

Surrey Care At Home Ltd

Home Instead Senior 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?	Outstanding 
Is the service responsive?	Outstanding 
Is the service well-led?	Outstanding 

Summary of findings

Overall summary

The inspection took place on 20 October 2017 and was announced.

Home Instead Senior Care provides care and support to people in their own homes in the Guildford and Woking areas. The agency provides a range of services to people, including companionship, home help and personal care. This report focuses on the experiences of people who received personal care as part of their support package. Most of the people who use the service are older people, some of whom are living with dementia. The agency also provides services to younger adults who may have learning disabilities, mental health issues, sensory impairment or physical disability. The agency provided services to 102 people at the time of our inspection, 48 of whom received personal care.

There was no registered manager in place at the time of our inspection. Like registered providers, registered managers are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run. The agency's care manager had submitted an application for registration with the Care Quality Commission which was being processed at the time of our inspection. Sarah Daly is the agency's managing director and the Nominated Individual for the provision of personal care.

The agency adopted a proactive approach to keeping people safe. Staff had implemented measures to reduce not only any risks involved in providing people's care but also to improve their general safety and security. The measures that had been put in place ensured people were as safe as they could be in their own homes. In several instances staff had taken swift action to protect people from financial abuse or fraud. As a result of the risk many older people faced from financial abuse, the managing director had introduced advice sessions for people about how to avoid becoming a victim of fraud.

People told us they trusted their care workers and felt reassured by their presence. They said they could rely on their care workers and felt safe when staff provided their care. Relatives told us care workers consistently considered how best to keep their family members safe when receiving their care and in their day to day lives.

The agency employed enough staff to ensure that all care visits were covered. People said their care workers had never missed a visit. The managing director told us that the availability of staff to cover visits was always considered before a new care package was agreed. The management team had developed plans to ensure people's care would not be interrupted in the event of an emergency.

People were protected by the agency's recruitment procedures. Prospective staff were required to submit an application form and to attend an interview where their suitability for the role was assessed. Applicants also had to provide details of four referees and to produce proof of identity, proof of address and eligibility to work in the UK. The agency had obtained satisfactory references and a Disclosure and Barring Service (DBS) certificate for all staff employed.

Staff understood the responsibility they had to keep people safe. They had attended safeguarding training during their induction and were knowledgeable about the potential signs of abuse. Staff knew how to report any concerns they had about people's safety or well-being, including outside the agency if necessary.

If an incident or accident occurred, staff recorded the event and the action they had taken in detail. Accident and incident records were reviewed by the management team to ensure that the actions taken were appropriate and to identify any learning points from the event.

Where people's care involved support with medicines, this was managed safely. Staff had been trained in the safe management of medicines and their competency in this area had been assessed. Staff maintained medicines administration records in people's homes, which were audited regularly to ensure people were receiving their medicines safely.

People received their care from staff who were well trained and supported. All staff attended a comprehensive induction and had access to the training and support they needed to do their jobs to a high standard. Staff met regularly with their managers for one-to-one supervision and were encouraged to achieve additional qualifications relevant to their role. Staff provided very positive feedback about the training the agency provided and the support they received from their managers. They said the training equipped them well to do their jobs and they were encouraged to identify any additional training they needed.

All the people we spoke with said their care workers were extremely competent and provided care to a consistently high standard. Some of the people who used the agency had complex needs which required staff to work collaboratively with relatives and professionals involved in providing their care. Relatives and professionals who worked with the agency in these circumstances said care workers possessed the knowledge and skills they needed to provide excellent care.

People received their care from a consistent team of care workers, which they said was important to them. They were always informed if their regular care worker would not be attending and told us the agency always arranged a suitable replacement care worker. New care workers were always introduced to people before providing their care.

People's care was provided in accordance with the Mental Capacity Act 2005 (MCA). People told us staff always asked for their consent before providing their care. If people lacked the capacity to make decisions, relevant people had been consulted to ensure any decisions were made in the person's best interests. Staff had received training on the principles of the MCA and how these principles applied in their work.

People who received support with meals enjoyed the food their care workers prepared. They told us their care workers knew their dietary needs and preferences. Relatives said care workers put time and effort into providing meals their family members enjoyed. People's nutritional needs were assessed during their initial assessment and any dietary needs recorded in their care plans. Where people needed assistance with eating and drinking there was a care plan in place to outline the support they required.

Care workers supported people to stay healthy and to obtain treatment when they needed it. Care workers liaised with healthcare professionals involved in people's care and accompanied them to appointments where necessary. People and their relatives valued this support because they found it difficult to manage transport to appointments and communication with healthcare professionals. Care workers were quick to identify any changes in people's health. Relatives said care workers' vigilance and advice had been valuable in enabling their family members to obtain treatment when needed.

People were supported by staff who were extremely kind, caring and compassionate. Care workers were passionate about their work and wanted to make a positive difference to people's lives. They frequently gave up their own time to spend time with people, particularly if they lived alone or had limited family contact. Many people had established close relationships with their care workers and regarded them as good friends. Relatives said their family members benefited greatly from the kindness and companionship of their care workers and the relationships they had formed with them. Several relatives said staff had also provided valuable emotional support to people's families when they experienced difficult times.

Staff supported people to be as independent as possible. People told us staff had emphasised the benefits of independence and encouraged them to do things for themselves where they could. One of the agency's stated aims was to enable people to stay in their own homes and there were many examples of staff enabling people to achieve this when they would have been unable to do so without support. We also heard examples of how staff had supported people to remain involved in their local communities, which increased their independence and prevented social isolation.

The agency organised events that were available to people receiving care but also benefited people in the local community. The agency ran a dementia café and a choir for people living with dementia and the managing director had established a regular dementia-friendly church service. Relatives were able to attend the agency's dementia training at no cost, which helped them to understand the condition and ways in which they could support their family members.

Dignity and respect underpinned the agency's approach to providing people's care. These values were emphasised in the induction attended by all staff and the agency had appointed a dignity champion to ensure dignity and respect were at the forefront of the agency's work. People told us their care workers always treated them in a respectful way and provided care in a way that maintained their dignity.

The agency was exceptionally responsive to people's individual needs, including when their needs changed. We heard many examples of care staff and managers supporting people and their families at short notice, often in their own time and with tasks unrelated to their agreed care package. People and their relatives told us they valued this responsiveness highly. Some people said the flexible support provided by the agency enabled them to live independently when they would not otherwise be able to do so. Relatives said this flexibility enabled them to make sure their family members received the care they needed when their own commitments changed.

The agency ensured that people were assigned care workers who were not only able to meet their care needs but whose interests they shared and whose company they enjoyed. Particular attention was paid to the 'matching' of people with their care workers with the aim of bringing people together who shared similar interests. In the 2017 satisfaction survey, 100% of respondents said their assigned care worker was well matched to their needs. If people felt the care workers they had been assigned were not sufficiently well matched to their individual needs and interests, the agency considered alternative care workers who would be likely to establish positive relationships through shared interests.

People's needs were always assessed before they used the service to ensure the agency could provide the care and support they needed. Assessments recorded people's needs and the outcomes they wanted to achieve from the support they received. Each person had an individual care plan drawn up from their initial assessment. People were shown their draft care plans to ensure they reflected their needs, wishes and preferences.

