

Everycare (Wessex) Limited

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Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Outstanding ☆
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Everycare (Wessex) is a domiciliary care agency which provides support to people in their own homes. It operates in Dorchester and surrounding areas. The service provides care and support to people with a variety of needs including dementia, mental health and physical disability. The service also provides nursing support and respite care.

Not everyone who used the service received personal care. 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. At the time of the inspection 53 were receiving personal care from the service.

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

People who received care and support from Everycare (Wessex) said they were very happy with the service provided. Everybody said the staff went above and beyond what was expected of them. People told us they felt safe with all the staff who supported them. There were clear risk assessments which meant care was provided in a way that minimised risks.

People received care and support that was extremely personalised to meet their individual needs. People and their relatives were at the centre of planning their care and support. The management team carefully matched people's needs, preferences and interests to care staff to ensure the best possible care and support was delivered.

The registered manager went the extra mile in ensuring people had opportunities to develop relationships and avoid social isolation. For example, tea parties had been arranged and people were supported by carers to attend. Photos around the office and people told us they had enjoyed these social events. Following the success of the tea parties, the registered manager told us, "We have been instrumental in setting up localised social hubs for existing and potential clients, families, friends, professionals, staff and the wider community to have informal get-togethers".

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.

The culture of the service was very caring and focused on ensuring people received person-centred care that met their needs in a timely way. It was evident staff knew people well and put these values into practice.

The service understood the importance of supporting people to make day to day decisions and choices.

Assessments of their care and support were detailed. Information was regularly reviewed which ensured it remained up-to-date, ensuring people's diverse needs were met. People had a rota telling them which staff to expect and at what time. People told us staff were punctual and stayed for the allotted time. Changes in people's needs were circulated to staff via mobile phones, this meant any new care instructions were immediately available.

The service had an effective out of hours system in place over 24 hours. A contingency plan was in place to ensure the service kept running through adverse weather conditions or during staff sickness.

Everycare (Wessex) worked hard to help address loneliness for people living alone at home. They aimed to support people to live full lives. The service had a strong person-centred culture. Relatives of people supported by the service told us staff were very focused on helping their relatives to increase their wellbeing.

The service had implemented safe systems and processes which meant people received their medicines in line with best practice. Staff had received training in medicines administration and had their competency assessed.

People received care and support in line with their needs and wishes because sufficient numbers of staff were employed. There were contingency plans in place if staff were unable to carry out their visits. Staff were well trained and had a good knowledge of the needs and preferences of people which enabled them to provide personalised care. Staff noticed changes in people's needs and reported them effectively.

Members of the senior team of Everycare (Wessex) have been involved in a number of initiatives and projects aimed at sharing best practice and supporting care providers to stay up to date.

The service regularly sought the views of people. The management team continued to consult with people about their care and about the service. People and staff were empowered to voice their opinions, and the management team always responded to comments put forward.

The registered manager demonstrated an excellent understanding of the importance of effective quality monitoring. The systems in place enabled checks of the service provided to people and to ensure they were able to express their views, so improvements could be made. There was a high level of satisfaction with the service. Staff were proud to work for the service and felt valued for their work. A positive culture was demonstrated by the attitudes of staff and management.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

The last rating for this service was Good insert date last report published (24 February 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

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

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Everycare (Wessex) Limited on our website at www.cqc.org.uk.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Everycare (Wessex) Limited

Detailed findings

Background to this inspection

The inspection

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

Inspection team

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

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes. This includes older people, people living with dementia and people who may have physical disabilities.

Notice of inspection

We gave the service three working days' notice of the inspection site visit to ensure someone would be available in the service office when we inspected. The location office site visit took place on 30 September 2019, and visits to people's homes took place on 1 October 2019.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We reviewed the last inspection report. We used all this information to plan our inspection.

