

St Elizabeth Care Agency Ltd

# St Elizabeth Care Agency

## 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?

Good 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

St Elizabeth Care Agency provides personal care to people who live in their own houses or flats. Not everyone using St Elizabeth Care Agency receives the regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do, we also take into account any wider social care provided.

St Elizabeth Care Agency is a domiciliary care agency and registered to support; older people, younger adults, people living with dementia, people with learning disabilities or autistic spectrum disorder, people with mental health needs, people with physical disability and people with sensory impairment.

At our last inspection on 26 May 2016, we rated the service overall good. The key questions safe effective, caring, responsive and well-led were all rated good. At this inspection on 30 November 2018 we found that the people using the service benefitted from an outstanding caring and well led service. We have rated the service overall outstanding.

This was an announced comprehensive inspection. There were 63 people who used the service and received 'personal care'. The provider was given 48 hours' notice because we wanted to be certain the registered manager and key staff would be available on the day of our inspection.

Excellent leadership and management was demonstrated at the service. The culture was open and inclusive which meant that people received a tailor-made service which was flexible to their needs. People consistently told us how they were treated with exceptional kindness, compassion and respect.

Without exception, people and their relatives were extremely complimentary about their experience of using St Elizabeth Care Agency. They shared with us numerous examples of how their care workers repeatedly went the extra mile to ensure every element of the care provided was correct and how this had impacted positively on their well-being. People described how they trusted and felt safe with their care workers, who knew them well, encouraged them to be independent and consistently protected their privacy and dignity. Everybody we spoke with said that they would highly recommend the service.

The registered manager demonstrated how their robust quality assurance systems had sustained continual development and improvement at the service. They were clear about their expectations relating to how the service should be provided and led by example. They were fully supported by care workers and an office management team that were passionate and committed to delivering high quality person-centred care to people. Morale was extremely high within the service, staff described being proud to work at St Elizabeth Care Agency.

People were supported to have maximum choice and control of their lives and care workers supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People's care records were comprehensive, accurate and reflected the care and support provided.

Systems were in place to minimise the risks to people, including from abuse, and in relation to mobility, nutrition and with accessing the community. Care workers understood their roles and responsibilities in keeping people safe. Where people required assistance to take their medicines arrangements were in place to provide this support safely.

Effective systems had been established to reduce the risks of cross infection.

Recruitment checks were carried out with sufficient numbers of care workers employed. They had the knowledge and skills, through regular supervision and training, to meet people's needs.

The service continued to provide people with a responsive service. People received care that was assessed, planned and delivered to meet their individual needs. People's care records were accurate and reflected the care and support provided. Where required there were systems in place to care for people at the end of their lives.

The service worked in partnership with other agencies. Where care workers had identified concerns in people's wellbeing there were effective systems in place to contact health and social care professionals to make sure people received appropriate care and treatment. Where required, people were safely supported with their dietary needs.

People's feedback was valued and acted on. The service had a robust quality assurance system where shortfalls were independently identified and addressed. As a result, the quality of the service continued to develop.

## 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 continued to be safe.

Systems were in place to help protect people from the risk of abuse and avoidable harm.

Risks were identified and reviewed in a timely manner.

There were sufficient numbers of care workers who had been recruited safely to meet people's needs.

People received their medicines in a safe and timely manner.

Care workers had received training in infection control and food hygiene and understood their responsibilities relating to these areas.

### Is the service effective?

Good ●

The service continued to be effective.

Care workers received regular supervision and training to support them to perform their role.

The service worked with other professionals to provide people with a consistent service.

Where required people were safely supported with their dietary needs.

People continued to be supported to maintain good health and had access to appropriate services.

People were asked for their consent before any care, treatment and/or support was provided.

### Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Care workers were remarkably kind, caring and highly compassionate. They actively encouraged and promoted

people's independence and consistently treated people with dignity and respect.

People's views on their care was actively encouraged and they were offered choice and had control over their care and support.

### **Is the service responsive?**

**Good** ●

The service continued to be responsive.

