inspection

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

Inspection team

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

Service and service type

This service is a home care agency. It provides personal care to people living in their own houses and flats.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service three working days' notice of the inspection. This was because we needed to be sure that staff would be available at the office to support the inspection.

What we did before the inspection

Before the inspection, we reviewed information we held about the service and the provider which included any statutory notifications sent to the CQC. A notification is information about important events which the service is required to send us by law. We used the information the provider sent us in the provider information return. This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We used all of this information to plan our inspection.

During the inspection

Inspection activity started on 29 April 2022 and ended on 5 May 2022. We visited the location's office/service location on 4 May 2022.

During the inspection we reviewed two people's care plans and risk assessments. We looked at two staff files in relation to recruitment. We reviewed staff training and supervision. We also reviewed other records relating to the management of the service, including compliments received. We met with the registered manager, the senior recruitment manager, the home care manager and the training manager.

We spoke on the phone with one person and three relatives of people who were receiving personal care and support about their experience of the care provided. We spoke with seven staff on the telephone and two healthcare professionals.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service at a new location. This key question has been rated good

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There were safeguarding processes in place and the service had made appropriate referrals to the local authority where required.
- Everyone we spoke with told us they felt safe with the staff that supported them.
- Staff knew how to recognise abuse and protect people from it. Staff had received training in how to keep people safe. A questionnaire was used to check staff understanding when spot checks were carried out by the management team.

Assessing risk, safety monitoring and management

- Risks associated with people's care needs were identified, assessed and recorded. This provided staff with the information needed to support people safely. Guidance on specific conditions such as Parkinson's disease or diabetes were also present in some care plans to inform staff.
- Extensive risk assessments of people's environments had been recorded, including any emergency action which may be needed in the event of a water leak, fire or the need for an evacuation. Staff often worked alone late at night or through the night. Risks associated with lone working had been identified and assessed.
- Experienced staff had a good knowledge of the people they supported. They were aware of risks associated with people's care, how to monitor them and what action to take to reduce risks whilst promoting people's independence. For example, one person was anxious about their valuable items and finances, so staff supported them to purchase a safe and arrange its installation. This reduced the person's anxiety.
- Some people required specific equipment to be used by staff to support them. The service held the dates of when each piece of equipment had been serviced, and when the next service was due.
- The service had an emergency plan in place to manage weather emergencies such as snow. The service had the use of two 4 x 4 vehicles should very bad weather occur. An emergency list showed which people required visits from the service as they had no family or neighbours to support them. Staff would walk to these people if no vehicle was available.
- Sometimes staff had difficulties with their own vehicles and were unable to travel to visit people. The service had a pool car which was provided to staff to use to make visits when their own care was unavailable. This helped ensure visits were made to people in such circumstances.

Staffing and recruitment

- New staff were matched specifically with each person receiving a service from Nurseplus. People were able to 'interview' new staff to help ensure they would work well together.
- Recruitment practices were robust. Staff files showed the relevant checks had been completed including Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The service had sufficient numbers of staff to meet people's current needs.

Using medicines safely

- Staff had received training in medicines administration. Staff told us their competencies were regularly checked. Staff comments included, "The management come out regularly and do spot checks on us, and we have very regular medication training updates. It is surprising how quickly each update comes around again!"
- People were supported to take their medicines when and as they were prescribed. One person was prescribed time specific medicines and staff ensured these were always given on time.
- Relatives confirmed, "(Persons' name) has a lot of medication; they are in blister packs. The carer ensures they are taken at the right time. Again, it's been outstanding and no issues at all."
- Paper medicine administration records (MAR) were completed by staff where necessary. These records were checked by management. There were regular audits in place to effectively monitor these records.

Preventing and controlling infection

- People were protected from the risk of infection and cross contamination including COVID-19. People told us staff always wore personal protective equipment (PPE) when they delivered care to them.
- The service had an ample supply of PPE. Staff had received training in the safe use of PPE. People told us staff practice reflected current guidance.
- Staff had received training in infection control.

Learning lessons when things go wrong

- There were policies and procedures in place to ensure that accidents and incidents were recorded, actioned, and analysed to help reduce any re-occurrence. No accidents or incidents had been reported.
- The registered manager and home care co-ordinator met regularly with the people who used the service, to discuss any improvements that may be needed and ensure any concerns or issues were identified and addressed in a timely manner. People confirmed this.