During the inspection-

We spoke with six people who used the service and seven relatives. We spoke with the registered manager, acting nurse manager and nurse manager. The care coordinator and six staff members and the training

manager. We visited three people's homes. We met with one person who used the service at the office. We reviewed the care records and medication records for six people who used the service. We reviewed records of accidents, incidents, compliments and complaints, staff recruitment, training and support as well as audits and quality assurance reports.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe being supported by the service. People were safeguarded from abuse and neglect. Staff understood what actions to take to protect people.
- Staff received training in how to raise concerns, and told us they were confident to do so, knowing the service would take action.
- People and their representatives were supported to be involved in the service to ensure their individual circumstances were met. Staff had developed positive relationships with people, to ensure they remained safe, and challenged risk.

Assessing risk, safety monitoring and management

- Support was delivered in ways that supported people's safety and welfare. Assessments were in place to identify risks from people's care, their home environment and healthcare conditions.
- Changes in people's needs were circulated to staff via mobile phones, this meant any new care instructions were immediately available.
- Staff were aware of how to report any changes to people's needs and could call for additional support from the office at any time. The registered manager told us, "We tell staff they are our eyes and ears if they report back to us we can get the right support. I always know there is someone out there for advice such as safeguarding teams".
- The service helped people to live well at home and reduce risks to their health. People told us they felt staff managed their support well. One relative told us, "We have a sling to lift and hoist (loved one) on to the bed. They are trained and know how to use the equipment. We are very satisfied with them all."
- Home environment risks were identified and managed. A current initiative undertaken by the service had involved supporting people with fire safety in their homes. For example, the service worked with the local fire service to complete risk assessments in people's homes, including a request to GPs to review flammable emollients to reduce risks. Where needed people were supplied with new fire alarms and fire blankets. A staff member gave an example of supporting a person with poor hearing, they told us they worked closely with the fire service and the person now has a vibrating alarm under their pillow linked to the fire service. The service had also recently worked with the Gas Safe Charity, to raise staff awareness of carbon monoxide poisoning within homecare through workshop training.

Staffing and recruitment

- People each had a rota telling them which staff to expect and at what time. People told us staff were punctual and stayed for the allotted time. If staff were delayed, people told us they were contacted by

telephone. There had been no missed visits. One person told us the staff were "100% reliable."

- The service had safe systems for recruitment, including the taking up of references and disclosure and barring service (police) checks. This helped ensure only people of suitable character were employed.
- There were sufficient staff to ensure people received their care on time. The care coordinator told us, "We have a waiting list for clients, we are advertising for more staff, but we don't take on any new packages of care if we don't have the staff to cover safely."
- The service had an effective out of hours system in place over 24 hours.

Using medicines safely

- Where people received medicines as a part of their care support this was done safely. Staff had received training in medicines administration and had their competency assessed.
- Medicine administration records or MAR were completed by staff for each administration. We reviewed five people's medicine records and noted some gaps in the records. These errors had been identified by the service and action was being taken to address the concerns. The acting nurse manager told us, "All staff have been informed of the importance of maintaining records". New MAR charts were being set up to mitigate any future risks.
- People told us they were happy with the support they received to take their medicines. To support people to keep their medicines safe, the service had introduced locked medication boxes. This helped to mitigate risk of over medicating or misplacing medication.

Preventing and controlling infection

- People were protected from infections. Staff told us they had received training in infection control and had a plentiful supply of gloves and aprons available to them.

Learning lessons when things go wrong

- The management team were keen to develop and learn from events. There were ongoing systems in place to monitor and learn from incidents and accidents. Records kept were of good quality and overseen by managers who monitored for any themes or patterns to take preventative actions. The registered manager told us, "We are promoting a very open and transparent culture, we're human, at times we will all make mistakes. All we ask is that staff tell us, and we will sort it out. This has resulted in staff being very good and flagging up if they see something that is not right."
- Where there had been errors with medicine records these were quickly found and resolved to keep people safe.
- Contingency plans were in place to ensure the service kept running through adverse weather conditions or during staff sickness. We heard about measures staff had taken to support people during the previous year's snowfall, including walking miles to ensure people were safe, and had a hot meal.