People and relatives fed back about the high standard of care provided from care workers, who had the time and ability to meet their needs in an individualised way.

People and their relatives, where appropriate, were involved in contributing to the planning of their care and support.

People's care needs were regularly reviewed and care packages were adjusted promptly if necessary.

People's feedback was valued and used to improve the quality of the service.

### **Is the service well-led?**

**Outstanding** ☆

The service was exceptionally well led.

Dynamic leadership was evident. The registered manager promoted the highest standards of person-centred care and support for people; delivered by a passionate and motivated workforce.

There was an open, inclusive and transparent culture at the service. Care workers were fully supported by the management team and understood their roles and responsibilities.

# St Elizabeth Care Agency

## Detailed findings

### Background to this inspection

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

Inspection activity started on 30 November 2018 when we visited the office premises and ended 13 December 2018 when we gave feedback to the registered manager.

This was an announced, comprehensive inspection carried out by one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of service. They assisted us with telephone interviews of people who used the service and relatives where appropriate.

The provider was given 48 hours' notice because we wanted to be certain the registered manager and key staff would be available on the day of our inspection visit.

As part of our inspection planning, we requested that the provider complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. This was received from the provider. We also reviewed information we held about the service including feedback sent to us from other stakeholders, for example the Local Authority, Healthwatch and members of the public. Providers are required to notify the Care Quality Commission (CQC) about matters relating to people's safety and the running of the service. We reviewed the notifications the provider had sent us.

The inspector visited the office location on 30 November 2018 and spoke with the registered manager, the deputy manager and four care workers. We reviewed the care records of six people to check they were receiving their care as planned. We looked at records relating to the management of the service, staff recruitment and training, and systems for monitoring the quality of the service.

On 7 December 2018, the inspector and expert by experience carried out telephone interviews and spoke to

twelve people who used the service and six relatives. We also received electronic feedback from fifteen relatives, five members of staff and nine community professionals.

## Is the service safe?

### Our findings

At our last inspection of 26 May 2016, the key question safe was rated as good. At this inspection the rating for safe continued to be good.

People told us that they felt safe and at ease with their care workers. One person said, "I do feel safe with all my carers. I am treated as if I am their Grandma, they are very kind and nothing is ever too much trouble to them." Another person said, "I feel safe because of how I am treated by my carers. They are all so friendly and they all know exactly what I need them to do without being told." A third person commented, "My carers do what they say they will and come when they say they will come. I feel safe at all times." A relative told us, "I don't live far away from my parents but I needed some help for them, I can't fault anything about St Elizabeth's Care Agency from their timekeeping to seeing one of my parents is off colour, and taking appropriate action to ensure their wellbeing."

The service continued to have systems in place designed to minimise the risks to people in relation to avoidable harm and abuse. Care workers were provided with training in safeguarding people from the risk of abuse and they understood their roles and responsibilities including how to report concerns.

Risks to people's safety continued to be well managed. Care workers were aware of people's needs and how to meet them. People's care records included risk assessments which identified how the risks in their care and support were minimised. This included risk assessments associated with moving and handling and risks that may arise in the environment of people's homes. People, who were vulnerable because of specific medical conditions had clear plans in place guiding care workers as to the appropriate actions to take to safeguard the person concerned. This helped to ensure that people were enabled to live their lives as they wished whilst being supported safely and consistently. Care workers told us and records seen confirmed that the risk assessments were accurate and reflected people's needs.

There were sufficient numbers of care workers to meet the needs of people. The registered manager explained how they did not take on care packages unless they were assured they had the sufficient number of care workers to provide the care required. They told us that regular spot checks continued to be carried out to check care workers were competent. The service had maintained robust recruitment procedures to check prospective care workers were suitable to work in the service and of good character.

People and relatives told us that the care workers visited within the timescales agreed at the start of the care provision and at ongoing care reviews. Wherever possible, people were provided with regular care workers to support continuity of care. One person told us, "I am safe because I always have the same carer and she has got to know me really well." Conversations with people, relatives and records seen showed that there had been few visits in the last 12 months that had been late or been missed. Where unexpected missed or late visits had occurred, the records showed that the cause had been addressed and people were informed. One person said, "My carers are so dependable and reliable. I don't think I have ever had a late call."