Is the service effective?

Our findings

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

This is the first inspection for this newly registered service at a new location. This key question has been rated outstanding.

This meant people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive

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

- There was a strong emphasis on the importance of eating and drinking well. Positive staff relationships were used to encourage those who were reluctant or had difficulty eating, by offering them a range of different home cooked fresh meals to find out what they really enjoyed. The service supported some people, who lived alone, with their food shopping and meal preparation. The staff knew the people they supported very well and recognised that there was often wasted food each week which was surplus to the person's needs. Aware of the impact of the increase in the cost food, the service designed a training package for all staff to help reduce food wastage and focus on producing a wider range of healthy well-balanced meals. One member of staff told us, "One person, living with dementia, had lost interest in eating. We spent time learning what she really enjoyed. It was clear she did not like her ready meals, there was a lot of waste, so we stopped them and began offering her a range of home cooked food which we found she loved. She is now eating well and has gained weight." This meant people were having positive outcomes from being provided with food they enjoyed.
- This bespoke training package focused on food seasonality, meal planning, food preparation, freezing, storage and safety. It helped staff understand how to prepare a wider variety of healthy meals for people, plan meals in advance including batch cooking, understand stock rotation, freezing, labelling and monitoring food storage.
- The training had supported staff with new cooking skills and knowledge about how to meet people's varied dietary needs. For example, increasing or decreasing fats and proteins. This has had a positive impact for people as it had reduced their food wastage and saved them money. One person was having their intake monitored and recorded as they were not eating enough. The freezing of food had meant more choice was available to the person at any time. For example, a pack of four hot cross buns may not all be eaten before becoming stale, so by enjoying one or two and then individually wrapping, labelling and freezing the others allowed for them to be enjoyed at another time, and not wasted.
- People's preferences, likes, dislikes, and dietary requirements were clearly recorded in their care plan. Staff completed a chart detailing each food type/meal offered and indicated with a smiley face or a sad face, if the person enjoyed it or not, this helped staff to always provide them with food they liked. The person with low appetite now had more 'smiley' faces recorded on their chart as foods they liked were offered more often. This meant they were eating more than before. One member of staff told us; "I know (Person's name) really well. I know their likes and dislikes. I try to bring in new foods for them to try. It's nice to have new choices. I bring in my own lunch, and I bring in extra for them to share and try with me. It's a really nice social

event and we have a laugh" and "I make sure that having a drink or food is a social event, by just sitting down together for a chat and a drink, I am sure it encourages them to drink or eat more that way. It's just so nice."

- People and relatives comments included, "Its outstanding. Very healthy food based on my (Person's name) wishes. The carer brings their regional dishes to the table, which (Person's name) enjoys. They put the time and expertise to produce healthy nice meals," and "The carer cooks what (Person's name) will eat. They (carer) make fresh soups so they get the equivalent of a meal in liquid form. They (carer) provide food for her little and often."

- A frozen meal delivery service was visiting the offices of Nurseplus, as had taken place before, to provide tastings for the staff of the latest meals provided. This meant the staff were then aware of all the options and flavours available and could use this information to recommend the service to people who may benefit, and be tempted to eat, such meals.

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

- Relatives told us staff were extremely good at assessing people's needs. Comments included, 'When we introduced another piece of equipment, the carer wouldn't use it until it had been fully and properly assessed by the Occupational Therapist. That is quite impressive,' "When (Person's name) had their initial assessment, they were very in depth. Very detailed. The carers are very switched on, they report everything. Their paperwork is incredible; the carer keeps a very detailed log. If there are any highlights or issues the carer will speak to me directly" and "(Person's name) did need a hoist but the staff try to maintain their mobility as much as possible and not use it. Most of the time they are too active now to need the hoist."

- People's needs were assessed before the service began to ensure they could be met by the service. It was very important to the registered manager that people had the opportunity to meet and 'interview' the prospective staff who would be supporting them. One member of staff told us, "I did an online chat with my prospective client, before I arrived in the county, from where I was living. It was agreed that I get recruited. Then, on my first day I was taken by a member of management to the person's home and we just all chatted for about two hours. We got to know each other, then went through a period of two weeks with daily reviews, with both me and the client, with the care plan being updated as we learnt more about their needs."