Is the service effective?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed, and a care plan drawn up before people received a service.
- People told us they received consistently effective care from care staff who had been matched to meet their needs. They spoke of their enjoyment of the company of staff who shared similar interests to their own. This was very important to people who told us they developed confidence in their staff. A person told us, "I am extremely happy with Everycare (Wessex). I have regular carers. I can't overstate how good they are". A health professional told us, "I have found Everycare (Wessex) to be very reliable in their visits and ongoing care to our patients. They do get to know individuals well and personalise the care they provide in my opinion. They do strive to maintain continuity of care and try to retain care packages for patients".

Staff support: induction, training, skills and experience

- People were supported by staff who had received a full induction into the service. The service had a training officer who ensured all new staff received an induction into the service. The registered manager told us, "We've learnt to be more flexible with our induction and put together a bespoke induction programme". Staff confirmed that the induction process was effective.
- People received care and support from staff who knew them well and understood how to support them. Following their induction all staff completed the care certificate. This ensured that staff had the right skills and competencies, knowledge and qualifications to carry out their roles.
- Staff told us that they felt supported and received appropriate training and supervisions to enable them to fulfil their roles. One member of staff told us, "We have refresher training, but there are also opportunities to develop in the service."
- People were supported by staff who were committed to the service and had worked for the provider for many years. In recognition of this the provider had introduced a long-term service award to reflect the dedication and commitment shown by staff.
- In addition to the mandatory training, the service sourced and invited guest speakers to their staff meetings. The registered manager told us this had led to better outcomes. For example, staff were more confident to support people with complex needs. An example was shared in regards transporting and facilitating one person's attendance and participation at one of the service's social events. The registered manager told us, carers were more confident following training supporting people effectively on issues experienced by them, such as hearing aids, being able to better diagnose what may be wrong and assisting in cleaning those devices properly.

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

- Some people required staff to support them with food and drink. Staff had been provided with training on food hygiene safety and told us they were confident they had the time to support people effectively.
- People and their relatives told us they received support from skilled staff, who helped them to maintain a balanced diet. The registered manager informed us the nurse manager had achieved assistant dysphagia practitioner certification. This training included a practical thickening and tasting session for staff.
- Where appropriate, the service worked with the Speech and Language Therapists to ensure that people had safe swallow plans and menus in place where required. People told us they received effective support in regards eating and drinking. Comments included: "When the weather was hot they always asked if we were drinking enough". "They always make sure I drink enough." "(Title) is on a special diet because of difficulties with swallowing, so food has to be mashed. The carers will sit and eat with her so it's like a meal time experience, but they are also making sure she doesn't choke".

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

- The service worked with other agencies to help ensure people's needs were met. The service worked closely with the local healthcare staff such as occupational therapists, district nurses and GP's.
- Staff recognised changes in people's health and sought professional advice appropriately.

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

- The service worked alongside local community and medical services to support people and maintain their health. The service raised concerns about people's wellbeing to community services such as the mental health teams or the person's GP, and supported people to attend hospital or other medical appointments if needed. One health professional told us, "Everycare (Wessex) are very proactive at contacting the district nurses, GP or LA when they have concerns or worries about their most vulnerable clients. They are responsive to unusual behaviour suggesting someone may be unwell or have an infection, and have good relationships with family members who also support individuals".

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

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

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

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

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People were encouraged to make all decisions for themselves and were provided with sufficient information to enable this in a format that met their needs. There was a strong emphasis on involving people and enabling them to make choices wherever possible.
- Care plans were developed with people and people had agreed with the content and had signed to receive care and treatment and gave their consent.

- Capacity assessments were completed to assess if people were able to make specific decisions independently. People told us staff always asked for their consent before commencing any care tasks.
- Most people using the service were able to make decisions for themselves. Records showed which people, had appointed Lasting Powers of Attorney (LPA's). This was clearly recorded in people's care plans. Only people with the appropriate legal power had signed consent forms on behalf of relatives.