The agency had a complaints procedure which was provided to people when they started to use the service

and their relatives. People told us they had never needed to complain as the provider contacted them regularly to hear their views and ask for feedback about the service. The managing director told us the management team had a commitment to resolving issues to people's satisfaction and would use any complaints as opportunities to improve the service.

People, relatives and staff benefited from a well managed service. People and their relatives told us the agency communicated effectively with them and that the service they received from the office staff was friendly, professional and efficient. Many people emphasised that the office team and management team were caring as well as professional in their approach. They said the office team and management team had provided valuable emotional support when they were experiencing challenges.

The agency's values were known and promoted by staff at all levels. Care workers shared the management team's commitment to providing high quality person-centred care that exceeded people's expectations. Staff said their managers demonstrated the agency's values in their own work, which motivated them to provide outstanding care. The agency's recruitment procedures ensured that only staff who demonstrated empathy and compassion and were passionate about making a positive difference to people's lives.

The agency encouraged people who received care, their relatives and staff to give their views and these were listened to. Satisfaction surveys were distributed to people, relatives and staff and the management team used visits and telephone checks to ensure people remained happy with the care they received.

The feedback we received from people, relatives and professionals confirmed that they considered the service the agency provided to be outstanding. Many people highlighted the excellent care provided by staff and the ability of the agency to adapt and respond to their changing needs. Relatives emphasised the flexibility and professionalism of the agency and said they would not hesitate in recommending the agency to others.

One relative told us, "Home Instead make all possible efforts to provide the best care with the best carers in a flexible and supportive way. We could not be happier with the service we have received from the company and do not hesitate to recommend them to others. I have been particularly impressed with the way the company has been able to cope with my varying schedule in a positive and professional manner. To conclude, [family member] and I find ourselves unable to fault this company and at the same time we are we constantly impressed by their support and professionalism."

Another relative said, "I have no reservations in recommending this company to friends who have relatives who need care at home. We have never ever considered looking elsewhere for care for [family member] as we are 100% happy with the help he gets. We cannot thank [managing director], [care manager] and [care workers] enough. They are all superb."

The agency had established effective working relationships with other professionals involved in people's care. The professionals we spoke with said the agency was well managed and maintained high standards of care and professionalism. The agency's quality monitoring systems were effective in ensuring people received safe and responsive care that met their individual needs. Key aspects of the service were monitored by the management team and the Home Instead head office carried out an annual quality audit.

The records we checked in the agency's office relating to people's care were accurate, up to date and stored appropriately. Care staff maintained daily records for each person, which were audited by the management team each month to ensure that the quality of recording was appropriate.

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.

The agency had a proactive approach to keeping people safe. Measures had been implemented to ensure people were as safe as they could be in their own homes.

People trusted their care workers and felt reassured by their presence. Staff were reliable and had never missed a visit.

Where incidents had occurred which compromised people's safety, the agency responded quickly to ensure their safety was maintained. Staff had taken swift action to protect people from financial abuse.

Risk assessments had been carried out to ensure people receiving care and the staff supporting them were kept safe. There were plans in place to ensure that people's care would not be interrupted in the event of an emergency.

People were protected by the provider's recruitment procedures. Staff attended training in safeguarding and understood their responsibilities should they suspect abuse was taking place.

People's medicines were managed safely.

Is the service effective?

Good 

The service was effective.

People received their care from regular staff who understood their needs. Where people had complex needs, staff worked closely with relatives and professionals to provide the care they needed.

Staff were well trained and supported and highly motivated. Staff attended a comprehensive induction and their knowledge in key areas was kept up to date through regular training. Staff were encouraged to achieve further qualifications relevant to their roles.

People told us they received their care from a regular team of

care workers. They said they were always informed if their regular care worker would not be attending a visit and that the agency always arranged a suitable replacement care worker.

Care workers were always introduced to people before providing their care. People said their care workers had enough time at each visit to provide the care they needed.

People's care was provided in accordance with the Mental Capacity Act 2005.

People enjoyed the food their care workers prepared and said their care workers knew their dietary needs and preferences.

Care workers were quick to identify any changes in people's health and to provide advice about the most appropriate response. Care workers' vigilance had been instrumental in enabling people to obtain appropriate professional input when needed.

Is the service caring?

The service was extremely caring.

People were supported by staff who were extremely kind, caring and compassionate. They valued the close relationships they had developed with their care workers and many people regarded their care workers as good friends.

Relatives said their family members benefited greatly from the kindness and companionship of their care workers and many relatives reported that care workers had also provided support to people's families when they experienced challenging times.

Care workers were passionate about their work and wanted to make a positive difference to people's lives. They enjoyed supporting people to live their lives as they chose and achieve their goals. Care workers frequently gave up their own time to spend time with people, particularly if they lived alone or had little family contact.

Staff supported people to be as independent as possible. In many instances, staff had enabled people to remain in their own homes when they would have been unable to do so without their support.

Dignity and respect underpinned the agency's approach to providing people's care. Staff always treated the people they cared for in a respectful way and provided care in a way that

Outstanding 

maintained their dignity.

Is the service responsive?

The service was highly responsive to people's needs.

Care staff and managers worked hard to deliver a service that exceeded people's expectations and always responded to their needs. Staff often responded to people's needs in their own time and with tasks unrelated to their agreed care package.

Some people said the flexible support provided by the agency enabled them to live independently when they would not otherwise be able to do so. Relatives valued the flexibility the agency offered as it reassured them that their family members would receive care whenever they needed it.

People's needs were assessed before they used the service to ensure the agency could provide the care and support they needed. People were assigned care workers who were not only able to meet their care needs but whose interests they shared and whose company they enjoyed.

The agency had a complaints procedure which was provided to people when they started to use the service and their relatives. The management team had a commitment to resolving issues to people's satisfaction and would use any complaints as opportunities to improve the service.

Outstanding 

Is the service well-led?

The service was very well-led.

People, relatives and staff benefited from a well managed service. People told us the agency communicated effectively and that office staff were friendly, professional and efficient.

People reported that the office team and management team were extremely caring and had provided valuable emotional support when they were experiencing challenges.

The agency's values were known and promoted by staff at all levels. All staff shared a commitment to providing high quality person-centred care that exceeded people's expectations. Staff said their managers demonstrated the agency's values in their own work, which motivated them to provide outstanding care

The agency had effective working relationships with other professionals involved in people's care. Professionals reported

Outstanding 

that the agency was well managed and maintained high standards of care and professionalism.

The agency's quality monitoring systems were effective in ensuring people received safe and responsive care that met their individual needs. Key aspects of the service were audited regularly.

Records relating to people's care were accurate, up to date and stored appropriately.

Home Instead Senior 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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 20 October 2017. The provider was given 48 hours notice of our visit because we wanted to ensure the manager and Nominated Individual were available to support the inspection process. One inspector undertook the inspection.

Before the inspection we reviewed records held by CQC which included notifications, complaints and any safeguarding concerns. A notification is information about important events which the registered person is required to send us by law. This enabled us to ensure we were addressing potential areas of concern at the inspection.