- The assessment also considered people's protected characteristics as part of the Equalities Act 2010, including any disabilities. All staff had been provided with equality and diversity training as well as empathy training. The registered manager told us, "We have a diverse workforce and client group and it is very important we respect everyone's differences and beliefs. We had one person who would refused to have a male carer or anyone who was not English, so we changed the staff until they was happy with their carer."

- Records showed that regular reviews took place to ensure people using the service had their current needs recorded and were completely satisfied with the service they received.

Staff support, training, skills and experience

- Throughout the COVID-19 pandemic the registered manager provided a high level of support to staff and continued to visit them, during their shifts at people's homes, under the appropriate current guidance. This visit provided staff with regular face to face supervision and receive feedback from the person they supported. Staff told us, "This is really helpful as you hear how you are doing."

- Staff had also continued to receive regular face to face appraisals throughout the pandemic. The registered manager told us, "This was done once any family members present in the home had been consulted, to ensure they were happy for this to take place. We wore full PPE along with having undergone weekly PCR testing and daily LFT testing before any visit took place. We ensured we did not spend time with the person being supported, but focused on the face to face staff support. Verbal consultation with the person took place on the phone." One staff member told us, "Working throughout the pandemic saved me,

it was a life-line. My client needed me to be there and I needed to be there. It was a strange time, but we got such fantastic support from Nurseplus management. We all needed each other. I cannot fault them in any way. They are amazing."

- The service had innovative and creative ways of training and developing staff that helped them put their learning into practice delivering outstanding care that met people's individual needs such as the new bespoke food preparation training and empathy training, both of which were new to the service since the pandemic. It was recognised by the service that staff would benefit from this skill. Staff were often provided with one to one training as they needed specific knowledge to meet the needs of the person they were supporting. Staff had continued, throughout the pandemic, to complete training in a range of different subjects to ensure they had the right skills, knowledge and experience to deliver effective care. Staff received regular two-day update training sessions, face to face, in the spacious Nurseplus training suite. This location allowed for appropriate social distancing and enabled effective support to be provided to staff throughout the unprecedented challenges of the pandemic. One staff member said, "I am going to the office next week for my updates, our trainer is amazing. We get all our training face to face at the office every year, it's really good. I really like it, there is only so much you can learn on-line. They have all the equipment we may need to use with people, so we can really have a go safely and learn."
- The registered manager recognised that families and relatives may benefit from attending some of the training sessions run for staff, such as dementia support, moving and handling and Parkinson's disease care. So, all training was open for families to attend completely free of charge. This meant families could increase their knowledge and understanding and provide effective care for their loved ones.
- New staff received an induction which included training and a period of working alongside more experienced staff. New staff were specifically introduced to the person they were due to support, to ensure both parties were comfortable, before they started working with them alone.
- Staff supported people consistently. People told us they always had the same carer. Many staff had worked for the service for many years and remained supporting the same person throughout that time. One staff member told us, "We become part of the family. I know the person so well, I just know what they want and when. It makes the job very rewarding."
- Relatives confirmed this and told us, "I only have one person and she comes at the same time, stays the right amount of time. I've never had anyone else; it's always been the same one I'm pleased to say," "It's been really consistent since we started," "They work really hard to provide a regular team" and "Mum's care is outstanding, and her clothes are all clean and the flat is clean, it's outstanding" and "The current carer is outstanding and very experienced; she has picked up on lots of bits and pieces and acted upon them."

Staff working with other agencies to provide consistent, effective, timely care

- People and relatives were very positive about their regular staff. Comments included "It has been really consistent since we started. They (Nurseplus) work really hard to provide a regular team"
- The provider involved a range of external agencies in the care of people, such as community nurses, GP's and community psychiatric nurse's.
- Staff ensured people's health care needs were met and if they had any concerns regarding a person's health then this was communicated with the relevant professional. Healthcare professionals commented, "I have been really impressed with Nurseplus, we work extremely well together and they always come to me with any concerns. They communicate very well" and "The staff are all really helpful, the family I know are really pleased, they work well together and that is what you want."
- Relatives were assured the care staff that supported their family member were quick to identify changes in the person's health, report their concerns and request the required assistance. Comments included, "Even little things, like yesterday (Person's name) hadn't eaten much, they mentioned it to me. The detail we are getting from the carers is incredible."

