

Registered Location & Address:	Offices 1 & 2, c.o Geo Hodges, 82, Horlinglow Street, Burton-on-Trent, Staffordshire DE14 1PN
Registered Provider Name:	Visiting Angels Burton & Derby (Trading as Lofts Associates Limited)
Nominated Individual Name:	Helen Lofts
Registered Manager Name:	Ashleigh Smith
Date of Site Visit & Report Writing:	21 <sup>st</sup> , 22 <sup>nd</sup> & 23 <sup>rd</sup> of May 2025 + teams call day 1
Verbal Feedback Given to & Date of Feedback:	Andrew Lofts, Helen Lofts & Ashleigh Smith via teams call day 3
Date Report Shared:	30 <sup>th</sup> May 2025

### **Report Contents**

- > Potential rating and scoring framework outcome
- > Disclaimer
- Scorecard under the new Single Assessment Framework
- > Introduction to the service, methodology and evidence gathered
- > Brief summary of service strengths including areas of best practice
- Brief summary of concerns, areas for development and recommendations to drive improvements to the care provision
- > Main findings for each key question
- Areas for action
- > Conclusion and next steps for the care provider to consider
- Resources



#### **Potential Rating & Framework Outcomes**

Overall rating by Quality Care Matters 2 Us $\stackrel{\Lambda}{\succ}$	Outstanding
Are services at this location Safe •	Good
Are services at this location Effective $\breve{\succ}$	Outstanding
Are services at this location Caring $\stackrel{\Lambda}{\succ}$	Outstanding
Are services at this location Responsive $\stackrel{\Lambda}{\rightarrowtail}$	Outstanding
Are services at this location Well-led $$	Outstanding

#### Disclaimer

This report was carried out by Carla Middleton on behalf of Quality Care Matters 2 Us. This report reflects our professional opinion based on evidence we have examined and inspected. It is not intended to indicate the outcome of a CQC inspection. Quality Care Matters 2 Us will not be held responsible for any discrepancy between this report and any CQC report which may be published.

#### Overall Scoring & Rating in line with the Single Assessment Framework (SAF)

CQC Percentages	CQC Scorecard	CQC Domains	Outcome Percentages	Outcome Score	Potential Outcome
Over 87%	'Outstanding'	Safe	78%	25	(potential score = 32)
63% to 87%	'Good'	Effective	88%	21	(potential score = 24)
<b>39% to 62%</b>	'Requires Improvement'	Caring	<b>100</b> %	20	(potential score = 20)
25% to 38%	'Inadequate'	Responsive	89%	25	(potential score = 28)
0% to 25%	'Enforcement Actions & Breaches'	Well-Led	91%	29	(potential score = 32)

The above is based on the scoring available from CQC website and the auditors' review. However, the accuracy of the ratings cannot be guaranteed. The scoring is based on quality statements; these are the commitments that all providers should live up to.



The mock inspection / audit is based on the following five key questions. Quality Care Matters 2 Us assesses and makes a judgment on the care provision against the five CQC key questions of Safe, Effective, Caring, Responsive, and Well-Led, in line with the potential scoring of the new Single Assessment Framework (SAF).

We also consider the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3) and the Care Quality Commission (Registration) Regulations 2009 (Part 4) as these are the regulations that providers must meet in order to maintain their registration.

The 5 areas are;

I. SAFE- People protected from abuse and avoidable harm

II. EFFECTIVE- Promotion of a good quality life with good outcomes underpinned by good

and best practices

- III. CARING- Treating people with compassion, kindness, empathy, dignity, and respect
- IV. RESPONSIVE- Person-centred care, the service meets people's needs and listens

and acts on feedback both positive and negative

V. WELL-LED- Leadership, culture, governance and communication frameworks, staff and

People supported engagement, quality assurance and partnerships

#### Introduction to the Service, Methodology & Evidence Gathered

Quality Care Matters 2 Us was commissioned by Lofts Associates Limited to conduct a quality audit of the service, which is registered with the Care Quality Commission (CQC) to provide the regulated activity of caring for adults both under and over 65 years of age. People supported living with a form of Dementia, Physical Disabilities and Sensory Impairments.

At the time of this comprehensive remote audit, 62 people were receiving care and support as part of the domiciliary care services, with 43 clients being in receipt of regulated activity and 19 clients not in receipt of a regulated activity.