During the inspection we visited the agency's office and spoke with the managing director, care manager, compliance manager, recruitment and training manager, care co-ordinator and four care workers. We checked care records for four people, including their assessments, care plans and risk assessments. We checked four staff files, including recruitment checks, the complaints and compliments log, the most recent satisfaction surveys and the provider's quality monitoring audits.

After the inspection we received feedback about the agency from five people who used the service, eight relatives and two social care professionals.

This was the first inspection of the agency at its current location. We had previously inspected the agency when it was registered at a different address on 22 August 2013, where we found no concerns.

Is the service safe?

Our findings

The agency had a proactive approach to keeping people safe and considered any measures that could be implemented to reduce potential risks. This included not only any risks involved in providing people's care but also any measures that could be implemented to improve people's general safety and security. The measures that had been put in place by the agency ensured people were as safe as they could be in their own homes.

People told us they trusted their care workers and felt reassured by their presence. They said they felt safe when staff provided their care. One person told us, "I feel safe when they are around." Another person said of their care workers, "They are very safety conscious." A professional who worked with the agency told us, "Throughout every contract from assessment onwards, safety for each client has been a priority."

Relatives told us care workers consistently considered how best to keep their family members safe when receiving their care and in their day to day lives. One relative said, "I believe the caregivers consider the safety of my mother of high importance and have made suggestions to improve safety around the house. This has included the suggestion of replacing an old gas cooker with an electric one, ensuring there is a spare key available to all in the event that my mother locks herself out, monitoring medication and changing from a monthly [medicines] supply to a weekly supply to minimise mistakes."

We heard many examples of actions taken by the agency that had improved people's safety in their own homes, particularly where they lived alone. One person who lived alone had a fall in their home which required admission to hospital for treatment. On the person's return home, the agency arranged for the installation of a pendant alarm the person could use to summon assistance if they fell again whilst on their own. The agency also arranged for the fire brigade to test carbon monoxide levels in the person's home and install a smoke alarm and carbon monoxide detector. When gas was detected at another person's home, the care manager contacted the person's family and gave them the appropriate telephone number to call to deal with a gas escape. The care manager then contacted the person's family again to confirm they had been able to ensure their family member's safety.

Staff had developed an 'emergency client information' pack which was kept in each person's home in case they required admission to hospital in an emergency. These packs included important information for medical staff, including information about any medicines the person took, any allergies they had and details of their next of kin and GP. Care workers were instructed to wait with people if they needed to call emergency services to ensure people were not left alone and that staff could provide potentially important information about the person to paramedics.

Where incidents had occurred which potentially compromised people's safety, the agency responded quickly to ensure their safety was maintained. For example one care worker noted that an electrical item at a person's home was not safe. The care worker reported this to the office team, who contacted the electrical company with which the person had a maintenance contract. When the electrical company was unable to respond promptly, the office team identified and contacted an emergency electrician who was able to visit

and make the appliance safe. The care worker stayed until the appliance was repaired as the person was anxious when strangers visited their home. Another person was at risk when a shelving unit in their kitchen collapsed. As the person's family all lived some distance away, the agency's director visited the person to repair the unit and ensure it was securely fixed.

The agency also ensured that people felt safe if they experienced worry or anxiety. For example some people became anxious if people they did not know, such as tradespeople, arrived at their homes. If a visit from a tradesperson was required, the agency frequently arranged for a care worker to be present to ensure the person felt safe and supported. Some people had told their care workers they did not like opening their front doors when they were at home alone. The agency had offered to install key safes for people so that they did not have to open their front doors. Several people had taken up this offer and the agency had installed the key safes for them free of charge. The agency ensured that information about how to access people's homes was kept safe and only available to those staff who needed to have it.

Risk assessments were carried out to ensure that people receiving care and the staff supporting them were kept safe. Risk assessments considered people's individual needs, any equipment used in providing their care and the environment in which the care was delivered. Guidelines had been produced for staff about how to minimise any risks involved in providing people's care. Relatives told us staff followed these guidelines to ensure their family members were safe when receiving care. One relative said their family member had complex care needs, which potentially put them at risk. The relative told us staff made sure their family member was protected from harm by maintaining a safe environment and the safe use of equipment. The relative told us, "All the staff who care for [family member] maintain a safe environment for him, so his safety is assured at all times. He has complex needs and can have a seizure at any time. The staff ensure they know how to position [family member] if that occurs. They are competent in using the equipment required for [family member's] care."

Staff received safeguarding training during their induction and regular refresher training thereafter. Staff were knowledgeable about the types of abuse people may experience and in recognising the signs of abuse. They told us the managing director had emphasised their responsibility to report any concerns they had about people's safety or well-being. Staff knew how to report their concerns if necessary, including outside the agency.

In a number of instances care workers had taken swift action to protect people from financial abuse or fraud. One care worker arrived at a person's home to find them about to issue a cheque for a large sum to tradesmen who had carried out work for them. The care worker was concerned about the amount of money charged for the work and contacted the person's family. At the family's request the care worker contacted the police, who alerted the local authority's trading standards team. The care worker had ensured that no money changed hands and the tradesmen were subsequently investigated by the trading standards team.

Another care worker arrived at a person's home to find the person had given their bank account details over the telephone to an unknown caller. With the person's permission, the care worker called the police, the bank and the credit card company to ensure that no fraudulent activity took place on their account. Another care worker was told by a person that they had been persuaded by a salesperson to order and pay for multiple products for which they had no use. The care worker worked with the person and their family to ensure that the person only received calls from known telephone numbers in future, which reduced the risk of the person being subjected to financial abuse.

Having considered the risk many older people faced from financial abuse, the managing director had introduced information and advice sessions for people about how to avoid becoming a victim of fraud.

These sessions were advertised on the agency's website and were available free of charge to people and families, including people who did not use the service but felt they would benefit from the advice and information.

People told us that they could rely on their care workers and that their care workers had never missed a visit. Relatives told us that care workers were always on time unless they had been delayed due to another person's needs at a previous call. They said a member of office staff always contacted them or their family member to let them know if a care worker was running late.

The agency employed enough staff to ensure that all care visits were covered. The managing director told us that the availability of staff to cover visits was always considered before a new care package was agreed. The managing director said, "We would never take on a care package we could not meet." The managing director told us there had been no missed care calls in the last 18 months and that staff were encouraged to take personal responsibility for ensuring people received a reliable service. The managing director said, "We teach our care workers to take on that responsibility."

The managing director explained that the agency's monitoring systems would alert the office team if a care worker had not arrived on time at a scheduled visit. Care workers were required to log in when they arrived at a visit and to log out on departure. If a care worker had not logged in within seven minutes of the scheduled start of a call, they received a reminder to do so via text message. If a care worker had not logged in within 15 minutes of the scheduled call time, the office received an alert to advise them of this. Office staff were then able to contact the care worker to establish their whereabouts and to contact the person receiving care if necessary.