Is the service caring?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People's feedback told us they received exceptionally high quality, personalised, creative and compassionate care. People, relatives and staff, gave us positive feedback about the caring nature of the service, quality of the staff and thoughtful support they received. One person told us, "They're friendly, purposeful and know what they are going to do. They always ask how I am when they arrive, and I never have any feelings of strangeness. I've never felt embarrassed with them helping me." The service sent Christmas and birthday cards to all people. A person had commented "To receive a birthday card by the office staff was wonderful".
- People's preferred routines were recorded in care plans. This meant staff were able to deliver care in line with people's wishes. One health professional told us, "I have found Everycare (Wessex) to be very reliable in their visits and ongoing care to our clients. They do get to know individuals well and personalise the care they provide".
- The service respected people's diversity. Staff were open to people of all faiths and beliefs. There was no indication people protected under the characteristics of the Equality Act would be discriminated against. The Equality Act is legislation that protects people from discrimination, for example on the grounds of disability, sexual orientation, race or gender. Staff had background information about people's personal history. This meant they could gain an understanding of people and engage in meaningful conversations with them.

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

- Quality assurance surveys were provided to people and their families. The responses to the last survey were very positive and had been audited and responded to. One person had written, "The homecare provided has been extraordinarily kind and supportive of (name). We are certain that her smooth transition into her new home is due to her trust and acceptance of the care provided daily by Everycare."

Respecting and promoting people's privacy, dignity and independence

- Staff were highly motivated and keen to support people to the best of their ability, treating them with dignity and respect. We heard about staff working with people to help them leave their house for the first time in many years. One person told us, "I like going out, the staff who come to see me are like friends. A member of staff told us, "I wear a uniform when in people's home, but when out supporting in the community I wear my own clothes, more natural."

- People appreciated the service's role in helping them to remain independent and valued the relationships they had formed with staff.
- All staff are encouraged to become dignity in care champions and dementia friends and have access to training and support relevant to those aspects of their role.
- Personal information was kept securely in the registered office. Information for care staff was shared in a secure manner via mobile phone alerts.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has now improved to Outstanding.

This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- People using the service each had an individualised plan of their care, drawn up with them and based on an assessment of their needs. People told us their plans were reviewed regularly. One person told us, "Two staff came, and they carried out a deep assessment and went into detail about my illnesses and what I would need." A health professional told us, "Everycare (Wessex) are a very caring and responsive agency that have person centred values. The agency has arranged that all reviews we undertake are with a staff member present, which is incredibly helpful in my role."
- Information on people's needs was available in paper copy in their home. Staff had built positive, caring relationships with people and their families and had an in-depth knowledge of their needs.
- Care plans were reviewed regularly to help ensure they were an accurate reflection of people's needs.
- People had information in their homes which showed when their visit would be carried out and what would be provided for them. They told us they knew about this information and had been involved in the development of the care plan.
- People told us that staff had outstanding skills and an excellent understanding of their individual needs. The registered manager told us they responded quickly to any changes in care required. They said, "Any outstanding issues are discussed and reviewed at weekly meetings, between the managers, nurses and care coordinators. This enables care plans to be updated and needs responded to immediately."

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

- The registered manager went the extra mile in ensuring people had opportunities to develop relationships and avoid social isolation. The service had an activities coordinator who organised activities, such as tea parties, Christmas parties and charity walks. People were supported by carers to attend these social events.
- Photos around the office and people told us they had enjoyed these social events. Comments included, "Just to say how much I enjoyed the spring party, meeting yourselves and also some clients who happened to be friends from many years ago." "Thank you and all your staff for putting on such a splendid tea party. It really was a splendid occasion and allowed those of us who benefit from the service, which you and your staff provide to enjoy one another's company. You have established a really worthwhile service to the community."
- The service had a key role in the local community, and ensured it involved people using the service in their community. One person told the registered manager following the tea party, that 'it was the first time they

had been out for a year to something which wasn't just a hospital or doctor's appointment'. A person's relative said that now (name) had been to one of the parties, it had encouraged them to try a day centre which they had been against considering before. This meant people were being given opportunities and guidance to lead full lives.

