

SureCare Shropshire Limited

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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

About the service:

SureCare Shropshire Limited provides personal care and support to people in their own home. The agency provides care and support for older people, adults with disabilities and people who live with dementia. 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 our inspection visit, SureCare Shropshire Limited provided services to 111 people.

People's experience of using this service:

People were at the very heart of the service. They told us the registered manager and staff were exceptionally helpful and supportive and excellent carers. They said they were extremely pleased with the care they received, and staff were respectful, considerate and extremely thorough. Staff were committed to delivering outstanding and inclusive personalised care. They strongly focused on supporting people's diverse needs and preferences. They were aware of people's individual preferences and had the skills, knowledge and ability to meet and exceed these. People frequently told us staff gave them care and support that was much more and far above what they expected. This included staff staying and chatting after their shift finished, helping with tasks difficult for the person supported and doing errands in their own time.

People said staff were very proactive and planned support in partnership with them. They told us they were encouraged to discuss their care and staff listened and made any adjustments. Senior staff regularly contacted people and urged them to discuss how their support could be improved. They acted promptly where areas of improvement were identified. People were supported to attend events organised by the service or activities they chose. The management team arranged social events including coffee mornings, social outings and fund-raising events. Transport was available, so people were able to attend if they wished. These events provided people with the opportunity to socialise and make friends and to renew old friendships. People told us they had information on how to make a complaint. People felt complaints or concerns were listened to and acted on promptly. Staff provided care that supported people to have a pain free and peaceful end of life and were passionate about making each person feel safe and comfortable.

The managing director and registered manager worked extremely effectively together and provided excellent leadership. They used a variety of methods to check the quality of the service and develop good practice. They focused on ways to increase the well-being of people they supported and the staff team. They worked closely and extremely effectively with other organisations and groups and shared information and learning with other professionals. They had piloted innovative projects developing best practice standards into their care. They were clear about their expectations relating to how care and support should be provided and led by example. Staff were aware and committed to the high standards expected of them.

People were supported by staff who had been recruited safely, effectively trained and supported and reliable. Systems were in place to safeguard people from abuse and people told us they felt safe with their

carers and liked and trusted them. Senior staff had assessed risks and management strategies were in place. People said staff never missed visits and were rarely late. They told us staff managed their medicines safely and they received them at the times they needed them.

People said staff had the skills, knowledge and temperament needed to support them and were cheerful and competent. They told us staff supported them to eat and drink and helped them seek medical help if needed. We saw staff were prompt and in seeking advice or referrals when people were ill and supported people to attend healthcare appointments. They liaised effectively with health and social care professionals to ensure people's health and well-being was maintained. The registered manager and staff team understood the requirements of the Mental Capacity Act 2005 (MCA). This meant they were working within the law to support people who may lack capacity to make their own decisions.

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

Rating at last inspection:

At the last inspection the service was rated good (published 11 August 2016).

Why we inspected:

This was a planned inspection based on the rating at the last inspection.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. We may inspect sooner if any issues or concerns are identified.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our Safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our Effective findings below.

Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our Caring findings below.

Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our Responsive findings below.

Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our Well-Led findings below.

SureCare Shropshire 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. This inspection was planned to check 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 and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

SureCare Shropshire Limited is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to older people, younger people with disabilities and people living with dementia. Not everyone using SureCare Shropshire Limited 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.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

We gave the service five days' notice of the inspection visit because we wanted to speak with people using the service. We needed the registered manager to contact people to ask their permission for us to speak with them.

Inspection site visit activity started on 10 May 2019 and ended on 15 May 2019. We visited the office location

on 14 and 15 May 2019 to see the management team and staff; and to review care records and policies and procedures.

What we did

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports. We also sought feedback from partner agencies and health and social care professionals. □

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 used all of this information to plan our inspection.

During the inspection, we spoke with five people who received support from SureCare Shropshire Limited and seven relatives. We spoke with 14 members of staff including the managing director, deputy manager, staff in management and supervisory roles and care staff. We spoke with the registered manager before the inspection visit but they were on leave when we visited the office.

To gather information, we looked at a variety of records. This included care plan and medicine records related to two people supported by SureCare Shropshire Limited. We looked at information in relation to staff training and supervision records. We also looked at other information related to the management of the service including audits, surveys and meeting minutes. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements.