Not everyone who used the service received personal care. CQC and Quality Care Matters 2 Us only inspects where people received personal care. This is to help with tasks related to personal hygiene and eating. Where they do, we consider any wider social care provided.

These assessments can include; site visits, criminal record checks, interviews with key staff members and a detailed review of how the service will be run.

This remote visit was announced to the service at the request of the provider.

This report will not identify any persons. Quality Care Matters 2 Us aims to reduce the risk of any personal identifiers when describing examples of any findings.



#### **Our View of the Service**

The Visiting Angels Burton & Derby service was registered by CQC in September 2020 and has not yet been inspected by the Care Quality Commission.

The service is a care at home domiciliary service providing support to older people/younger adults, people living with dementia and people with physical disabilities. The provider and staff had created an exceptional shared vision and culture based on active listening, learning and building trust. Leaders were always visible, very knowledgeable and extremely supportive, consistently helping staff develop in their roles to enable a continually improving service and maintain high-quality care.

Visiting Angels Burton & Derby presents as an outstanding and exceptionally well-led, compassionate, and person-centred care provider that consistently delivers high-quality domiciliary support. Evidence gathered across domains demonstrates a service with deeply embedded values of kindness, dignity, and respect. Staff consistently treat people as individuals, recognising the uniqueness of their histories, preferences, and emotional needs. Feedback from people receiving care and families was overwhelmingly positive, with many describing the care as not just reliable and professional, but warm, personal, and uplifting. It is clear that relationships built between staff and clients form the foundation of a culture rooted in trust, empathy, and meaningful connection.

The service excels in its commitment to personalisation and responsiveness. Care and support plans are person centred and detailed, reflecting people's changing needs, aspirations, and choices. The provider demonstrates an ability to act swiftly and compassionately in response to immediate needs or health deteriorations, often preventing crisis situations. Numerous examples observed showed that care was not only well-coordinated, but also flexible and empowering, supporting people to remain independent, make informed decisions, and maintain control of their lives. These actions directly resulted in improved quality of life and emotional wellbeing, with outcomes that align strongly with the characteristics of 'Outstanding' care.

Staff at all levels are well-trained, supported, and recognised. A robust wellbeing programme, including the Angel Care ensures staff have access to mental health support, welfare checks, and ongoing emotional encouragement. Internal communications, recognition systems, and inclusive culture events reflect a high degree of investment in workforce morale and retention. The leadership team, including the Registered Manager, model the values they expect from their team and lead with integrity, compassion, and vision. Their visible presence, open-door approach, and genuine commitment to both staff and client wellbeing contribute to the service's strong internal culture and consistent external outcomes.

The evidence collected paints a picture of a service that not only meets regulatory expectations but frequently goes above and beyond them. Visiting Angels Burton & Derby is achieving outcomes that are safe, effective, carer centric and genuinely life-enhancing.

Overall, the provider demonstrates a clear capacity for sustained high performance, continuous improvement, and sector-leading practice.



### People's Experience of this Service

Clients and families consistently described Visiting Angels Burton & Derby as a service that genuinely cares. Feedback was overwhelmingly positive, with people emphasising the kindness, warmth, and personal attention shown by caregivers and leaders. People spoke in awe of the Registered Manager and business owners. Many said they felt treated as individuals, not tasks, and spoke of how staff went above and beyond to meet emotional as well as practical needs. Words like "compassionate," "respectful," and "life-changing" appeared frequently in both verbal and written feedback.

Families shared how reassured they felt by the consistent communication and reliability of the care team, often praising the continuity of staff and the trusting relationships that developed over time. People spoke of staff remembering birthdays, providing comfort during difficult periods, and treating clients with dignity and respect at all times. Some described the support as being like family, noting the emotional impact of knowing their loved ones were in safe, caring hands.

This consistently high standard of feedback strongly reflects a service that delivers not just safe and effective care, but care that is truly 'Outstanding', person-centred, compassionate, and valued by those who receive it.



#### SAFE

Safety is a priority for everyone and leaders embed a culture of openness and collaboration. People are always safe and protected from bullying, harassment, avoidable harm, neglect, abuse and discrimination. Their liberty is protected where this is in their best interests and in line with legislation.