There were suitable arrangements for the management of medicines. Most people administered their own

medicines and there were processes in place to check that this was done safely and to monitor if their needs had changed or if they needed further support. One person said, "I need some help with my pills they [care workers] get me a drink to take with my tablets and afterwards write everything down."

Medicines administration records (MARs) were appropriately completed which identified that people were supported with their medicines as prescribed. People were provided with their medicines in a timely manner. Where people had medicines to be administered 'as required' protocols were in place to guide care workers on when to offer these.

Care workers were provided with medicines training and had their competency checked regularly by the management team. MARs were audited to ensure any potential discrepancies were identified quickly and could be acted on. This included additional training and further support for care workers where required.

People continued to be protected from the prevention and control of infection. They told us that care workers always used personal protective equipment (PPE) such as disposable gloves and aprons when needed. Care workers confirmed they had access to PPE and told us they received training in infection control and food hygiene and understood their responsibilities relating to these areas.

Incidents had been recognised and action was taken to make improvements. The registered manager was open and transparent in communication. Although no recent concerns had been reported, the registered manager said if any occurred they would review the actions they had taken to improve the quality and safety of the service provided to reduce the likelihood of them happening again. Care workers and office staff demonstrated an understanding of accident and incident reporting procedures. We saw examples of investigations completed by the registered manager, after an incident had occurred. The registered manager shared investigation outcomes with the staff team and implemented changes to practice where possible to prevent risk of reoccurrence. In addition, the registered manager shared with us information which they had been recording since their last inspection. This had details on improvements that the service had made, which was not necessarily identified by structured audits and incident responses. □

## Is the service effective?

### Our findings

At our last inspection of 26 May 2016, the key question effective was rated as good. At this inspection the rating for effective continued to be good.

People's care needs continued to be assessed holistically, in line with best practice and current legislation. The management team ensured people had a current care plan in place. This is documentation of people's care needs and wishes. It is stored in both the person's home and a copy held in the office. The care plan provided clear directions to care workers on how to meet people's recognised needs and wishes. They were created with involvement from people and other related health and social care professionals to respect people's needs and rights and to ensure people's needs were consistently and effectively met. One person told us, "From day one, the care has always been delivered correctly; at the times we agreed and in the way, we specified. No detail has been overlooked; they [management team] listened and made it happen. This was important to both my [family member] and I. It has been a seamless process. I am very impressed."

Care workers told us they felt supported and were provided with the training that they needed to meet people's needs. This included an induction before they started working in the service which consisted of the provider's mandatory training such as moving and handling, medicines and safeguarding. This was updated where required. In addition, care workers received training in people's diverse needs and conditions to meet the needs of people they cared for. This included catheter and stoma care, pressure care and diabetes. One care worker said, "I am very happy in my job. Training is provided and it's very good."

Records and discussions with care workers showed that they continued to be encouraged to achieve qualifications in care. They received regular supervision, had their competency routinely checked and had a yearly appraisal. These provided care workers with the opportunity to discuss their work, receive feedback on their practice and identify any further training needs they had. Care workers described being able to speak to management whenever they needed to. One care worker said, "It is an open door at the office. You don't have to wait for a formal 1:1 supervision or an appointment to speak to management. If you have a question you can call the office and a manager or supervisor will ring you back. You're made very welcome if you pop into the office on the off chance to speak to someone."

The service continued to support people to maintain a healthy diet. Where care workers identified concerns, for example, with people maintaining a safe and healthy weight or if people were at risk of choking, they contacted relevant health professionals for treatment and guidance. Where guidance had been provided relating to people's dietary needs, care workers followed the instructions and recorded this in people's care records to document how risks were reduced.