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 Good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- The registered manager carried out safe recruitment. Staff told us the provider carried out disclosure and barring (DBS) checks and references before they were employed. This reduced the risk of appointing somebody unsuitable to work with people who may be vulnerable.
- We saw there were enough staff to support people and staffing levels were flexible should people's needs change. Staff told us they had enough time to provide people with safe care. There were sufficient, suitably recruited staff to meet people's needs. We saw many core staff remained at the agency for a long time, so they were familiar with service users and systems.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and avoidable harm. People's comments included, "They [staff] are very good, very kind and very careful." And, "I feel totally safe. My carers look after me and they are all very good."
- The provider had safeguarding systems and staff had received training. The registered manager was the safeguarding champion and guided staff in safeguarding people. Staff were aware of their responsibility to report any concerns and knew how to protect people from harm or abuse.

Assessing risk, safety monitoring and management

- The registered manager was proactive in managing risk to ensure people were safe. Each person had a robust risk assessment for them and for their home and risks were managed safely. These provided information and guidance to staff and were reviewed as required to make sure information was up to date.
- People told us the staff were dependable and always arrived for their visits. They told us they usually knew the carers that came to support them, unless it was an emergency situation. People told us there were enough staff, who they knew and they were almost always on time. Comments included, "Fabulous agency, rarely ever late and we know our carers well." And, "It works well without any problems." Senior staff told us they supported staff to assist people to plan, act and take sensibly calculated risks without having to constantly check.
- There was a business continuity plan that covered staff actions in unexpected or emergency situations. On-call support was always available to assist and advise. Senior staff monitored that staff arrived for calls and carried out care safely. These had been used last winter during prolonged snow. In that instance some staff were able to walk to their calls in cold weather gear others were taken by managers in four by four vehicles.

Using medicines safely

- Medicines were managed safely and in line with good practice guidance. People felt staff knew how to give

medicines. One person told us, "The staff sort my medicines. Everything works as it should and it is always done right."

- We looked at a sample of medicines records and audits. These showed medicines were given as prescribed with any errors dealt with promptly.
- Staff told us they received medicines training and had checks and audits to make sure they were giving medicines safely.

Learning lessons when things go wrong

- Staff learnt from situations that did not go as well as planned. The management team reviewed accidents and incidents, so lessons could be learnt, and the risk of similar incidents reduced.

They told us, "It has always been important that we learn lessons. One of the ways we do this involves listening to service users and staff, analysing incidents and putting in place action plans."

Preventing and controlling infection

- Staff and people they supported, were protected from potential infection when delivering personal care. Staff had received infection control training and followed safe infection control practices to reduce the risk of infection. People told us staff used disposable gloves and aprons and when they supported people with personal care.

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

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

- The provider supported people effectively with food and drink. Staff helped people with preparation and encouraged people to choose healthy food options to maintain a balanced diet. They had completed nutrition and food hygiene training to assist with safe food preparation.
- People told us staff always checked they had enough to eat and drink. One person said, "My carers made sure I had lots of drinks near me when it was really hot." A relative told us their family member had a special diet and staff always made sure they got this.

Supporting people to live healthier lives, access healthcare services and support and Staff working with other agencies to provide consistent, effective, timely care

- The provider arranged prompt health and social care referrals and supported people to appointments where needed. We saw examples of people supported to access health and social care professionals in a timely manner to help support their health needs. This included requesting and following advice on diet, hydration, nutrition, pressure care and continence. They had wheelchair accessible vehicles that could be used for transporting people to hospital and medical appointments. A relative said, "Whenever [family member's] medical needs alter, staff inform the doctor or district nurse."
- Staff worked effectively with other agencies. Other professionals were positive about the way they supported people. They worked closely with nursing and social work teams during a pilot project to ensure people had a prompt and safe discharge from hospital and rehabilitation.
- Relatives said the service responded quickly and efficiently in emergency situations and made a difference to people ill, injured or distressed. We saw a relative had contacted senior staff to thank a carer for the amazing and brilliant way she managed to keep everyone calm in an emergency. This attention to people's wellbeing helped to ensure people's health needs were met promptly.
- Senior staff had arranged for one person to get a wheelchair, so they could get out easier and reduce social isolation. They arranged and invited people to events such as coffee mornings. This helped reduce the risk of isolation or loneliness and improved people's wellbeing.