Where people raise concerns about safety and ideas to improve, the primary response is to learn and improve continuously. There is strong awareness of the areas with the greatest safety risks. Solutions to risks are developed collaboratively. Services are planned and organised with people and communities in a way that improves their safety across their care journeys. People are supported to make choices that balance risks of harm with positive choices about their lives. Leaders ensure there are enough skilled people to deliver safe care that promotes choice, control and individual wellbeing.

https://www.cqc.org.uk/guidance-regulation/providers/assessment/single-assessment-framework/safe

### **Rating: Good**

Overall Evidence for the Safe Domain:

The auditor looked at 8 out of 8 quality statements for the Safe domain, these were Learning Culture, Safe Systems, Pathways & Transitions, Safeguarding, Involving People to Manage Risks, Safe Environments, Safe & Effective Staffing, Infection Prevention & Control and Medicines Optimisation.

Visiting Angels Burton & Derby demonstrates a robust, proactive approach to safety, with strong systems, responsive leadership, and a deeply embedded culture of learning. Incidents and near misses are treated as valuable learning opportunities, with clear processes for investigation, reflection, and service improvement. This is evident in how medication errors, such as issues with transdermal patch applications, were swiftly addressed through training, communication updates, and reflective supervision. Safeguarding is well-understood and effectively applied by staff, supported by comprehensive training, a significant events tracker, and a positive culture around whistleblowing and accountability.

Staffing is a core strength. The service consistently ensures safe staffing levels through careful rota planning, strong recruitment practices, and a values-based selection process. All staff undergo enhanced DBS checks, structured inductions, and continuous professional development, resulting in excellent staff retention. Risk management is a shared approach with clients and families, empowering individuals to take positive risks while staying safe. Environmental safety is prioritised through thorough home risk assessments, lone worker protocols, and collaborative working with health professionals. Infection prevention and control practices are well-maintained, with staff demonstrating correct PPE use, hygiene standards, and alignment with national guidance.

Medicines are managed safely, with staff trained in line with best practice and subject to regular audits and competency checks. Transitions of care are carefully managed, with thorough assessments, secure information sharing, and close partnership working to ensure continuity and safety. The provider's carer centric model and commitment to dignity, independence, and empowerment underpin all safety processes.



This service scored 78 (out of 100) for this area. Find out what we look at when we assess this area and how we calculate these scores. <u>https://www.cqc.org.uk/assessment/quality-statements</u> <u>https://www.cqc.org.uk/assessment/quality-performance/reach-rating</u>

### Learning Culture

- The provider demonstrates a robust and proactive approach to identifying and investigating incidents where lessons can be learned, as evidenced by completed incident forms, root cause analysis (RCA) documents, and thorough investigation reports that were shared with the auditor.
- Multiple 'lessons learnt' statements were submitted, supported by internal communications such as company policies, indicating a well-established culture of reflection and service improvement.
- Learning in relation to transdermal patch safety was clearly evidenced through updated medication policies, targeted staff training sessions, supervision records, and spot check audits that focused on correct application and documentation procedures.
- In response to a medicines administration error, the provider implemented immediate re-training for staff, with evidence including completed medication competency assessments, reflective accounts, and follow-up MAR chart audits to monitor practice.
- For hospital discharge processes, learning was captured and acted upon after incidents where clients returned without essential medications. This was evidenced by revised discharge planning procedures, improved communication protocols with discharge teams, and documented medication reconciliation checks completed shortly after discharge.
- Lessons learnt were effectively cascaded to staff teams, with evidence including team meeting minutes, supervision discussions, and learning bulletins being circulated and displayed to ensure key messages were reinforced across the service.
- A clear audit trail was in place to show how incidents were tracked, analysed, and used to drive improvements, supported by incident logs, risk register updates, and service development plans that reflected ongoing learning and quality assurance activity.

### Score: 3

Regulation match 12, 16, 17, 20.

#### Safe Systems, Pathways & Transitions

- Referrals and transitions between services are handled to an exceptionally high standard at Visiting Angels Burton & Derby. Observed referral documentation was detailed and personcentred, including full medication lists, allergies, communication needs (where applicable), and a comprehensive medical history to ensure safe, informed continuity of care.
- > The service works closely with GP practices, hospital discharge teams, district nurses, and pharmacies, ensuring that all partners are kept informed and up to date when clients are referred into or out of the service. Communication is timely, clear, and well-documented.
- Staff follow a structured process for admissions and transitions, supported by a pre-assessment checklist that ensures nothing is missed when a client joins the service, moves between



services, or is discharged. This includes verifying prescriptions, ensuring equipment is in place, and confirming next-of-kin involvement.