People continued to be supported to maintain good health. One person told us, "My condition changes from hour to hour and because of that I need people to know what they are doing and my carers certainly do that." Conversations with care workers and records seen demonstrated that the care workers or office staff sought advice or support from health professionals when they had concerns about a person's wellbeing. One relative told us, "If the carers are at all concerned about my mum and dad they let the staff in

the office know and they always ring to tell me."

Where required the service continued to work with other professionals involved in people's care to support a coordinated approach and individual needs were met. Information in people's records was made available to support people in transition to other care services, for example if a person was admitted to hospital. One community professional told us, "I have a number of young people and families who are supported by St Elizabeth Care Agency and I only receive exceptional feedback about the care and support provided." They added, "Staff are well trained and very knowledgeable about the conditions people have."

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

Care workers and the management team demonstrated a good understanding of the MCA and what this meant in the ways they cared for people. Conversations and records seen confirmed that care workers had received training in the MCA. Guidance on best interest decisions in line with the MCA was available in the office as well as in the employee handbooks.

People told us they were always asked for their consent before care workers delivered care to them, for example, with personal care or assisting them with their medicines. One person said, "They ask me if I am ready to have my cream applied on my legs." A relative told us, "The carers are always asking my [family member], is there anything more you need. Are you happy with everything?"

## Is the service caring?

### Our findings

At our last inspection of 26 May 2016, the key question caring was rated as good. At this inspection we received a high volume of feedback from people, relatives and professionals repeatedly describing the quality of care provided as excellent. People told us they were consistently treated with compassion, empathy, dignity and respect. The rating has improved to outstanding.

People had developed extremely positive and caring relationships with the care workers who supported them. This was reflected in the exemplary feedback we received. People were full of praise about their care workers whom always treated them with respect and kindness. One person said, "I am given a brilliant service by all my carers, they are so caring towards me." Another person told us, "My carers are thoughtful and compassionate and they really care about me. I am sure of that." A third person added, "The carers who come to me are all I could wish for, kind, caring and they have become good friends." A fourth person told us, "I have wonderful carers who come to look after me. They are always professional but never lose their caring and compassionate nature. They treat me as a human being and I look forward to them turning up."

Without exception feedback from relatives about the approach of the care workers was equally complimentary. One relative commented, "It was very difficult to introduce help into my parent's life and due to the patience and kindness of all the staff, we managed really well and now I think without their help both my parents would really miss all the carers." Another relative who did not live locally said, "The standards are very high at this agency. The carers are first rate and both my parents and I have developed a fantastic relationship with them. They always put [family member's] needs first and frequently do go above and beyond the call of duty. They think of the practical essential things like getting a pint of milk in if they spot they have run out, just so they can have their bedtime drink, to making sure arrangements are in place to help my parents to be safe at home."

In addition to the relatives we spoke with we also received 15 emails from relatives sharing with us uplifting examples of exemplary care their family members had experienced and the positive impact it had made. One relative stated, "The compassion and care the carers and care agency managers show towards my father and my family is outstanding. Due to my father's dementia he often swears or is grumpy. The carers take time sitting with him, reassuring him in a calm and gentle manner and my father responds because they are so kind. Despite his advanced dementia my father has the best quality of life possible with the help of the carers. The carers have become part of our family as they care for us as if we were family."

People were involved with developing their care plans and ongoing arrangements. Care plans effectively identified what people liked and was important to them so that their care and support was centred around this. This had contributed towards the enhanced understanding of people's individual needs and preferences that the care workers had. One person said, "I have been fully involved with everything to do with my care arrangements. I've been very satisfied with how effortless it was to get everything set up. Everyone is easy to talk to at St Elizabeth's, whether they're a carer, office worker or management. They don't hide behind jargon and truly put your needs first. They asked me what I wanted and needed and made it happen. All the little things from how I like to be addressed to how I take my tea."