People were protected by the agency's recruitment procedures. All prospective staff were required to submit an application form with details of their skills, experience and qualifications. Short-listed applicants attended a one-to-one interview where their suitability for the role was assessed. Those appointed had to provide details of four referees and to produce proof of identity, proof of address and eligibility to work in the UK. We saw evidence that satisfactory references and a Disclosure and Barring Service (DBS) certificate had been obtained for all staff employed. DBS checks identify if prospective staff have a criminal record or are barred from working with people who use care and support services. The compliance manager's role included checking that all necessary pre-employment checks had been completed before staff were deployed. The compliance manager also checked that staff who transported people in their own cars had appropriate business insurance and a valid MOT for the vehicle.

If an incident or accident occurred, staff recorded the event and the action they had taken in detail. Accident and incident records were then reviewed by a member of the management team to ensure that the actions taken were appropriate and to identify any learning points from the event. The management team had developed plans to ensure people's care would not be interrupted in the event of an emergency, such as adverse weather affecting staff travel. The plan identified those people most at risk, such as those living alone, and put plans in place to prioritise the delivery of their care in the event of an emergency. The agency had been affected by a flood at a previous office location and contingency plans proved effective in ensuring people's care was not disrupted despite the loss of premises and IT communication systems.

Where people's care involved support with medicines, this was managed safely. Staff responsible for administering medicines had been trained in this area and their competency had been assessed. Staff maintained medicines administration records in people's homes where appropriate, which were audited regularly by senior care workers and signed off by a member of the management team. The level of support people required to take their medicines was detailed in their care plans, which ensured staff provided

appropriate assistance with this aspect of their care. Several relatives told us staff had suggested measures which helped their family members take their medicines safely, including having their regular medicines supplied in monitored dosage systems.

Is the service effective?

Our findings

People received their care from staff who were well trained and supported and highly motivated. People, their relatives and professionals told us the care workers supplied by the agency were of a consistently high standard. They said care workers were well trained and passionate about providing good care. One relative told us, "The carers all have a good skill base and are very well trained - they all are dedicated and enjoy their work." A professional who worked with the agency told us, "Without question, Home Instead Senior Care Guildford and Woking always provide well trained, experienced, empathetic and proactive carers."

Some of the people who used the agency had complex needs which required staff to have a clear understanding of their conditions and a collaborative approach to working with other people involved in providing their care, such as relatives and live-in care workers from other agencies. Relatives and professionals who worked with the agency in these circumstances spoke highly of care workers' attitude and skills. A relative told us, "The carers and I work as a team to provide gold standard care for [family member]. This is enhanced by having two carers who provide the bulk of the hours. The team we have currently is without doubt the best we have ever had." The relative said care workers always followed any guidance given by professionals about their family member's care, which had, "Enhanced their ability to provide an excellent level of personal care for him." A professional who had collaborated with the agency in providing care to people with complex needs told us, "When carers have worked together with our agency on extremely complex cases they have always been experienced, fully trained, responsive and willing. We know that the support we will get from Home Instead will be outstanding."

Staff had access to the induction, training and support they needed to do their jobs to a high standard. The management team was committed to ensuring staff had the support they needed to meet people's individual needs and to provide excellent care. The managing director told us they regarded high quality training as vital to ensuring care workers had the skills they needed and an understanding of the values and behaviours expected of them.

Care workers attended a comprehensive induction when they started work, which included training in key areas such as medicines management, infection control, health and safety, fire safety and dignity and respect. New staff also spent time shadowing experienced colleagues to understand people's individual needs and how they preferred their care to be provided. Care workers told us the induction they received had prepared them well for their roles. One care worker said, "The induction was really good." Another care worker told us, "Shadowing is as important as the induction. It was good to be shown what to do. You get to understand the little things about how people like things done."

The recruitment and training manager carried out an evaluation with each care worker when they had completed their induction. Care workers were asked for feedback about the quality of their induction and whether it had prepared them well for their role. Care workers were asked if they needed any further training or shadowing opportunities before they provided care unsupervised. The recruitment and training manager told us, "We want to make sure they feel confident and competent when they go out."

Staff knowledge and skills in key areas were kept up to date through regular refresher training, which was monitored by the recruitment and training manager. Care workers were sent a training module each month along with a workbook, which they had to complete and return for assessment. The recruitment and training manager said the previous three months had focused on safeguarding, medicines management and the Mental Capacity Act 2005 and the coming month would focus on food, diet and nutrition.

The agency had an established programme of dementia training which was City and Guilds accredited. The programme consisted of six modules delivered over three sessions and was attended by all staff. Some members of the management team had attended 'Train the Trainer' courses and delivered in house training sessions to care workers in areas such as safe medicines management. Training was also sourced from outside the agency where appropriate, for example moving and handling training and the safe use of equipment. If care workers required specialist training to meet people's individual needs, such as catheter care, stoma care or enteral feeding tubes, the agency engaged appropriate healthcare professionals to provide this. Care workers were signed off as competent by the healthcare professional before they were authorised to provide this specialist care.

Staff were encouraged to achieve additional qualifications relevant to their role, such as the Quality Care Framework diploma in Health and Social Care. The agency supported staff to achieve these qualifications by providing assessors to monitor and validate their work. The managing director told us that 24 of the agency's care workers had completed or were working towards relevant qualifications. All staff were expected to complete the Care Certificate within 12 weeks of joining the agency if they had not already achieved this award. The Care Certificate is a set of nationally recognised standards that health and social care staff should demonstrate in their daily working lives.

Care workers provided very positive feedback about the quality of training and support they received to do their jobs. One care worker told us, "The quality of training is very good." Another care worker said, "They make the training very enjoyable as well." All the staff who had returned surveys in 2017 said their initial training had prepared them for their first care assignment and 98% rated the initial training and support they received as very good. Comments made by staff in the surveys included, "The induction was very informative and easy to understand. The manual handling was very helpful", "I found the training very useful because it refreshed my knowledge of care", "Excellent, friendly training with a small group, able to ask questions, fun and interesting", "I have been given the opportunity to carry out a NVQ qualification and have the opportunity to attend other training courses to improve my ability to carry out my role" and, "The training given is well prepared and delivered and gives me the skills to develop my caring skills and to fully understand and assist my client's requirements. It also allows me to look out for initial signs that could develop into issues especially regarding the health and well-being of our clients."

Care workers met regularly with their line managers for one-to-one supervision and had an annual appraisal. They told us supervision sessions were useful opportunities to seek advice and receive feedback on their performance. Supervision records showed that staff were asked if they felt confident in providing all aspects of people's care and whether the training they received had equipped them with all the skills they needed to provide this care. Staff were also asked if they had any concerns about the safety or welfare of the people they cared for.

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 make particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People's care was provided in accordance with the MCA. People told us staff always asked for their consent before providing their care. They said they had been asked to record their consent to their care and we saw signed consent forms in people's care records. If people lacked the capacity to make decisions, relevant people had been consulted to ensure any decisions were made in the person's best interests. Staff had received training on the principles of the MCA and how these principles applied in their work. The managing director recognised that people who lacked the capacity to make some decisions remained able to make choices about their day-to-day lives and encouraged staff to promote choice when providing care.