- Information sharing is secure and consent-led, with all transitions documented on secure systems and shared only with appropriate professionals via secure digital platforms. Consent to share information is consistently recorded in care plans.
- The service actively supports medicines reconciliation following hospital discharge, with care coordinators checking prescriptions, updating MAR charts, and ensuring staff are briefed on any changes. Evidence from audits confirmed this practice helps to minimise medication errors and supports client safety.
- Staff have received training in supporting safe transitions, including modules on medication safety and multi-agency working. Team members demonstrated awareness of the importance of sharing accurate, relevant information.
- The service demonstrates a strong commitment to continuity of care, with Angels (care staff) supported to maintain relationships with clients through consistent scheduling, particularly after discharge or health events. Detailed handover notes and updated care plans ensure everyone involved is working from the same, accurate information.

### Score: 3

Regulation 12, 17 (consider regulation 9).

#### Safeguarding

- Staff are trained in safeguarding adults at risk, with training records confirming that all staff have completed up-to-date safeguarding training appropriate to their roles, including recognising different types of abuse and the duty to report concerns.
- Staff at Visiting Angels Burton & Derby demonstrated a clear understanding of safeguarding principles, including how to recognise signs of abuse, how to report concerns internally, and when to escalate using the whistleblowing policy where required.
- There is a comprehensive and up-to-date safeguarding policy in place, which clearly outlines reporting procedures, escalation pathways, and the roles of both staff and management in protecting people from harm.
- The service uses a detailed Significant Events Tracker to monitor safeguarding concerns and incidents. This tracker includes reference points for the date of the concern, status (open/closed), details of any ongoing investigation, and whether a CQC notification has been submitted. The tracker is a strong tool for oversight and accountability, but the auditor noted one inconsistency where an incident was recorded with two different dates (4th and 6th). This highlights the need for increased clarity and accuracy in record-keeping.
- A suggested improvement is to enhance the Significant Events Tracker by adding a column for documented outcomes or findings, rather than simply stating "open" or "closed," to better demonstrate learning and resolution. The auditor is confident that this has already been actioned.
- Staff were aware of and confident in using the whistleblowing procedure and understood the importance of raising concerns without fear of reprisal, aligning with the organisation's open and transparent culture.



- > To improve data management and oversight, the auditor recommended archiving previous years' safeguarding data (e.g., 2023) and using the tracker on an annual basis going forward. This would help streamline data and make patterns easier to analyse over time.
- Overall, the service demonstrates a strong safeguarding culture, with clear procedures, knowledgeable staff, and effective tracking systems, though minor improvements in documentation and tracker structure would strengthen this further.

### Score: 3

Regulation match 10, 12, 13 (consider regulations 9, 11, 17, 20)

#### **Involving People to Manage Risks**

- The provider demonstrated a strong, person-centred approach to understanding and managing risks, focusing on empowering people to make decisions that mattered to them. There was a clear commitment to supporting individuals in ways that balanced safety with autonomy, reflecting a culture of positive risk-taking.
- Care plans and risk assessments were robust, individualised, and co-produced with the person being supported, their families, and the Registered Manager. These were completed prior to service commencement and reviewed regularly. People and their representatives were invited to request changes outside of scheduled review dates, ensuring ongoing flexibility and responsiveness.
- The Registered Manager confirmed that people's own voices took precedence in care planning decisions, and this was echoed in feedback from both people using the service and their families.
- > Positive Outcome Case Study: Empowerment Through Trust and Rebuilding Confidence
- $\geq$ One outstanding example of positive risk-taking and person-centred risk management was observed in the care provided to a client. Upon transfer from a previous care provider, the client was in a highly anxious and traumatised state due to previous incidents of unsafe manual handling and disempowering care practices. Visiting Angels Burton & Derby undertook a highly sensitive and collaborative approach. The Registered Manager spent significant time supporting both the client and his family prior to the package starting. This included making an urgent referral to Derbyshire Occupational Therapy, who jointly worked with the service to reassess the client's needs. An adaptive and person-led mobility support plan was implemented, incorporating a range of equipment, each risk-assessed for safe use based on the client's daily emotional and physical condition. The rotunda, which offered the client more control, became the preferred method, supporting both safety and autonomy. This was documented and riskmanaged appropriately. Caregivers were trained to evaluate the safest equipment to use at each visit, factoring in the client's mental state, mood, and participation. The service also embedded physiotherapy-prescribed exercises into the care plan, enabling the client to regain strength and confidence. Through continuity of care, emotional support, and empowerment strategies, the client progressed to completing safe transfers independently, no longer requiring touch assistance. The client now contributes actively to their own care planning, engages positively with caregivers, and expresses their needs confidently.