Supporting people to live healthier lives, access healthcare services and support

- Nurseplus was always looking at ways to improve people's quality of life and levels of independence and activity. We were told one person recently stopped needing their support as they were now independent and no longer needed assistance. Nurseplus had recently provided some 'goody bags' to people in their homes. These bags included drinks, chocolates, notepads and packets of flower seeds. Some people who were receiving support had been very keen gardeners in the past and now needed support to continue to enjoy their garden. Staff helped them to plant the seeds, further fostering the relationship between the carer and the person, encouraging activity and improving people's quality of life.
- People's care needs, medicines, social care needs, preferences, likes, dislikes, and dietary requirements were all clearly recorded in their care plan.
- Experienced staff knew people's needs well and supported them to access healthcare. Staff commented, "I always go with (Person's name) to the dentist, they told me they could not possibly face it without me there with them. We provide so much companionship and comfort to our clients, it helps them greatly if we can support them when they need it. They trust us and that calms them. No one likes the dentist do they?."
- People and relatives were very positive about how staff supported people well and communicated with family. Comments included, "(Carer's name) is very efficient. Just her presence helps me. She is very calm" and "We've got a really good relationship with the health services; it feels very joined up"
- Staff monitored people closely if they were at risk of deterioration in their health or well-being and involved healthcare professionals where required. Staff monitored and recorded when all healthcare appointments were due to ensure none were overlooked.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- People were involved in decisions about their care and treatment and staff supported them to have maximum control of their lives. Some people, who were being supported at the time of this inspection, had capacity to make their own decisions, therefore no assessments had been indicated as necessary. However, where people needed assistance with some decisions this had been assessed and was clearly recorded.
- People told us staff consulted them and asked for their consent before providing care and support.
- Staff received training in the MCA. Records were kept showing where people had appointed Lasting Power of Attorney (LPA) and only if relatives held this legal power did they sign on behalf of their relative, when they were not able to consent or sign for themselves.

Is the service caring?

Our findings

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

This is the first inspection for this newly registered service at a new location. This key question has been rated outstanding.

This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- People and their relatives told us staff were very friendly, polite and respectful. People were treated with a great deal of kindness and compassion and their privacy and dignity were always promoted. One person told us, "It's just a very nice nursing feeling with her (carer)."
- Relatives told us, "(Person's name) is quite interested in religion, on Easter Sunday, they (carer) took them to a local church, that they really enjoyed. They are pro-active in doing things (Person's name) might enjoy," "They will just sit and hold their hand, sometimes it's the only thing which will calm them. They always tell them what they're doing, they are incredibly kind" and "Occasionally they (Carer) bring them things. The most significant thing is they take the time and trouble to sit with (Person's name). They have coffee with them and chat with them without being told to. Its naturally caring."
- Experienced staff knew people well and had established extremely positive and caring relationships with the people they supported which helped them to deliver good, person-centred care that met people's needs. For example, one person loved their garden but were unable to do the necessary gardening themselves. So, staff did weeding in the garden, whilst the person sat nearby and chatted with them. The person was supported to employ a gardener who now keeps the garden the way the person wishes. Staff also helped the person choose and purchase some garden furniture so that they could sit out comfortably. Staff then put the furniture together for the person so that they could use it right away.
- One staff member told us, "Me and my client are really very close. Well, you get like that when you spend all day, most days, together for a long time. I go with them everywhere they need to go, doctors, hospital, I even go to the vets. I took their dog to the vets often, including at the end of its life, and I worm the cat, it's what we do. We have become good friends, and we all need those don't we?"
- Nurseplus recognised the isolation of people and their families during the Covid-19 lockdowns. A member of the office staff knitted pairs of little matching padded hearts which were offered to people, to keep hold of one and give the other to their family, as a way of reminding them of each other and 'holding them safe.' A relative told us, "One of the carers bought these little hearts to Mum in the early lockdown. My Mum had one and the other was given to me. It was particularly poignant for us both, as Dad had just died and Mum was missing him, as was I. It was very much appreciated."
- Staff knew people well and commented, "I make sure that (Person's name) has everything ready for her on the days I don't visit. They have a clear routine, each day the same things take place at the same time, I know this and so I can ensure everything is where it should be at the right time" and "(Person's name) loves their garden, it is important to them that it looks nice. So, I do some weeding while we sit together in the

garden when it is nice weather. The garden is looking really amazing at the moment. We don't just sit indoors together. I can pick up when (Person's name) wants some space and to rest, so I take a back seat and let them do what they need. I know them so well."