Emphasis was placed on ensuring people were assigned the right care worker, taking into consideration different personalities and preferences. People and relatives said the systems in place were highly effective and this had led to them forming long lasting relationships with their care workers. Several people described their care workers as 'friends' or 'extended family'. One person commented, "It's as though the manager has looked at the carers and matched them up with me as a person not as someone who needs care, brilliant!" Another person told us, "I have been having carers for two years now and I have never been disappointed with any of the carers that have been to my home to help me." A third person added, "The manager knows how important my dogs are to my well-being so I am sure they send care staff who are dog lovers. The dogs can tell you know." A relative described the matching of care workers to people as an, "Excellent part of this agency – they strive to make sure that the person and carer are compatible and the person is happy."

Respecting and promoting people's privacy, dignity and independence was at the heart of the service's culture and values. The office staff, care workers and registered manager spoke about people with consideration and affection. They understood why it was important to respect people's dignity, privacy and choices. People described numerous examples of how the care workers enabled and supported them to make choices in their daily lives and to do as much for themselves as possible. One person said, "It used to get me down how little I could do on my own. As you get older you rely on other people and I hate being beholden to others. The carers are ever so kind and patient with me. They focused more on what I could do instead of what I couldn't. With their help I am gradually getting more independent." Another person said, "The carers are sensitive and have great empathy and understanding of my situation. Any personal care is done with total professionalism and compassion. They preserve my dignity and treat me respectfully." People's records provided guidance to care workers on the areas of care that people could attend to independently and how this should be promoted and respected.

The registered manager shared several examples with us of where they had worked closely with people, their relatives and other health and social care professionals, to ensure the person received compassionate care tailored to their individual needs. This included attending meetings to discuss strategies where concerns had arisen about a person's health and wellbeing. A community professional fed back to us about working in partnership with the service, "St Elizabeth Care Agency is, in my opinion, the best agency I have employed to support young people, I feel confident that when I recommend them to support a family that they will deliver what the young person, parent/carer and myself are seeking to achieve. They provide a service which is person-centred, all the staff are very caring and decided." Another professional commented, "Their reputation for providing older people and those with dementia with high quality care is well deserved." Healthwatch Suffolk shared with us a comment they had received about the service which described the care workers as being kind and always going the extra mile.

There had been multiple compliments received about the service within the last 12 months. Themes included 'high-quality care', singling out care workers for their empathy and understanding and supporting families during difficult times.

## Is the service responsive?

### Our findings

At our last inspection of 26 May 2016, the key question responsive was rated as good. At this inspection the rating for effective continued to be good.

People told us they continued to receive quality care and support that was responsive to their needs. One person described their positive experience saying, "I do think my care is person focused as I am treated as an individual by all the staff." Another person commented, "I don't like meals that are cooked in a microwave so one of my weekly calls is to help me prepare my vegetables for my main meal over the weekend. My carer and I are a really good team, it's a bit of a social event for me." A third person told us, "My carers are very practical and adapt to my needs so easily. Each day is different some days are harder than others and I need more help. My carers quickly assess how I am and adapt the routine accordingly."

Relatives were equally favourable about how the service responded to people's needs. One relative commented, "If [family member's] tablets don't come when they should, the carers are chasing this up with the pharmacy as they know the tablets must be taken daily. If they notice a change to [family member] and they are concerned they act quickly to call the doctor and let me know. I appreciate this as I don't live locally." Another relative shared with us, "The carers are diligent and conscientious, they always stay the allocated time and on occasions stayed a bit longer to make sure [family member] is okay if there has been an unexpected [personal care] situation."

The service continued to ensure people were actively encouraged and enabled to pursue their hobbies, participating in meaningful activities to support them living as full a life as possible. One person said, "I only have one visit a day and most of the time it's to help with my activities. I have a small group of carers and they are all brilliant, it's like having my friends looking after me."

The service continued to ensure that people's care records identified how the service assessed, planned and delivered person centred care. People had an up to date version of their care plan in their homes. People's care records were detailed, kept under regular review and a version held securely in the office. People's care records covered all aspects of an individual's health, personal care needs, risks to their health and safety, and personal preferences. There were clear instructions for care workers for when a person needed assistance and when to encourage their independence. There were also prompts throughout for the care workers to promote and respect people's dignity.