- A testimonial left on HomeCare.co.uk from a client's daughter described the care as, "Visiting Angels has been supporting my dad's care at home for the last six weeks. They have always been professional, friendly, kind, thoughtful and very patient, and nothing has been too much trouble for them. They have restored his confidence after a very traumatic experience with previous Local Authority carers, which left him very vulnerable and scared. They have been very flexible regarding his needs and have supported and worked with my mum to manage the best care for him. They are quickly becoming like part of the family and we would not hesitate to recommend them to anyone who wants to receive the best of care, delivered with compassion and humour and for that, we are very grateful".
- The service aims to empower clients through compassionate, person-led care. This is demonstrated in how risks were assessed with people, not for them, and in how the team invested time and effort into rebuilding trust and capability.
- The case of [person's name] illustrates best practice and a mature, reflective risk culture suggesting a score of 'Good' with elements that could support 'Outstanding' if found to be systemic.

### Score: 4

Regulation match 9, 11, 12 (consider regulation 10).

### Safe Environments

- Clients reported feeling safe in their homes when supported by their Angels and commented that staff are attentive to potential risks such as trip hazards, poor lighting, or unsafe access. The service ensures the home remains a safe place for care delivery while maintaining clients' independence.
- Staff demonstrated a strong understanding of the importance of environmental safety in a domiciliary setting. They reported being confident in identifying risks during care visits and escalating concerns to the office team promptly.
- > The team could evidence that environmental risk assessments are routinely completed for each new client prior to starting care and reviewed periodically or when changes occur.
- During supervision visits and spot checks, staff are observed taking precautions in the individual's home to prevent harm, including safe moving and handling, managing infection control waste appropriately, and reporting any deterioration in the physical environment.
- Occupational therapists have a shared approach to best practice about collaborative risk management, including the timely reporting of environmental concerns by care staff that lead to joint reviews or equipment installation to maintain client safety.
- The provider uses a structured environmental risk assessment tool that covers key areas such as access to the property, fire safety, hygiene conditions, trip/slip hazards, and the presence of pets or smoking. As a result of proactive environmental risk assessments and staff vigilance, few incidents relating to environmental hazards have occurred.
- Risk assessments are stored securely and updated as part of care plan reviews or following incidents, such as a fall in the persons home.
- Staff receive training on lone working, personal safety, and detailed risk assessment to ensure they are equipped to manage variable and potentially changing risks in clients' homes.



- Where risks have been identified (e.g. cluttered spaces or unsafe stairs), documented actions have led to the provision of equipment, reconfiguration of care tasks, or advice to families to make necessary adjustments.
- > The service has effective systems in place to ensure both clients and staff are protected from environmental risks in a setting that is not directly controlled by the provider.

### Score: 3

Regulation match 12, 15, 17.