- Staff respected people's equality and diversity. Comments from staff included, "I like to give (Person's name) a lovely foot soak and massage their legs and feel. (Person's name) loves it, it really relaxes them. It's just a nice thing to do isn't it?" and "I love the time we spend together. We arranged for some garden furniture to be delivered for one person and we set it all up in the garden for them. It looks great."

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

- People were supported to express their views and be actively involved in making decisions about their care and support. Staff told us, "Management visit us regularly while we are at people's homes, they observe us, then they speak with the client. We get feedback that way it's really good."
- As the support Nurseplus provided was often for visits of up to 12 hours at a time, it was very important to the service that people got along well with their staff. The registered manager told us of one instance where they were unable to find staff who were the 'right match' for a person and so the package of care was not taken on. One relative told us, 'We had a very in-depth assessment of my mum and her needs, to match the carer to my mum. We had input into it, to see if they matched.'
- The staff went above and beyond their roles as carers to support people. Staff went further than just providing for people's assessed personal care needs. Staff would regularly check people's oil tanks and work out what needed to be ordered. The office then rang around oil suppliers to find the best oil price. This information was given to the carer who then sat with the person, who was unable to manage this type of telephone call alone, and ordered the oil and arrange the payment. One person required some carpentry work to be carried out. Staff supported the person to arrange for a carpenter to come and do the work. Another person loved their garden and found it frustrating when unable to do the gardening they felt necessary, so staff did the weeding whilst chatting with the person and facilitated a gardener to work in the garden for the person. This meant people continued to be included and supported to have good outcomes and an improved quality of life.
- Management carried out reviews and made changes in response to people's changing needs.
- A satisfaction survey had been sent out to people to ask about their experience of the care and support they received. Positive feedback had been received.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity, and their privacy was respected. One relative told us, "They (carer) always hope (Person's name) will do the best they can. They (carer) hope (Person's name) can stand; they allow them to try. They (carer) will always offer them a spoon first to see if they can recognise what they had to do with it to feed themselves, they (carer) hope for the best before they support them. They (carer) always treat (Person's name) as able, then do what is needed."
- Staff visited the same people consistently and told us, "I try to stay as long as I can to do as much as I can for the person, " "I provide loads of companionship and a lot of comfort too, it is what they need" and "I love my job, it does not feel like a job. I spend so much time with my client I know how they tick. We get along really well and have a good time."
- People told us that staff promoted their independence and respected their right to make choices for themselves. For instance, relatives said, "The carer will ask 'would you like a shower today?' it's done as a joint partnership, (Person's name) is not done to, it is a partnership" and "The staff always offer independence, emotionally they are very respectful of what (Person's name) wants."

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service at a new location. This key question has been rated good.

This meant people's needs were met through good organisation and delivery.

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

- Nurseplus was very responsive to people's changing needs and wishes. Comments included, "The staff at the office are outstanding. If I email a medication change, it's changed immediately. The communication is also outstanding. I was kept in the loop the whole time about the two-week changeover," "On occasion I ring or email the office, I get a response from someone, often within the hour" and "I usually ring if I want extra cover or to change. If the person who deals with it is not there, they call back quite soon. They accommodate me whenever they can. They really do try."
- Care plans identified people's care and support needs. They contained a great deal of person-centred information and past life history. This supported staff to provide the best care and support.
- Consistent experienced staff had been visiting people for a long time and knew them well. One staff member told us, "I am always trying to encourage (Person's name) mobility. I spoke with their family and we keep coming up with new ideas to encourage them. It is really working well. Nurseplus supports staff to be the best they can be. I would be happy for any of our staff to support a loved one of mine. We can be super flexible and if a person wants to change a time or a day of their visit, it is done."
- People and relatives were very involved in the care plan and any decision made regarding the provision of care. People told us they found the records very easy to read and understand. Comments included, "Very, very detailed notes daily that we can look at. It's incredibly neat and well laid out. Very detailed, times, bowel changes, everything is logged in incredible detail," "The logbook is very clear. I often check what's going on. I read through the notes, the logbook is very thorough, the most thorough of any agency we have ever used," and "The logbook is filled in comprehensively. I don't have a need to look at it that often, not like previous companies."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's care plans included their communication needs and how best to achieve effective communication. We were told if anyone needed information in an accessible format this could be provided. No person, who was receiving support from the service at this time, required this sort of assistance.