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

- Senior staff carried out robust assessments of people's needs involving the person and their representatives. The pre-admission process was person-centred and made sure the service could meet the person's needs.
- Staff reviewed and updated care plans with people, so the information was current. People felt their care and support was planned in partnership with them. They told us staff listened to and acted on the way they wanted their care provided.

- Senior staff researched and provided training to support staff in their knowledge of best practice. This assisted them to provide care in the way that met people's needs and preferences. The management team referenced current legislation, standards and evidence-based guidance to achieve effective outcomes.

Adapting service, design, decoration to meet people's needs

- Senior staff carried out risk assessments where staff were working in people's homes to make sure everyone was safe. They provided guidance on keeping safe and directed people to the appropriate service, for example the fire service for advice on fire safety.

Staff support: induction, training, skills and experience

- Staff had received induction and training relevant to their role and continually improved their skills and knowledge. The agency had its own training division, training/meeting room and equipment. This allowed them to provide training promptly as needed, increasing effectiveness. One staff member said, "It's great having the training room. It makes it easier to get staff in and we have lots of training."
- People told us they felt staff knew their jobs. Comments included, "Definitely they know their jobs." And, "Without question, I very much feel that they know what they are doing."
- The management team provided support and supervision and appraisal to staff to help them provide effective and up to date care. Senior staff told us they had redesigned the supervision forms to involve comments from service users and colleagues, so they got an all-round view of staff.
- Staff told us senior staff were approachable and available for advice. All staff said they received excellent support from the registered manager. One staff member told us, "They are the best people to work for, incredibly helpful and caring."

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.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

- People had been asked for consent to decisions where they were able to give this. One person told us, "Yes they do. They always ask." Where people were unable to make a particular decision, staff were involved in best interests decisions.

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

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

- People told us staff provided exceptional care and support that met and exceeded their care needs. People told us they received extremely good care and enjoyed the staff visiting them. One person said, "Everything's going really well and I'm very happy with it." And, "My carers do the job that's required of them and more and are careful in how they do it. I would recommend them as it works really well for me." Another person stated, "It's great. I'm very grateful for the service and would recommend it without hesitation as it's been so good for me." Staff provided personalised care focusing on each individual. A relative had recently called the service and said, "We wanted to say again how grateful we are what a difference you are making to her life. She feels the carers are wonderful."
- We were frequently told of occasions where staff had exceeded what was expected of them. They carried out extra, considerate and caring actions, which were over and above the person's care package, often in their own time. There were many examples of staff doing extra tasks, shopping or errands for people, visiting people in hospital or staying a while after their shift to chat. One person said, "It's a bit of company for me or I would be on my own every day, so I like the chat."
- Examples of staff going above and beyond included a staff member who helped one person clear their late family member's personal possessions with them. It was too upsetting for the person to do them alone and they had no family to help them. The person told staff it had caused them sleepless nights just thinking about it, but being able to have the staff member's help made it easier. They were able to reminisce about their loved one as they sorted their personal effects and this made a difficult job bearable. The staff member took the items to a charity shop of the person's choosing for them. This helped them feel they were helping others and eased their grief just a little.
- One person the agency supported was off their food and not eating much. A staff member took little food treats to tempt them to eat. They sat with them and chatted while they encouraged the person to eat and drink. The person enjoyed the company and took much needed nourishment, which stimulated their appetite a little. Another staff member spent extra time with one person, looking through a bird book together. They supported them to identify birds in their garden and they observed them together. This encouraged the person to feed the birds so they visited the garden more often. This meant a lot to the person as they had no family or other visitors and spent a lot of time alone. They were able to spend time on an interest they enjoyed. They felt this seemed to shorten the time alone and made their day more stimulating.
- The agency had become a Disability Confident Employer working with the jobcentre to get people with long term conditions back into work. Disability Confident Employers are recognised as going the extra mile to make sure disabled people get a fair chance. extra skills and knowledge in supporting staff and service

user's wellbeing.