### Safe & Effective Staffing

- > The provider demonstrated a clear commitment to ensuring safe and effective staffing across the service. There were consistently enough qualified, skilled, and experienced staff on duty to meet people's individual needs safely and responsively.
- Staffing levels were reviewed regularly and aligned with assessed care needs. The auditor saw evidence of robust recruitment practices. Pre-employment checks, including full employment histories, proof of identity, right to work documentation, and enhanced Disclosure and Barring Service (DBS) checks, were all in place.
- A well maintained recruitment matrix allowed for easy oversight of compliance, including the proactive initiative to reapply for DBS checks exceeding the three-year period, which demonstrated a culture of vigilance and continuous improvement.
- Staff induction processes were comprehensive and supported staff to deliver safe, personcentred care from the outset. The induction included mandatory training alongside modules in dementia care and manual handling. The Registered Manager confirmed the induction process was highly beneficial and gave caregivers the confidence and competence to carry out their roles safely and achieve their care certificate.
- Ongoing support and development opportunities were evident. Staff received regular supervision and appraisal, and there was a clear pathway for progression into senior roles such as care coordinator or management. This supported retention had ensured that experienced staff remained within the service, further enhancing the safety and consistency of care delivery. The caregiver retention was some of the best statistics the auditor has ever observed.
- Caregivers told the auditor that they felt supported, valued, and encouraged to grow professionally. Feedback from people using the service and their relatives confirmed that staff were knowledgeable and well-trained.
- Interview panels for new recruits included experienced staff members, which contributed to the provider's ability to select candidates who shared the organisation's values, ethos and commitment to safe, person-centred care. There had been a recent appointment of a Care Manager.
- The provider's staffing approach reflects safe systems, embedded oversight, and a strong emphasis on training and development. Based on the evidence reviewed, the service is operating at a level consistent with a 'Good' rating under the Safe and Effective Staffing quality statement. The proactive DBS re-checking and strong internal development culture may support a higherlevel rating, subject to continued evidence of impact and consistency.



Score: 3

Regulation match 12, 18, 19.

### Infection Prevention & Control

- Clients are supported in a way that promotes health and hygiene. Feedback gathered from clients evidenced that they feel confident that their Angels follow safe infection control practices, particularly in relation to hand hygiene and the correct use of personal protective equipment (PPE).
- Staff were confident in describing infection control procedures, including effective handwashing, use and disposal of PPE, and managing cross-contamination in clients' homes. Leaders monitor compliance and provide regular refresher training, ensuring staff remain up to date with best practice guidance.
- Although direct observation is limited in a domiciliary context, spot checks and field supervisions evidenced that staff were wearing appropriate PPE and following safe infection control protocols. Staff also recorded infection control steps taken during each visit in the daily notes and electronic care management system.
- While partner feedback was not explicitly referenced, the service has worked in line with NHS and UKHSA guidance, ensuring coordination with district nurses and community teams should the need arise.
- > The service has a clear and up-to-date infection prevention and control policy, aligned with national guidance, and includes specific procedures for domiciliary settings.
- Regular training in infection control is mandatory for all staff and includes topics such as standard precautions, PPE use, and managing infectious outbreaks.
- > A stock management system ensures adequate supplies of PPE including gloves and aprons, and staff are trained on proper disposal in clients' homes.
- Audit tools and supervision templates are used to assess infection control practices during spot checks and field observations.

Score: 3

Regulation match 12, 15 (consider regulation 17).

#### **Medicines Optimisation**

- The provider had robust systems in place to ensure that medicines were managed safely and effectively. An up-to-date Medication Policy was in place, which aligned with national best practice and NICE guidelines.
- > All staff involved in the handling and administration of medication had received compliant and carer-centric training, and the service actively monitored staff competencies in this area.
- > The auditor saw evidence of medication competency assessments being completed for most caregivers. Two staff members had not yet completed their competencies; however, these



individuals were only delivering companionship visits at the time of audit and were not involved in medication administration.