Improving care quality in response to complaints or concerns

- Nurseplus received a large number of compliments including, "We had a really excellent service from Nurseplus for over three years. They are flexible and always listen. I cannot praise them highly enough. Carers are well trained. Good support from office staff, they listen!"
- People and their relatives were aware of how to complain if they needed to. Information on how to make a complaint was included in the service user handbook that was given to people and their relatives. Comments included, "No complaints, far from it, I'm always emailing them to say how brilliant they are." And "No, not about these people at all. No fear, we haven't had to at all."
- No complaints had been received. If any complaints and concerns were received, they would be investigated by the registered manager and used as an opportunity to learn and improve further.

End of life care and support

- The registered manager told us, "We ensure we talk about end of life care, if it is appropriate, as we try very hard to ensure people's wishes are known. Then we can ensure we provide whatever that person wants. We find it helps families to discuss this delicate matter too, if we bring it up and initiate that conversation."
- No one was being cared for at the end of their lives at the time of the inspection.
- Staff were provided with training in end of life care.

Is the service well-led?

Our findings

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

This is the first inspection for this newly registered service at a new location. This key question has been rated outstanding.

This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- People and relatives were extremely complimentary about the service they received. No one had anything negative to say about Nurseplus. Comments included, "Outstanding, all parts of the organisation are outstanding as far as I can see. All phone calls, and emails are replied to promptly and the finance department is very efficient at sorting stuff out," "It appears to be outstanding, even when they had COVID they were able to provide the same service." And "The office always get back to me, I've never had to chase them. Their communication is very, very good."
- The culture of the service was open and transparent. People said communication was very good. One person told us, "One morning when the carer was caught up with another vulnerable person, the office rang me, even when really under pressure. They said they would try to get another carer to come in place of my regular one. Then they called back in 20 minutes to say that someone was coming to help me. They don't just say they will try and that's that, they actually do try."
- There was a strong emphasis on continually striving to improve the service provided to people. The registered manager recognised, promoted and regularly implemented innovative ideas in order to provide a high-quality service. During COVID-19 lockdowns, when families could not visit their relatives in person, staff who were in the house providing care, would use the video call function on their phones and set up a call between the person and their family so that they could have a chat and see, in real time, that they were well and cared for. This helped reduce people's feelings of isolation and fostered relationships. Staff comments included, "One person lived alone, had no family and no verbal communication, so was unable to use the phone. During the first lockdown I recognised how very isolate they were feeling. This person communicated by facial expressions and physical gestures so, I thought a video link would be really comforting for them, so I arranged with their friend, in advance, to make a video call with the person and their friend. They really benefitted from it. We did it a few times. It was lovely to see them smile."
- Relatives told us, "I find the whole service is outstanding. The staff are extremely pro-active. I'm confident and happy to leave (Person's name) in their care. (Person's name) has sleep problems and the carer has put in a regular daily routine and sleep is now less of a problem. The same with bowel routine, meaning (Person's name) doesn't have to get up at night so much. The carer has been exemplary, outstanding in sorting out their health matters, being pro-active and very switched on," "The standard of care is superb; it enables me to have a life. I can go on holiday, I am confident in them. I know they will let me know of any problems. The whole ethos is they go over and above, it's like anything they can do, they will do. I am so

grateful to Nurseplus and the individual carers for everything they do," "They just have a culture of trying to oblige what we need. Consistency and communication are the best two things about it. I don't often give such glowing reports, but they are really, really good and that's from experience." and "Support is the main thing and that they are very dependable. It has been a revelation, it has enabled (Person's name) to stay in their own home. We are delighted with this outstanding service."