People who received support with meals told us they enjoyed the food their care workers prepared and that their care workers knew their dietary needs and preferences. Relatives said care workers put thought and effort into providing meals their family members enjoyed. One relative told us, "He enjoys whatever she makes, she's a marvellous cook." Another relative said, "They provide us with a detailed shopping list and try hard to think of things that he might like to eat." People's dietary needs and preferences were explored during their initial assessment and any needs people had in relation to nutrition and hydration were recorded in their care plans. Staff attended training in nutrition and hydration in their induction and followed professional guidance where necessary to meet people's individual needs.

Care workers supported people to stay healthy and to obtain treatment when they needed it. In many cases, care workers liaised with healthcare professionals involved in people's care and accompanied them to healthcare appointments. People and their relatives said they valued this aspect of support because they found it difficult to manage transport to appointments and communication with healthcare professionals. One relative told us, "My father's understanding is not always very clear so they help with prescriptions, doctor's appointments etc."

Relatives told us care workers were quick to identify any changes in their family member's health and to offer advice about the most appropriate course of action. They said care workers' vigilance and advice had been instrumental in enabling their family members to obtain appropriate professional input when needed. One relative told us, "They are very good at communicating any concerns they have about [family member] and we rely heavily on their advice. For example the main carer recently requested me to call in the district nurse as she was concerned about a sore developing. The nurse duly came, prescribed a special cream and is going to get [family member] an air mattress for his bed and an air cushion for his chair." Another relative said, "They are very quick to mention (and/or report back to office) if they have any concerns even if changes are subtle." A third relative told us, "Staff let me know if they see any changes to my mother's health and will take action such as contacting the doctor as and when they consider it necessary."

Is the service caring?

Our findings

People were supported by staff who were extremely kind, caring and compassionate. People told us they valued the close relationships they had developed with their care workers and many people said they regarded their care workers as good friends. One person told us, "They are lovely girls. They are like friends now. I wouldn't be without them."

Relatives told us their family members benefited greatly from the kindness and companionship of their care workers and the relationships they had formed with them. One relative said, "[Family member] is so lucky to have his team of carers who not only care for him but demonstrate warmth and love and will go that extra mile as well." Another relative told us, "They are lovely women, they are very kind. They spend time chatting with him and interact with him. He gets on really well with them, he enjoys their company. They have become very fond of [family member] and he is very fond of them." A third relative said, "The two main carers in particular have forged very positive relationships with [family member] - they know what he likes and does not like and he looks forward to their visits very much. He speaks in glowing terms about 'his girls', especially the two regular girls." A fourth relative told us, "Staff are very kind, caring and compassionate particularly when considering the very difficult circumstances they are put in when my mother is especially anxious or confused."

Many relatives reported that care workers had also provided support to people's families when they experienced challenging times. They told us they appreciated and valued the emotional support staff had provided. One relative said, "We have been extremely happy with the care provided. Home Instead have met the changing needs of my mother and the staff have been fantastic. They are happy to carry out any tasks needed and nothing is too much trouble. They maintain a very kind and caring relationship with my mother and the family. Home Instead have made a difficult time so much easier for us all, we are all delighted with the service that they have provided and are extremely happy to recommend them to others." Another relative told us, "It has often been commented on by our friends who come in to see us what kind, caring and compassionate carers we have. They show those attributes to me as well." A third relative said, "I think they provide an excellent service! They have also supported me through such a stressful time. So happy that I found them, they have really turned around my father's life and given me peace of mind."

A professional said of care workers provided by the agency, "They are all always willing to go the 'extra mile' in terms of considering our client's needs and also those of our own carers who can be lonely and homesick at times. The Home Instead carers seem to be recruited for their kind, caring and compassionate nature." The professional also reported, "The Home Instead carers will arrive with books, magazines and treats often home cooked for their visits which will lift the spirits of both client and our carers."

The approach the agency adopted was made clear on its website, which stated, 'Home Instead Guildford and Woking regard it as a special privilege to look after people with love, care and compassion - and we take our responsibilities seriously. It's about quality care, giving our clients their freedom back and making sure they are happy and secure in their own homes.'

Care workers were passionate about their work and wanted to make a positive difference to people's lives. They reported that they enjoyed supporting people to live their lives as they chose and achieve their goals. Comments made by care workers in the 2017 staff survey included, "I feel really great at the end of the day once I've helped someone because I know I'm helping impact their lives in a positive way", "Home Instead is an amazing opportunity to really make a difference to the lives of others and help them to continue to live independently, you get to make good relationships with all the wonderful clients" and, "Home Instead is such a fantastic company to work for, you are right there in the community helping people young and elderly to live their lives to the fullest whilst staying in their own homes."

Staff frequently gave up their own time to spend time with people, particularly if they lived alone or had little family contact. For example a group of staff visited one person who lived alone on their birthday to celebrate with them, bringing presents and a cake. Staff also visited people if they were unwell or in hospital. One person who had no family was admitted to hospital towards the end of their life. Care workers visited the person every day, often in their own time, to ensure that the person had a friend with them in their final days. Care workers were with the person until an hour before they passed away.

People told us they received their care from a regular team of care workers. They said they were always informed if their regular care worker would not be attending a visit and that the agency always arranged a suitable replacement care worker. People told us new care workers were introduced to them before providing their care. They said their care workers had enough time at each visit to provide the care they needed. Care workers told us they had enough time during visits to spend time talking to people and getting to know them, which enhanced the care people received. One care worker said, "We have time to do the nice things, to make them a cup of tea and have a chat. You've got time to greet them properly and spend time with them. That's one thing this agency is really good at."

The agency had offered people the opportunity to complete a personalised 'life journal' with the support of their care workers. Life journals aimed to record important memories and experiences for each person and to provide people with opportunities to talk and reminisce about their lives. The managing director told us several people had benefited from the experience of completing their life journals, especially people who had no family contact. The managing director reported. "[Person] who lives alone and has no family has really enjoyed completing his [life journal] with his regular CareGiver and said it has brought back fond memories of the life he had with his wife and has enjoyed reminiscing. We will be putting journals into more homes if they are appropriate for each client."

A relative told us their family member was able to remain at home with them due to the support provided by the agency. The relative said they were their family member's main carer but would be unable to manage without care workers enabling them to take breaks. The relative told us, "They come in so I can have a break. They have been amazing. It's nice to know he's with someone I can trust when I'm not with him." Another person's relative had asked the agency to provide end of life care as their family member was in hospital and wished to spend their final weeks at home. Having assured themselves the person's care needs could be met at home, the agency agreed to provide this support. Although professionals had advised that the person was nearing the end of their life, with the support of the agency the person's health improved significantly and they continued to live at home with support at the time of our inspection, some two years after returning home from hospital.

People told us that care workers always treated them in a respectful way and provided care in a way that maintained their dignity. Relatives said staff treated their family members and their homes with respect. They told us care workers maintained their family member's dignity and privacy when providing their care. One relative said, "Staff always treat my mother respectfully, allowing her to open the door to let them leave

the house, adopting considerate manners when my mother is eating and allowing her to determine what jobs need to be done." Another relative told us, "The staff have always treated my mother and her home with respect."