- Competency forms followed internal policy and instructed a minimum of five questions from a number of 40 to be asked. On most occasions, 7 questions were recorded. The auditor recommends, as best practice, that a broader range of questions is asked to ensure greater depth and evidence of knowledge retention.
- The provider had systems in place for regular auditing of medication records and oversight via electronic MAR systems. A variety of electronic medication administration records (eMARs) were reviewed, demonstrating accurate documentation and person-centred information. For example; a person prescribed a Butec (Buprenorphine) patch had a clearly documented transdermal patch body map in place. This included application sites, rotation dates, and relevant safety reminders.
- For a person prescribed various PRN creams, PRN protocols were available and included detailed instructions on administration location and circumstances.
- A person prescribed Edoxaban (an anticoagulant) had a high alert flag clearly in place on the eMAR, ensuring staff were aware of the associated risks and the need for vigilance.
- Another person prescribed Apixaban was initially incorrectly marked as not taking an anticoagulation medication in their care records. This was identified by the auditor and raised with the provider and Registered Manager. Immediate corrective action was taken and recorded during the audit visit.
- In one case, a client was prescribed paracetamol with a variable dose (i.e. take one or two tablets). There was no clear instruction for care staff, who are not clinicians, to safely determine the dose. The auditor recommends reviewing this with the GP and updating the medication protocol accordingly to clarify decision-making based on the client's capacity and verbal input.
- In the case of a person prescribed Dermal cream four times daily, the auditor observed some gaps in the MAR. However, these were appropriately recorded with explanations, and it was confirmed that the client had capacity to refuse treatment.
- Protocols regarding barrier creams and fire risk were in place but required further development to be fully person-centred. Emollients are known to be highly flammable, especially in clients who are bed-bound or have impaired mobility. The Registered Manager had obtained general guidance from the local fire service, but the auditor advised implementing individual risk assessments and tailored protocols that included guidance such as proximity to heat sources, safe use during smoking, and oxygen storage where applicable. This was acted upon by both the provider and Registered Manager during the audit.
- Where medication errors had occurred historically, these had been promptly and thoroughly investigated, safeguarded appropriately which resulted in CQC notifications where applicable and these were used as learning opportunities, with outcomes fed back into training and staff meetings.
- One relative commented that their relative needed support with 1 medication following a review from the Neurologist. They said "you know they supported us straight away and didn't charge for an hour call just the 15 minutes, they didn't have to do that did they. I couldn't ask for anything better".

### Score: 3

Regulation match 9, 12 (consider regulation 11).



#### **EFFECTIVE**

People and communities have the best possible outcomes because their needs are assessed. Their care, support and treatment reflects these needs and any protected equality characteristics. Services work in harmony, with people at the centre of their care. Leaders instil a culture of improvement, where understanding current outcomes and exploring best practice is part of everyday work.

Everyone is supported to see what works well and not so well based on indicators of quality. Continuous improvement is always guided by this insight.

https://www.cqc.org.uk/guidance-regulation/providers/assessment/single-assessmentframework/effective

#### **Rating: Outstanding**

Overall Evidence for the Effective Domain:

The auditor looked at 6 out of 6 quality statements for the Effective domain, these were Assessing Needs, Delivering Evidence-Based Care & Treatment, How Staff, Teams & Services Work Together, Supporting People to Live Healthier Lives, Monitoring & Improving Outcomes and Consent to Care & Treatment.

The audit found that Visiting Angels Burton & Derby delivers consistently outstanding and personcentred care that meets and exceeds expectations within the Effective domain. The service demonstrated exceptional skill in assessing people's needs holistically, considering emotional, psychological, cultural, and clinical dimensions. Assessments were proactive, regularly reviewed, and responsive to subtle changes in people's wellbeing, allowing for timely intervention and prevention of deterioration. The service stood out for the way it embedded personal goals into care delivery, treating individuals as whole people and not just recipients of care tasks.

Evidence-based care and treatment were planned and delivered in close partnership with clients and their families, rooted in up-to-date best practice and enriched by specific staff training. Internal systems for reviewing care plans and incorporating feedback allowed for agile adjustments that supported people's health and independence. Multidisciplinary collaboration was strong, with the provider demonstrating a commitment to seamless care transitions. Leadership actively championed joined-up working, resulting in better outcomes and greater emotional security for clients and families alike.

In addition, the provider showed a robust understanding of how to support people to live healthier lives and achieve their personal aspirations. Monitoring of outcomes was consistent and meaningful, demonstrating a strong link between care and quality-of-life improvements, including reduced dependency and hospital avoidance. Staff were confident in their knowledge of consent and the Mental Capacity Act, supported by clear training and documentation processes. Altogether, this evidence supports a domain rating of 'Outstanding', with multiple areas showcasing best practice and a deep commitment to empowering people through high-quality, effective care.