- The support needed to maintain people's individuality, diversity and independence were recorded in their care plans and helped staff to deliver the right support. They had received training in equality and diversity and put this into practice in the way they responded to people. There were several leaflets and posters in the office signposting information for people on different support services and interest groups. We saw staff supported one person who had a less common religion with their specific beliefs.
- People told us staff respected their human rights, diverse needs and preferences. One person said, "Yes they are lovely, very respectful towards me and listen to what I want. This has helped me build up trust with them." Comments from relatives showed they were extremely pleased with the way staff supported their family members. These included, "[Family member's] getting amazing care from you all." "She looks so well and loves her care. And, "We are very grateful to have such lovely carers looking after [family member] who has Alzheimer's. [Family member] can sometimes be unintentionally difficult, as unaware of their care needs. The carers just carry on smiling and they have struck up a wonderful relationship with all of us."

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

- The registered manager and staff team encouraged people to express their views and opinions and supported people to make choices and decisions. People and/or their relatives felt involved in the planning of their care and in the day to day decisions. Where people had limited communication, or chose to include them, their families or representatives were involved in decision making. One person said, "I feel my carers always involve me properly. They ask me questions, so I can decide on things." A relative said, "[Family member] is quite independent and the staff work with that, so she feels in control."
- Relatives told us staff kept them up to date with any changes in their family member's health or wellbeing. Comments included, "Do the staff keep us informed? Yes, I would certainly say so. If they have any concerns they will get in touch. For example, they contacted us to say [family member] might have an infection and why they thought that." And "They get in touch. They are really good at it."
- The registered manager made information available, so people could contact independent advocacy services. This meant an independent person could act on their behalf if requested.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful of people's privacy, dignity and independence. People told us staff were very thoughtful in regards to their privacy and dignity, particularly when providing personal care.
- People said they were able to control their care and regain their independence. Comments included, "They encourage me to do what I can but help me with the things I cannot do myself." And, "They have cared for me so well, I can do the things they helped with at first, myself now."
- The registered manager was a dignity champion for the Sure Care Shropshire Limited. She encouraged staff to think about how they could continually improve the way they gave care and what they did extra. She asked staff to give examples of where they had provided great care and the ways they made sure people were treated with dignity. These were put on a large 'Tremendous' tree mural in the office for all to read and take ideas to act on. Staff said this encouraged them to share ideas and think of ways they could improve people's well-being on their visits.
- People told us staff were supportive, compassionate and very sensitive to their needs. Relatives commented on an online review site, "SureCare is an excellent company who really care about the client. The carers are lovely and so respectful to our [family member], who's life has improved greatly since changing to Sure Care. I couldn't recommend them highly enough."
- Staff were sensitive and respectful when talking about the people they supported. People's care records were kept securely and their confidentiality respected.

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 meet people's needs, preferences, interests and give them choice and control and to meet their needs and preferences

- People said staff responded exceptionally well to changes and obstacles and were proactive in finding solutions to challenges and difficulties. even outside their contracted hours. Examples included;
- One staff member cleared the fridge of out of date food and shopped for new food, in their own time following one person's discharge from hospital. This meant they had suitable food to eat and a welcome on their return home. Another staff member spent extra time at a visit, to unblock the person's toilet. As this was out of hours, there would have been an expensive call out fee for a tradesperson to attend. Also the person would have had to wait for this to be unblocked, leaving them without access to a toilet. The staff member's prompt assistance saved the person inconvenience and expense.
- A close family member of one person supported had recently died. A staff member had spent extra time supporting the person to visit the hairdresser, get ready for the funeral and attended the funeral service with them. This meant they could prepare for, and be present at their loved one's funeral so they could say their goodbyes as they wished. Yet another staff member spent time teaching a person with limited sight how to use some (new to them) technology. They put brightly coloured labels on the correct 'buttons' to use so they were able to use the equipment alone and could enjoy their leisure time.
- The agency had organised social activities and events such as coffee mornings and fundraising events. People supported were invited and the service provided the agency's accessible transport, so they could get there. This enabled them to meet up with old friends develop new friendships and socialise. One person said, "It stops me just sitting on my own and I can catch up with all the local news." Another person had been able to meet up with an old friend who they had not seen for some time. They had been unable to get together due to the distance apart, as both were unable to use public transport to travel and taxi's were too expensive for them. They were delighted to renew their friendship and enjoyed chatting and updating each other with family news.

Meeting people's communication needs

From August 2016 onwards, all organisations that provide adult social care are legally required to follow the Accessible Information Standard (AIS). The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager was aware of the accessible information standard. Staff knew the ways each person communicated and recorded this in care plans. This made sure people with a disability or sensory

loss were given information in a way they could understand.