People and relatives told us that they knew how to make a complaint and that details about how they could raise complaints had been provided. One person said, "What is there to complain about I couldn't ask for better care." Everyone we spoke with told us that they had not needed to complain as any comments or concerns they made were acted on straight away. They said they were confident that if they made a complaint it would be dealt with properly."

No one at the time of our visit was receiving palliative care. However, care records showed that the service had sought the wishes and preferences of people including if they wanted to be resuscitated and these were

kept under review. Care workers were able to tell us how they would ensure that a person had a comfortable and pain free death. The registered manager advised us they were planning further training and support to staff on advance care planning (ACP). ACP is used to describe the decisions between people, their families and those looking after them about their future wishes and priorities for care. They added that bereavement training for all staff to support them whilst they are supporting others was also being developed as would working more closely with St Elizabeth Hospice to which they are affiliated.

## Is the service well-led?

### Our findings

At our last inspection of 26 May 2016, the key question well-led was rated as good. At this inspection we found excellent leadership and management fully embedded in the service. People experienced a bespoke care service that exceeded their expectations and one they could trust and rely on. The workforce overwhelmingly described feeling supported, respected and valued by the management team and were committed to providing people with the highest standards of care. Therefore, the rating has improved to outstanding.

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

The registered manager continued to be a visible and effective presence in the service and acted appropriately when errors or improvements were identified. They demonstrated how lessons were learnt and how they helped to ensure that the service continually improved. Care workers and the office team understood their roles and responsibilities and how they contributed towards the provider's vision and values of delivering, "High quality, tailor-made services to people, living in their own homes in the community."

Feedback from people, relatives, staff and community professionals spoke highly of the registered manager's influence and leadership within the service. This was confirmed in our observations where we found they had embedded a positive, inclusive, open and transparent culture, focusing on delivering exceptional care. People experienced a service that went above and beyond their expectations and was dependable. People told us the registered manager supported by the office team were always available and approachable. One person said, "The management is superb. They provide the reassurance you need especially in a crisis. They are unflappable and calm. They always ring you back and do their utmost to help you." Another person said about the service they received, "They are all amazing from the office to the carers to the management. Amply skilled at what they do and more than capable of meeting my needs. I want for nothing."

We received a high volume of feedback from relatives celebrating the quality of the service. Fifteen relatives emailed us in addition to the six relatives we spoke with. Without exception relatives' feedback was overwhelmingly full of praise for the consistently reliable service that provided family members with empathy and high-quality care. One relative commented, "The management are excellent." Another relative added, "Although I visit 1-2 times a week it is difficult living 50 miles away, it is a great comfort to know [family member] is being visited by a responsible care agency and carer. The management have been very proactive to ensure he is visited by the same carer and have put in place a known person as reserve help if required." A third relative commented, "I couldn't recommend St Elizabeth's Care Agency highly enough. In my opinion they provide a first-class service and are an example to the profession."

People and where appropriate their representatives were regularly asked for their views about their experience of using the service. This included opportunities through regular care review meetings, telephone welfare calls and quality satisfaction questionnaires where people could share their experiences about the service they were provided with, anonymously if they chose to. One person said, "I have filled a couple of surveys asking for my views of the service I receive and I tell them it's all good." We looked at the last quality satisfaction survey and feedback about people's experiences was extremely positive. The service had scored highly for diligent, attentive, compassionate care workers and an office team who were responsive to people's queries and for providing reliable care workers who were well matched to meet people's needs. High regard was also given to the communication provided by the service. A relative emailed us, "I have nothing but praise for the agency, their staff and the administrative process. They have responded positively and promptly to any request I have made. St Elizabeth Care Agency have shown us nothing but kindness and compassion. Their efficiency shines though. I would have no hesitation in recommending them to others. Wish that all agencies were like them."