A professional who worked with the agency commented, "The agency always schedules carers who treat the clients with dignity and respect. One small example would be in providing personal care, where they are all trained to consider using an extra towel so that a client remains covered throughout this highly personal aspect of the call ensuring the client never has to suffer the indignity of exposure for an act they are unable to carry out themselves." Another professional told us, "We have never had to question how the Home Instead carers behave during calls, or question that they will treat each home with anything other than the greatest respect."

The management team ensured that dignity and respect underpinned care workers' approach to their work. The importance of ensuring people were treated with dignity and respect was emphasised in the induction attended by staff and the agency had appointed a dignity champion to ensure these values permeated all aspects of the agency's work. The managing director told us, "Dignity is right there at the centre of what we do. We get all the CareGivers to see things from the client's point of view. We want our care to enhance people's lives, not just be something they have to get through."

People were supported to be as independent as possible. People told us their care workers encouraged them to do things for themselves where they could. They said their care workers had emphasised the benefits of maintaining their mobility and supported them to remain mobile. One person told us, "They encourage me to be independent. They encourage me to walk properly to maintain my mobility." In some cases, care workers had supported people to participate in preparing their own meals, which had resulted in positive outcomes for people. For example one person had enjoyed cooking when they were younger but had become unable to cook for themselves. As a result the person relied on Meals on Wheels or microwaveable meals. With the encouragement and support of their care worker, the person had begun to participate in preparing their meals. The person's care worker told us how much the person enjoyed being involved in preparing food and eating home-cooked meals again.

People and their relatives were involved in planning their care. They said the agency took care to ensure their views were reflected when developing their care plans. One relative told us, "I am always involved in planning [family member's] care." People were given clear information about their rights and the service to which they were entitled. The provider's Statement of Purpose set out the aims and objectives of the agency and explained the organisation's values. People were issued with a data protection statement when they began to use the agency which explained how their confidential information would be used and which individuals or agencies this information may be shared with. Confidential information was stored and shared securely and staff were briefed on the importance of confidentiality during their induction.

Is the service responsive?

Our findings

The agency was exceptionally responsive to people's individual needs, including when their needs changed. The management team ensured the staffing rota was sufficiently flexible to accommodate requests for changes, including those made at short notice. One person told us, "They are very good at keeping me and my other carer informed of any changes. The office has also helped me with very short notice requests and changes from my side." A relative said, "They are very accommodating when changes are needed, for example rota changes or care changes, extra calls or less calls. They are very supportive."

People and their relatives told us the flexibility the agency offered was one of its greatest strengths. People said the flexible support provided by staff enabled them to live independently when they would not otherwise be able to do so. Relatives said this flexibility enabled them to make sure their family members received the care they needed when their own commitments were subject to change.

One of the agency's stated aims was to enable people to stay in their own homes as long as they wished. This aim was shared by the management team and staff alike and there were many instances in which the agency had enabled people to remain in their own homes when they would have been unable to do so without support. One relative told us, "Until we called in Home Instead, [family member] was struggling to cope and we thought a care home might have to be the answer. However we thought we would try a home care organisation as a stop gap. We are overjoyed at how well it has worked out. [Family member] is able to live in his own home and have a quality of life that we never would have thought possible." Another relative said, "[Family member] is lucky as [names of care workers] share most of the care between them and they are just the best. They communicate well with each other and with us. I can honestly say that if [family member] had not had the amazing care that he has received in the home that he loves, he would no longer be with us. Every time we visit he says how lucky he is and that he does not know how he would manage without them."

One person told us they preferred to live independently but their fluctuating health meant they could not manage without support at times. The person told us they had very little notice of when their condition would deteriorate, which meant they often called upon the agency at short notice. Despite this, the person said the agency had never let them down, always responding immediately to supply a care worker who understood the support they needed. The person told us, "When I can't manage I 'phone them up and they help me out immediately. I get in touch with my friends at Home Instead and they look after me day and night." The person said that, on each occasion, "[Managing director] comes to see me to make sure everything's okay and she brings the carer with her."

A relative told us their schedule varied greatly from month to month, which meant, "A great deal of uncertainty and variability in our care requirements." The relative said they and their family member "were quite anxious about how [family member's] care would be handled during these periods of short notice call-outs and so we contacted Home Instead to ask for their suggestions." The relative told us, "Home Instead offered a very suitable, supportive and reasonably priced option which... has removed a great deal of stress from both [family member] and myself. So far there have been no issues with cover and all required care has

been provided to the highest standard." Another relative said, "The carers are very responsive to my mother's needs, and provide care accordingly, and frequently provide feedback to me."

A professional who had worked with the agency in providing care for people with complex needs told us, "[Managing director] often responded in an emergency to assist our live-in carers, quite often within the hour and/or out of hours! They were responsive when clients' care requirements changed and adapted their service quickly to accommodate changes to care plans." Another professional said, "When we have asked Home Instead to provide additional support at critical times they have always proved to be extremely responsive."

The managing director told us the agency aimed to deliver a service that exceeded people's expectations and always responded to meet their needs. We heard many examples of the agency succeeding in this aim, with care staff and managers supporting people and their families at short notice, often in their own time and with tasks unrelated to their agreed care package. Some of the ways in which the agency had responded to people's needs had made a significant positive impact on their lives. For example one person had been discharged home from hospital but was unable to mobilise, which meant they were unable to get to their bedroom and bathroom. The person wished to remain at home but was unable to do so without specialist equipment and support to help them mobilise. The agency's care manager arranged an urgent occupational therapy assessment for the person, which resulted in the provision of equipment including a profiling bed, standing hoist and full body hoist, enabling the person to transfer, with staff support, to and from their bed, access the bathroom and sit in their armchair.

Another person was supported to remain living at home following surgery, when this was initially not considered possible. Care workers supported the person in all areas of their daily life, including assisting them to wash and dress each morning and come down four flights of stairs to the area where they preferred to spend their day. Care workers then returned to cook the person's evening meal, made according to their preference each day. Care workers then carried out a bed-time call each evening, supporting the person with personal care and the assurance that they had locked up and secured their property, making it safe for them to go to sleep. Care workers also supported the person shopping every week in their wheelchair, accompanied them to all hospital appointments and arranged to be at the person's home whenever tradespeople were required.

A third person was supported by the agency to remain living at home when they would otherwise have been unable to do so. The person did not have relatives nearby to provide support when they needed it so the agency undertook a variety of tasks outside those agreed as part of the care package. For example staff purchased and changed light bulbs, arranged deliveries and organised the installation of a stair lift to enable the person to use their first floor bedroom. When the person's needs changed and they were unable to use the stair lift, staff dismantled the person's bed and reassembled it on the ground floor. When the person's health deteriorated, staff obtained equipment, including a profiling bed, that enabled them to continue living at home with support.

The agency frequently responded quickly to resolve any difficulties people experienced. When the agency's care manager arrived at one person's home, they found the person's relative in a state of anxiety. The relative had been contacted by the hospital to inform them that their family member was ready for discharge and had been left in the discharge lounge. However the hospital had advised that no transport would be available to bring the person home for 12 hours. The care manager immediately drove to the hospital and picked the person up, ensuring that they were home quickly and their relatives' worries were allayed.