- People told us communication from the agency was very good and frequent and in the way that was best for the person. They said senior staff contacted them regularly to check everything was alright with their care. Staff used signs and flash cards to help people living with dementia, short term memory, hearing or other communication problems. This helped with communication and with instructions, so they could have some independence around their home. Staff used large print and specific type fonts for people with sight difficulties and used plain English, so information was clear to understand.
- We saw one person had speech difficulties. When they had an important telephone call, the agency arranged for one of their staff members to be with them to help with communication. This helped the person as the staff member was able to understand and communicate the person's wishes to the caller.
- Type fonts on written information on staff training courses had been adjusted for staff with dyslexia to make it easier for them to read the information and assisted with their learning.

End of life care and support

- The service demonstrated an extremely compassionate awareness and understanding to end of life care. Several staff told us they volunteered to work with people heading towards end of life. They spoke of people at end of life in a respectful and kindly way. They were passionate and highly motivated to provide the best end of life care and the importance of getting it right for the person and for the family. One staff member told us, "It is such a rewarding part of the job, it can be sad, but you know you have given people a comfortable and peaceful end." A relative whose family member was supported as they headed to end of life had complimented the staff for their care and sensitivity to the whole family at a difficult time. Staff received end of life training and worked closely with other professionals to make sure people's end of life wishes were met. And say their goodbyes.
- People's end of life wishes were recorded so staff knew how to meet these. They also supported the person's family and each other during and after the person passed away.

Improving care quality in response to complaints or concerns

- The provider had systems to analyse complaints and concerns to make improvements to the service. Senior staff encouraged people to discuss any concerns. However there were no ongoing complaints. People told us they had information on how to make a complaint and felt comfortable doing so if something was wrong.
- Where there had been any issues people said these had been dealt with quickly and to their satisfaction. One person said, "It's working very well with the odd hiccup here and there, but anything has always been sorted out straight away." Other comments included, "If ever we've raised anything they've listened to us and tried to resolve it straight away." And, "We've got no issues with the service at all. Everybody's very good and we can't complain about anything. We are really happy to recommend it."

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 now improved to Outstanding. Service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- The registered manager was committed to engaging with people who received a service from SureCare Shropshire Limited and people in the local community. The registered manager and managing director of SureCare Shropshire Limited worked closely and extremely effectively together to further develop the service and provide outstanding high-quality care. The registered manager was a dementia champion. She and the management team were proactive about engaging with the local community and raising awareness of dementia. Senior staff had run dementia awareness courses in the local area, to increase the knowledge and understanding of local people and make the community more dementia friendly. They encouraged people in the local community to become dementia friends so people living with dementia had a safe, friendly face where needed.
- People said they had regular opportunities to provide feedback to the management team. This included using informal discussions, events, reviews, face to face and telephone checks and questionnaires. They told us they were frequently contacted by senior staff to check the support provided met their needs and wishes. They listened to and promptly responded to people's comments.
- The management team held frequent activities including fundraising events and social events for people they supported and the local community. These events encouraged people to enjoy companionship and reduce any feelings of isolation. The organisation had two vehicles available to help people supported who needed transport for appointments or for social events and activities. The cars were specially adapted for people who used wheelchairs. Staff drove and supported people, so they had a familiar person with them and help available as needed. This made sure people had suitable transport and people they knew with them on hospital visits shopping, social visits, or to attend day centres.
- Staff told us the registered manager or management team were always available to talk with. Staff felt valued and were confident to make suggestions. They told us they could call into the office any time for advice and support. They said they had meetings and supervisions, newsletters and other opportunities to share ideas and updates on changes in care. They told us how the registered manager had given them excellent support in both work related and personal situations. Comments from staff included, "[Registered manager] and other senior staff are so supportive. Always willing to give advice and listen. They are smashing." And, "I love it here. The best thing I have ever done, and we get fabulous support." And "I always feel supported, never alone with a problem. They [management team] are all fantastic."

Working in partnership with others

- We saw evidence of SureCare Shropshire Limited working extremely effectively with other organisations

and groups such as the Shropshire Partner in Care, registered manager's and domiciliary care forums. They were members of and active in other social care organisations. They worked routinely with other health and care professions and training organisations.