- Following the success of the tea parties, the registered manager told us, "We have been instrumental in setting up localised social hubs for existing and potential clients, families, friends, professionals, staff and the wider community to have informal get-togethers. As with other social events, all clients are assisted to the venues and supported by staff. Social events have enabled the staff and clients to have quality time together outside their normal programmed visits".
- The service was actively building links and awareness of best practice supporting people to remain safe and active in their community. For example, training sessions were provided to members of the local community in regards supporting people with dementia . They shared their dementia awareness training with family members and members of the local community. The registered manager told us, "We need to ensure we have dementia friendly towns. It would be great if we could achieve this in Dorchester."
- Professionals told us the service is focused on providing person centred care and support which is achieving exceptional outcomes for people. The service had helped to train 200 people from Dorchester businesses in life saving first aid. One professional told us, "I would describe their approach as being proactive and professional and consider them to be well engaged in the care sector locally , always being keen to learn from others and share best practice. I especially have noted their genuine desire to keep themselves up to date and involve other providers in acquiring this knowledge by, for example, inviting guest speakers to the Care Associations' meetings".

Meeting people's communication needs

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

- People's communication needs were known and understood by staff. Support plans identified people's communication needs, and the registered manager ensured people had access to the information they needed in a format they could understand. This approach helped to ensure people's communication needs were known and met. A member of staff told us, "For people with communication needs i.e. blind. We would go and talk to them and tell them exactly what we are writing down. If they were not able to read it, then we could put the care plan into large print. Their diaries are sent once a week in large print".
- Care plans contained information about the support people might need to access and understand written information. For example, whether they required hearing aids or spectacles. This demonstrated the service was identifying, recording, highlighting and sharing information about people's information and communication needs in line with legislation laid down in the Accessible Information Standard.

End of life care and support

- At the time of the inspection no-one was receiving end of life care from the service, however they had previously provided this care, in conjunction with community healthcare professionals.
- The service was skilled at helping people and their families to explore and record their end of life wishes. An end of life document check list was in place to 'ensure things are not forgotten'.
- Supervisors had received training in Gold Standards Framework and were responsive to supporting people to follow their end of life wishes. One relative told us, "Recently, a person passed away, and one of the people who did a reading at the funeral mentioned the carer from Everycare and said how wonderful they are".
- A health professional told us, Everycare (Wessex) went above and beyond to support someone's wishes to

die at their home. They told us, "Everycare (Wessex) found a live in carer at short notice for a rapidly deteriorating patient earlier this year. This enabled them to die at home and avoid hospital admission. This was positive for the patient but also good for carers to be able to follow the patient through to end of life.

Improving care quality in response to complaints or concerns

- Systems were in place to address any concerns raised. The service had a complaints process in place. Where a complaint had been received the response from the registered manager was very responsive. It stated. ' Whilst I realised we can't change the issues you experienced, I do think we need to review our practice, learning from this experience.'
- Complaints were recorded, and evidence time scales and action taken by the service to resolve the complaint. People told us they were aware of how to make a complaint and felt confidence their complaint would be resolved quickly.

Is the service well-led?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager planned and promoted person-centred, high-quality care and good outcomes for people. This took into account the physical, spiritual and social aspects of a person's life.
- The service had a clear, positive and open culture that was shared both amongst the management team and care staff. Everyone we met told us how 'passionate' they were about providing a high quality and personalised service to people, and people were very much at the heart of the service.
- People and staff told us they would very much recommend the service to others needing care, there was a waiting list for people to receive care from the service. The registered manager had a visible daily presence in the service and led very much by example. They told us one of the organisation's priorities was the importance of treating staff well, with good pay and conditions. There were contingency plans in place if staff were unable to carry out their visits.
- Staff regularly told us how positive they felt to be working with an organisation that shared their personal values about what outstanding personalised care should look like. Staff were highly motivated, and proud of working for the organisation.