On another occasion a person became unwell and was waiting anxiously at home for emergency services to arrive. The care manager immediately went to the person's home and stayed with them until the ambulance arrived to ensure they were not left alone. The care manager advised the person's relatives they were to be taken to hospital and the relatives met their family member at the hospital. One relative told us, "The staff are very caring. When [family member] was recently unwell the carer stayed on well beyond the time she was allocated as she refused to leave him until I had driven over to take over from her."

Care workers were able to give us examples of how they had responded to people's individual needs, which had resulted in positive outcomes for people. One care worker told us they noticed a person they cared for had developed needs related to continence. The care worker said, "Things had changed and he needed a bit more support. He was losing confidence. You could see him getting really down about it." With the person's permission, the care worker contacted the district nurse and arranged a continence assessment. The care worker told us, "He is now being assessed properly, we are getting him the equipment he needs."

Another person did not speak English as a first language, which had led to difficulties in managing their finances and healthcare appointments. As a result of these difficulties, the person had become unwell and accumulated a significant amount of debt. The agency identified a care worker who spoke the person's first language and engaged the care worker to support the person. With the support of their care worker, the person was able to access the healthcare treatment they needed and regain control of their finances.

The agency had a commitment to ensuring that people were assigned care workers who were not only able to meet their care needs but whose interests they shared and whose company they enjoyed. When people began to use the agency, particular attention was paid to the 'matching' of people with their care workers with the aim of bringing people together who shared similar interests. One relative told us, "During the initial interview [family member] stated that the primary requirements of a suitable carer for her would be one who could look after her hair properly and also was good with cats. The Home Instead staff took the time to find a suitable carer and settled on a young lady who is a hairdresser by trade and loves animals and we have been very pleased with her." A professional who had worked with the agency said, "Home Instead spends time learning about the client so they can match personalities and find compatibility from the start."

Staff told us the agency had established their hobbies when they started work in order that they could be assigned to people who shared these interests. One care worker said, "They do pay a lot of attention to the matching. They asked a lot of information about my interests and hobbies when I started." In the 2017 staff survey, one care worker commented, "I love the way people are matched with their CareGivers based on their history, interests and backgrounds." We saw that care workers' interests had been explored during their recruitment, including their interests and hobbies, which books they enjoyed and which languages they spoke. In the 2017 satisfaction survey, 100% of respondents said their assigned care worker was well matched to their needs.

If people felt the care workers they had been assigned were not sufficiently well matched to their individual needs and interests, the agency considered alternative care workers who would be likely to establish positive relationships through shared interests. People told us the agency managed this process in a responsive and professional manner. One relative said their family member had not found a care worker who had been assigned to them compatible with their interests. The relative told us, "A couple of other potential carers were assigned and we found one that [family member] was happy with. This process was handled in a very professional way by the staff at Home Instead without us feeling in any way pressured to accept an unsuitable carer." Another relative said, "We are very happy with things. We had an issue with one carer but that's all resolved. I felt she wasn't quite up to scratch and when I mentioned it they dealt with it straightaway."

People and their relatives said the agency always supplied suitable replacement care workers when their regular care workers were unable to attend. One relative told us, "On the odd occasion that our primary carer was unable to attend Home Instead always ensured that a suitable alternative was provided, taking into account [family member's] particular care needs and personality."

One of the agency's stated aims was to support people to remain involved in their local communities. The managing director said this had many benefits for people, including maintaining a level of independence and preventing social isolation. We heard examples of how people had benefited from the support provided by staff. One person had been reluctant to leave their home and staff were concerned they may become socially isolated. Staff were aware the person had an interest in horses and assigned them a care worker who stabled their own horse locally. The person visited the stables with their care worker and spent time with the horses, which was beneficial to their emotional well-being. Staff had also supported people to access community activities to achieve goals that were important to them. For example staff had supported one person who wished to lose weight to attend slimming classes and support groups.

People's needs were always assessed before they used the service to ensure the agency could provide the care and support they needed. The assessments carried out by the agency were comprehensive and identified any needs people had in relation to health, mobility, communication, nutrition and hydration, medicines and personal care. Assessments also recorded what people wanted to achieve from the service and their preferences about their care. Any risks to people receiving care and their care workers were also assessed during the initial visit by the agency. The managing director told us, "We get to know about their background, their medicines, health, emergency contacts. Then we do risk assessments; the environment, mobility, medicines. We find out about their daily routines; how they like to spend their time, what time they like to get up and go to bed and any regular appointments or groups they attend. Right from the outset we focus on getting to know the person and their history before they needed care."

Each person had an individual care plan drawn up from their initial assessment. Once the agency had drafted the care plan, it was shown to people, and their relatives if appropriate, to check the contents reflected their wishes and preferences. Care plans provided detailed guidance for staff about people's needs and the way they preferred things to be done. A relative told us, "The care plan and assessments are very thorough and regularly updated as care needs change." A professional who worked with the agency commented, "Every care plan is bespoke to each client and their particular needs. In my mind, they have always worked hard to understand each client's individual needs and deliver care that meets these needs."

The agency had a complaints procedure which was provided to people when they started to use the service and their relatives. People told us they had not needed to complain as the provider contacted them regularly to hear their views and ask for feedback about the service. The managing director told us the management team would use any complaints as opportunities to improve the service people received. The managing director said, "If someone raises a concern, we will act upon it immediately. We want our clients to be as happy as they can be."

Is the service well-led?

Our findings

People, relatives and staff benefited from a well managed service. People and their relatives told us the agency communicated effectively with them and that they could always contact someone at the office if they needed to. They said the service they received from the office staff was friendly, professional and efficient. One relative told us, "They are very good at communicating with me and my mother who calls them regularly." Another relative said, "The agency is very well managed, Staff are always courteous, efficient and quick to respond to enquiries." A third relative told us, "The agency communicates superbly! I also think the scheduler manages very well with the rota of carers."

People, relatives and professionals told us the office team and management team were caring as well as professional in their approach. They said the office team and management team provided valuable emotional support when they were experiencing challenges. One person told us, "[Managing director] is lovely, she and I get on very well. She is very good at choosing staff. I can spot a good person when I see them and they are all good." A relative said, "They are lovely people. Whenever I speak to them they are so cheerful and helpful. They are willing to listen and when you have the pressures we do it means so much to have someone who is willing to listen to you. You feel wanted and welcomed. They have been such a great help." Another relative told us the agency was managed, "In a very caring, professional, friendly and approachable way." A third relative said, "I really appreciate the fact that they are supportive and do try, really hard, to 'get it right'." A professional who worked with the agency commented, "[Managing director] is so approachable and always has time to discuss anything. She makes you feel like you matter and I'm sure her team and clients must feel the same." Another professional said, "[Managing director] and her team share the same values and passion for delivering the best care possible as I do. They have a flexible, can-do attitude and their client's wellbeing and quality of life lies at the heart of everything they do. I was always able to confidently recommend their services."