- The agency had developed a reference form to improve recruitment practice which had been adopted as best practice within the county. This reduced the risk of services in the area appointing an unsuitable member of staff.
- The managing director had developed a plan for the agency to support people who could be discharged from hospital with targeted help at home. The aim of this was reducing hospital stays and avoiding readmissions. This had been agreed with the local health and social services. SureCare Shropshire Limited piloted their project and were able to reduce hospital stays, as people were able to stay at or return promptly to their homes. People also needed a shorter length of time receiving care at home as they made more progress as a result of the targeted support.
- SureCare Shropshire Limited evaluated the pilot and produced reports to the local health and adult social services highlighting what had worked and what needed different strategies. They shared this with relevant services to improve future projects. They also provided evidence around problems with hospital discharges to a national project with NHS England. This would help improve outcomes for people around support after or instead of hospital stays.
- Partner agencies found the service provided high quality support, worked in partnership, followed current good practice and advice given and provided safe care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on duty of candour responsibility

- People told us they and their relatives felt involved in the planning of the care and in day to day decisions. They had very positive views of the company and greatly trusted the staff and management. All spoken with said they would happily recommend the agency to others. One person said, "We are very happy and would recommend the service because of the excellent quality of the care they provide." Another person said, "I'm very happy. I would recommend it, no doubt. It's a great help." □
- The registered manager, director and senior team had inspired staff to be committed and enthusiastic staff. They rewarded high performance and had developed a supportive and transparent culture. All staff spoken with were passionate about providing personalised care that improved people's well-being. We saw comments made by relatives who stated, "It is a very well organised and professional care company. The office staff are easily contactable to make any requests or changes to visits and the out of hours emergency contact is so useful." And, "Excellent group of carers, willing to exceed their remit and very helpful with all tasks and a prompt and friendly service from administrative staff."
- The agency's parent franchisor awarded SureCare Shropshire Limited their Quality Award for the best UK franchise at their UK Conference in April 2018. This was for their outstanding contribution to care; for supporting their local community, their innovation and development of the service, relationships with health and social care professionals and national care organisations. The awarder complimented them about their excellent, valued and long-standing staff team, said their dedication upheld SureCare Shropshire Limited's exceptional standard of care.
- The management team understood the duty of candour responsibility and supported people affected and staff if something went wrong.

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

- The service was overseen by extremely capable and experienced registered manager and managing director, supported by an enthusiastic and competent management team. The managing director and registered manager worked extremely effectively together and provided excellent leadership. All staff were

clear about their roles and how they 'fit' within the team.

- The service was very well organised. There was a clear and supportive staffing structure and lines of responsibility and accountability. There was a stable and steady core team of staff and they were highly motivated, competent and experienced. A staff member said, "I chose to work in this service because the management was outwards looking and shared good practice to improve care."
- The managing director had made plans for the future of the service, for when they took a less prominent role. They had put a succession plan in place to ensure the service remained well led.
- The service had effective systems of structured audits and checks. The management team analysed the performance of the business, using information technology and various forms of software. These systems assisted staff to provide people with high quality personalised care which met their needs and preferences.
- Most care staff were employed on contracted hours rather than zero hours contracts. This gave staff regular hours, which helped to retain staff. It also assisted managers to control capacity and allowed for spare capacity at busy times or for holidays and sickness. The agency's systems identified where there was capacity to provide care and ensured care packages that would exceed this were not accepted.
- The management team followed current and relevant legislation along with best practice guidelines. They understood legal obligations, including conditions of CQC registration and those of other organisations.
- Ratings from the previous CQC inspection were displayed in the office and on their website.

Continuous learning and improving care

- The registered manager and management team focused on continuously reviewing and improving the service. They were extremely proactive in developing and improving systems and the service they provided. These were robust and effective. They included the use electronic monitoring systems to ensure visits were completed successfully and to alert senior staff if care staff had problems getting to people they supported.
- Senior staff had completed a mental health first aid course to give them more skills and knowledge in supporting staff and service users well-being. They told us this had helped them feel more confident supporting individuals needing mental health support.
- The registered manager reviewed accidents and incidents to see if lessons could be learnt and improvements made and shared these with the staff team. Staff told us there was a no blame culture. One staff member said, "Any errors are discussed openly with the team, without pointing the finger at individual staff." Another staff member stated, "Any criticism is given in a constructive way, helping us improve plus we get lots of positive feedback."