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 provider was clear about the role of the Duty of Candour in improving the sharing of information and development of high-quality services.

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

- Accountability within the services structure and staff roles were well understood. Regular staff meetings and events were held:
- The registered manager and director ensured resources were available and working effectively to support high quality care and staff in their roles. For example, there was an effective management team, who provided regular supervisions, spot and competency checks with staff. This allowed for improved staff retention, better communication and induction systems and this ensured greater continuity for people receiving a service. Any issues or feedback about staff performance or concerns were addressed quickly with additional training and support.

- The registered manager had a supportive team of administrators, customer support and training staff. There was an on-call system in place, so people were able to contact someone from the service at any time. There was a robust electronic system in place to enable office staff to check visits had taken place as planned.
- There was a comprehensive quality improvement development plan in place. The plan detailed key areas for future development. Governance was well embedded into the running of the service, and staff were aware of the values and vision of the service. This demonstrated the commitment of the service to continual development and improvement.

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

- The service involved people and their family, representatives and others in a supportive meaningful way. All staff understood the fundamental need to provide a quality service. Professional feedback was positive.
- Everycare (Wessex) encouraged people to live a full life, and to share a diverse range of views which they listened to. The registered manager told us, "We want to provide the best possible care to the clients, I want to make a difference not just with what is in the care plan. For example, one client requested support with their smart phone to make their life easier. We have arranged a local provider to come to the office to show us all how to use the smart phone. Everyone is welcome, it will be another social evening. Social isolation is a key issue we want to push forward. We are organising local hubs where people can meet."
- People and their relatives were involved in the service, and received a newsletter informing them of what was happening within the service asking for ideas and feedback. The registered manager told us that they wrote to all new people joining the service. This was to introduce themselves, enclosing the services information brochure, and information on where to access information. For example, if you are a carer, quality matters guide and a CQC leaflet, "what you can expect from a good homecare agency".
- The registered manager was piloting "Open Doors" wellbeing sessions for staff, which was hoped would enable staff, to better engage on all fronts and learn that considerable support is available within the organisation and from colleagues. They told us, 'Such an approach also encourages the recognition of risk, with staff being empowered and encouraged to speak out about issues of concern to them'.

Continuous learning and improving care

- Opportunities for learning and making improvements were taken at every review or audit, and the office told us they welcomed people's feedback at any time either positive or where there was room for improvement. People told us it was easy to contact the office, and someone was always there at any time to sort out problems or make changes.
- The registered manager attended various forums to help ensure they were up to date with any changes in the sector. For example, attending the Skills for Care network.

Working in partnership with others

- Everycare (Wessex) worked with local community businesses to support them to become more dementia friendly. They hoped this would enhance people's experiences when accessing community facilities.
- The registered manager was a key member of local care organisations, which supported new and existing care services to strive to build seamless experiences for people based on good practice and knowledge. Through learning, consultation, research and reflective practice.
- Local businesses attended training, provided by Everycare (Wessex) at their offices, on how to become a dementia friendly business.
- People and relatives told us the registered manager was visible and known to them and approachable. We saw them to be kind and caring. They knew everyone extremely well including People's relatives. Staff consistently told us of the positive management structure in place that was open and

transparent and available to them when needed.

- The registered manager told us they had an open-door policy and people came with their individual matters, as well as informal conversations that took place ad hoc. In addition to the surveys, reviews, meetings and formal ways of gathering feedback, the service was attentive to involving people in giving feedback. The management team continued to have highly effective oversight of what was happening in the service, and when asked questions were able to respond immediately, demonstrating an in-depth knowledge in all areas.