The agency only recruited staff who demonstrated empathy and compassion and were passionate about making a positive difference to people's lives. The managing director told us, "We look for people who are driven and really want to do the job, people who show compassion and empathy, people who enjoy talking but are good listeners. They must have good communication skills and they need to be observant – we need to be confident they will notice things." The recruitment and training manager told us, "We put them through the Mum Test. We ensure we recruit the right people as we only want staff who enjoy the job and have the right attitude." This commitment to recruiting staff who demonstrated a caring and compassionate approach was made clear on the agency's website, which stated, 'We only employ the most caring, considerate and empathetic CareGivers – people to whom we'd trust with our own parents.'

The agency had clear values which were known and promoted by staff at all levels. Staff told us they understood the agency's values and shared the management team's commitment to providing high quality person-centred care that exceeded people's expectations. One member of staff said, "It is very clear what is expected from you in terms of values." In the 2017 staff survey 97% of care workers reported they were proud to work for the agency and 94% said they felt motivated to do more than was required of them. Comments made by staff included, "Home Instead has the same caring values as I do", "I believe in what they want for

the clients and good person-centred care. They are friendly, caring and understanding of the people we support. They look after their staff, they have good policies and procedures" and, "The training made me understand that Home Instead was different and the values of the company."

The management team carried out regular spot checks to ensure that staff continued to demonstrate the agency's values in their day to day work. Each care worker received a spot check every three months, which checked they arrived on time, dressed appropriately and had received all the training they needed to meet people's needs. Spot checks also checked that staff treated people with respect and provided all the care detailed in their care plans. The managing director told us that staff were always given feedback about their performance, usually immediately afterwards but at a formal supervision if concerns had been identified.

Staff reported that their managers demonstrated the agency's values in their own performance. In the 2017 staff survey 94% of care workers said the owners and managers 'lived the organisation's values'. One member of staff commented, "I love the fact that the managers/owners of the business put themselves out to provide extra services to our clients. Generally our clients feel very special, that in my opinion is priceless. I'm proud to be part of the team." Another member of staff said, "I am loving it here. They are very client-focused and very well organised." Another member of staff told us, "Home Instead standards are high, which is what I like about this company." In the 2017 staff survey one care worker commented, "I love my job, being a CareGiver is wonderful and working for a company that goes the extra mile to make sure we have enough support to do a great job makes it even better."

The management team provided the support staff needed to provide outstanding care. The managing director told us, "We have an open door policy and the CareGivers feel very confident in coming in and speaking to any of us." The recruitment and training manager said, "CareGivers can come into the office any time or we'll go and see them if they need support." Staff told us the agency's managers valued them for the work they did and enabled them to do their jobs to a high standard. One member of staff said, "I love working here. We are treated well. [Managing director] is brilliant. The support they provide makes it hard not to be the best you can be." Another member of staff told us, "All the managers are very helpful, we can speak to them any time. They call us regularly just to ask how it's going." A third member of staff said, "It's very well run. Everything is done very professionally. There is always someone on the end of the 'phone if you need them. We have meetings where we recap on things like safeguarding and medication. They are quick to pick up where things could be improved."

In the 2017 staff survey 97% of care workers said the agency was effectively managed, well run and they would recommend it as a great place to work. Comments made by staff included, "I love my job. The office and management are always there to listen to worries or questions, they are also very supportive. I feel like I'm making a difference", "The role is rewarding and my managers and colleagues are wonderful. There is a warmth, a family feeling" and, "I have always been happy with the office response if I have asked for advice. They are very considerate. They really try and accommodate us. They never trivialise anything we ask. They are very approachable."

The management team organised events that were available to people receiving care but also benefited people in the local community who did not use the agency. For example the managing director had been contacted in 2016 by a charity that was no longer able to provide services for people living with dementia. The agency had taken over the running of a dementia café and a choir for people living with dementia. The agency paid its staff paid to run these projects but made no charge to the people who attended. The managing director had established a regular dementia-friendly church service and planned to establish a local support group for people diagnosed with early onset dementia. Relatives were able to attend dementia training provided by the agency at no cost, which helped them to understand their family

member's condition and ways in which they could support them.

The agency had established effective working relationships with other professionals involved in people's care, including GPs, district nurses, occupational therapists and agencies providing live-in care. The professionals we contacted told us the agency was well managed and maintained high standards of care and professionalism. One professional said, "[Managing director] and her team were easy to work with, ensuring excellent communication between the two businesses and the carers and clients/families. We were always able to troubleshoot any problems by working together ensuring the best possible outcome for the clients in our combined care." Another professional told us, "They go the extra mile and they really do make a difference, not only to their clients and carers but also to other professionals they come into contact with. For me, the question I always ask myself is, 'Would I let them care for my Mum?' and the answer is 100% yes, I would trust them entirely!"

There was an established management team that comprised two directors, a care manager, a care co-ordinator, a compliance manager and a recruitment and training manager. The office team managers were supported by two full time administrators. The agency's management systems ensured that people's care was well planned and monitored. Real time monitoring software enabled the care co-ordinator to know when care workers arrived at and left people's homes. Managers could access this monitoring system remotely, which meant they could assure themselves people's care was being provided effectively at all times. A member of the management team was always available by telephone to people who used the service, their relatives and staff, including out of office hours.

People who received care, their relatives and staff were encouraged to give their views about the agency. The management team engaged an independent consultancy to distribute and collate annual satisfaction surveys. The responses to the 2017 surveys provided positive feedback about the agency, with many people highlighting the caring and responsive approach of staff. 97% of respondents reported that they would recommend the agency to others. People also received visits and telephone calls from the management team to check they were happy with the care they received. We saw that these checks were carried out regularly. People were invited to comment on all aspects of the service they received, including whether their care workers were professional, caring and treated them with respect. The managing director told us people received a minimum of four quality checks each year, one of which was a full review of the person's care package. The managing director said checks were carried out more frequently when people began to use the agency to ensure the care plan that had been drawn up was meeting their needs.

The agency's quality monitoring systems ensured people received safe and responsive care that met their individual needs. The management team took collective and individual responsibility for quality assurance. Members of the management team were each responsible for monitoring key aspects of the service, such as assessments, care planning and staff training, which ensured accountability for performance. The electronic monitoring system implemented by the provider was an effective tool in ensuring people's care was well planned and managed. The management team were alerted if staff had not arrived at a scheduled visit, which eliminated the risk of missed calls and enabled the care co-ordinator to respond to and manage the situation. The management team were also alerted if a care worker had not completed all the tasks outlined in a person's care plan, which reduced the risk of incidents such as medicines errors.

The Home Instead head office carried out an annual quality audit of the service. This audit was comprehensive and checked key elements of the service, for example that staff had been recruited appropriately and received the training and support they needed to do their jobs. The audit also ensured that people's care plans were up to date and that staff practice reflected best practice guidance and the agency's policies and procedures.

The records we checked in the agency's office relating to people's care were accurate, up to date and stored appropriately. Care staff maintained daily records for each person in their homes, which recorded the care they received and any medicines they took. Relatives told us the records maintained by staff were clear, comprehensive and accurate. One relative said, "They log all their visits and keep good records." Care records were audited each month by the management team to ensure that the quality of recording was appropriate. Statutory notifications of significant events had been submitted to CQC where necessary.