Conversations with people who used the service and relatives, plus records seen, showed that feedback continued to be valued, acted on and used to make continual improvements to the service. This was also confirmed by one relative who emailed us their positive experience of sharing feedback and how they were satisfied with how their comments had been dealt with. They told us, "We find a positive 'can do' attitude, common sense, proactive, attention to detail. Any queries or issues are addressed promptly with sense and understanding. We are made to feel important and of priority at all times."

Visible job satisfaction amongst the workforce was evident, morale was high. Care workers and the office team shared numerous examples of how they felt the service was well-led and that they were valued and respected by the registered manager who made time for them. Several staff described how the registered manager had supported them both professionally and personally and the positive impact this had on their well-being. One care worker said, "[Registered manager] makes time for you. They have an open-door policy, you never feel an inconvenience. They will also say hello and ask how you are getting on. Both the manager and the deputy are hands on and make you feel you're an important part of the team." Another care worker said, "I pop into the office at least once a week and have a chat or sometimes a grumble about things if I need to. They [management team] suggested I do this so things don't get on top of me. I have a lot going on at home and coming to work is a joy as I am among friends; helps me to cope. Talking to them has really helped, them listening to me offload. I get it all off my chest and I am ready to go again."

Care workers continued to be comfortable voicing their opinions with one another and the management team to ensure best practice was followed. They described how their feedback was encouraged and acted on and they were provided with the opportunity to comment on the service, including in staff meetings. The minutes of these meetings showed that care workers were reminded of their roles and responsibilities and suggestions from care workers, for example, how they supported people, were valued and listened to. As part of continual improvement, the registered manager, shared with us how following feedback from a care worker they were amending their medication record forms to include what the medicine prescribed was for and possible main side effects. This would enhance care workers knowledge and to be able to respond quicker and alert the GP or out of hours if people presented with any side effects.

There was significant emphasis on advancing the service. The registered manager assessed the quality and safety of the service through a regular programme of audits. This provided them with effective oversight of what was happening in the service, and when asked questions they responded immediately, demonstrating an in-depth knowledge in all areas. This included health and safety checks, safe management of medicines and auditing people's care records. We saw that these audits identified shortfalls which needed to be addressed to ensure the service continued to develop. Regular reviews of care were undertaken and

included feedback from people who used the service or their representatives where appropriate, staff and relevant professionals. This showed that people's ongoing care arrangements were developed with input from all relevant stakeholders.

An effective framework of accountability had been established in the service. Information relating to the running of the service was shared with the provider through regular reporting by the registered manager. This covered but was not limited to referrals, safeguarding, accidents and incidents, care reviews, complaints, compliments, recruitment and staff training and ongoing development. This information provided effective governance, answerability and oversight of what was happening within the service and contributed towards plans for the continual improvement of the service. Where outcomes and actions were identified, this fed into a development plan for the service providing the senior management team with the governance and oversight to take appropriate action. This included ongoing training and recruitment, workforce development, and upgrading the IT systems to further enhance efficiency and communication systems. Where relevant the management team submitted appropriate notifications to inform us of any issues.

The service continued to be an active and visible presence in the community supporting the St Elizabeth Hospice in various charity fundraising events through the year. The registered manager actively promoted careers in care for young people. This included speaking to health and social care students in local schools and liaising with local colleges in the development of apprenticeships in care with placements within the service. Since our last inspection St Elizabeth's Care Agency has received two highly commended certificates for their work placement arrangements and for providing people with dignity and respect at the Suffolk Care Awards.

We received complimentary feedback about the peer support provided by the registered manager from a manager of another care agency manager as part of a mentoring programme. They commented, "I have met with [registered manager] on a couple of occasions and she has given me guidance and support. She has been open and honest in all our conversations and has been happy to share information with me. I trust her advice."

Feedback from health and social care professionals about their experience of working with the service was commendable and reflected positive and effective working arrangements. The service has established effective partnerships with various organisations, including the local authority, hospital, community nurses and, GP surgeries to ensure they were following correct practice and providing a high-quality service. One community professional commented favourably about the positive working relationship they had with this agency, "The management team responds very quickly to requests for support and I have every confidence that St Elizabeth Care Agency is well-led. It is an excellent service."