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

- Throughout the COVID-19 pandemic Nurseplus kept all staff, people and families in contact with a regular newsletter. There was a theme to each one. Recently, dementia had been the focus, including information and symptoms. A nutrition and hydration article helped inform people how to eat well. A useful directory of services contact details were also included to help people during the lockdowns should they need support and advice. In each newsletter there was either a bingo game or a word search competition for carers to take part with the people they support. There was a prize for the first person and their carer to return a correctly completed word search. This helped foster a fun link between people, staff and the Nurseplus management team. The registered manager told us one person had already won a prize for the bingo game and they were waiting for the return of the latest completed wordsearch to award the next prize.
- Nurseplus were very keen to include people and their families in events that took place at Nurseplus. Now that COVID-19 restrictions were lifting they invited people, their relatives and staff to visit the office for events held there, such as the Dementia 'Time for a cuppa' fund raising event planned for 20 May 2022. There were plans to mark the Queens Jubilee with staff delivering little treats in hampers and bunting to decorate people's homes, to help them feel involved in the celebrations.
- People and staff had been asked for their views on the service. We saw the results from a recent survey which had been completed by people who used the service, these were all positive.
- We spoke with people and their relatives on the phone, comments included, "I've dealt with a few care agencies and they are definitely the best I've ever dealt with. I'm grateful they had space for us. For us it's that they provide consistency of care, there is no rush they always take time. They are very interested in (Person's name), they look after their general wellbeing as well. It makes such a difference," "The carer is so very helpful, they just know exactly what to do with whatever comes up. I have great faith in them." And "More importantly they look after (Person's name) general wellbeing, they bring out photo albums and talk about their past with them and talk about their story. They have a huge family and they talk about it, it is lovely."
- The registered manager was very aware of the pressures on staff during the COVID-19 pandemic, including the current challenges of the rising cost of living and the general stresses of life in general. So, they have developed a mental health buddy system. This meant staff could call a nominated person at any time to obtain support. We were told staff had taken advantage of this support.
- Staff told us that they felt valued and supported by the management team. They told us they enjoyed working at the service. Comments included, "I love my job" and "I cannot fault them (management) I get really good support."

Working in partnership with others

- The service worked in partnership with other organisations to make sure they were following current practice and providing a high quality service. The service had sustained their outstanding practice since their last inspection as their previous location.
- The service had established good working relationships with professionals including healthcare professionals to ensure good outcomes for people. All the healthcare professionals we spoke with were very positive about the service provided by Nurseplus.
- The registered manager arranged a meeting in the office for a person's community psychiatric nurse,

social worker and community nurse, so that they could discuss the best possible intervention and practice to help the person. This meant that a specific complex plan of care was arranged much quicker than having individual telephone and zoom calls, and decisions were made in a timely way.

- The service worked in partnership with other organisations to make sure they were following best practice and where possible, contribute to the development of best practice. Nurseplus also attended zoom calls when able, to share best practice with Cornwall Partners in Care and Cornwall Adult Health and Social Care (CAHSC). CAHSC is an independent charitable incorporated organisation formed by members who are committed to the development of the adult health and social care workforce in Cornwall and Devon.
- Nurseplus had supported other care agencies with staff, when the unprecedented challenges of Covid-19 related staff shortages was at its height. One Nurseplus carer did the evening calls to a person, being supported by another agency, for three weeks until the service could recruit staff to that person.
- Nurseplus fostered close links with Truro college students, who were studying Health and Social Care courses, by offering them experience placements in the service during their training. This had helped with recruitment.

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

- The registered manager understood the duty of candour requirements and ensured information was shared with the relevant people when concerns were identified.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The service had a registered manager at this time. The registered manager was supported by the home care manager and the recruitment team.
- The audit and monitoring processes which were currently in place were robust. Regular visits and checks by area managers ensured that the service was effective and safe.
- The registered manager was passionate about providing the best service they could to people. They told us that when a new person was taken on by the service, this often highlighted specific knowledge and skills required by the staff. They told us, "We often find that our carers need to have specific training, related to a certain client, so we look for that training and if we cannot find it 'out there' we ensure that our training department design our own training package. We do whatever is needed to get it right."