This service scored 88 (out of 100) for this area. Find out what we look at when we assess this area and how we calculate these scores. <u>https://www.cqc.org.uk/assessment/quality-statements</u> <u>https://www.cqc.org.uk/assessment/quality-performance/reach-rating</u>

### **Assessing Needs**

- The provider demonstrated exceptional and holistic approaches to assessing people's needs before and throughout the delivery of care. Each assessment was highly person-centred, capturing not just clinical and physical requirements but also people's emotional, social, cultural, and psychological needs.
- Assessments were dynamic and evolved in line with people's changing circumstances. The audit evidenced that care plans were reviewed regularly and updated proactively, often in response to small changes before they became significant concerns. This showed a clear culture of prevention and person-led care.
- One person's care plan included clear strategies for supporting someone with behaviours that challenged, outlining the level of difficulty, associated risks, and specific actions for staff. This showed in-depth consideration of both health and communication needs, supporting dignity and independence that were affected by psychological impairments.
- Staff consistently recognised and recorded the emotional impact of life events during assessments. For example, when a client experienced anxieties and fear following a previous providers interventions, the emotional need was not only recognised but acted on with kindness and intent. This revealed the service's exceptional commitment to seeing the whole person beyond just physical care.
- Assessments captured what was important to each person, enabling the provider to embed meaningful personal goals into care delivery. One family commented that their father "never felt hurried," and was treated as "an individual," with staff who were "very aware of his needs and wants." This speaks volumes in terms of, person-led initiatives and ongoing assessments that translate directly into practice.
- The provider was exceptional in reassessing needs when health and circumstances changed. One person who was unexpectedly admitted to hospital had their care package quickly restructured, condensing regular hours into a three-hour hospital visit each day. This enabled the person to continue receiving support from their familiar caregivers, providing emotional continuity and reassurance in a stressful environment, following the carer centric model.
- In another case, the provider responded within hours when a family member expressed concerns about a re-enablement service. Visiting Angels Burton & Derby reviewed the care plan immediately, introduced additional visits the same day, and adapted the plan to reflect changing mobility and medical conditions, showing responsiveness and respect for both the individual's and family's perspectives.
- Assessment processes supported positive long-term outcomes. One client regained confidence and independence after their support was tailored in collaboration with professionals, reducing the need for care over time. The provider's proactive reviews and evidence-based assessments allowed care to scale up or down in a way that always supported the person's goals.
- > Equality, diversity, and protected characteristics were fully considered. Although people reported no specific cultural or religious needs at the time, they expressed full confidence that the service



would adapt as required. This was supported by staff training in equality and diversity and by care plans that included prompts for social, cultural, and personal preferences.

- The provider created a culture where assessing need was not a one-off task, but a continuous process grounded in listening, observation, and compassion. Staff had enough time on each visit to notice changes and feed observations into care reviews. This was underpinned by systems that made updating care plans routine and by leadership that prioritised high standards of effectiveness.
- > Following on from phone calls with loved ones the feedback was exceptional. For example, one relative commented "they are exceptional, they anticipate Mum's needs and use their initiative".

#### Score: 4

Regulation match 9, 12 (consider regulations 10, 11, 17).

### **Delivering Evidence- Based Care & Treatment**

- The provider planned and delivered people's care and treatment in partnership with them, taking into account what mattered most to each individual. Assessments were person-centred and included a clear focus on people's health, wellbeing, communication needs, and preferences.
- People and families told us they were involved in shaping their care. One relative shared, "They know the people they look after; they know [person's name] quirks and preferences. The fact we've got someone consistent in place is allowing [person's name] to stay at home, which is what they want." This demonstrates that care planning reflected both personal outcomes and people's individual wishes.
- Care records and risk assessments reviewed during the audit were up to date and clearly detailed people's needs, including practical information to support communication. For example, one care plan highlighted a person's behaviours that challenged, including the level of difficulty, risk factors, and strategies for staff to use to maintain effective and safe interactions.
- The management team described how they routinely reviewed care plans and assessments to ensure support remained in line with people's changing needs and current best practice. Where additional clinical or mobility needs were identified, appropriate referrals and adjustments were made in collaboration with families and external health professionals.
- Staff were trained to deliver care in line with current guidance and were supported with condition-specific training modules. These included areas such as dementia awareness, nutrition, falls prevention, and safe moving and handling. Caregivers described feeling confident in applying this knowledge to provide safe and effective support.
- The provider showed a clear commitment to delivering care in accordance with recognised best practices. People were supported to maintain or improve their wellbeing in a way that respected their individual needs, promoted consistency, and helped them achieve their preferred outcomes, including remaining at home where possible.
- Overall, people received personalised and responsive care that reflected their needs, choices, and evidence-based standards. The provider demonstrated consistent and thoughtful planning and review processes that met the expectations of a good-quality service.



Score: 3

Regulation match 9, 10, 12, 14, 17 (consider regulation 11).

### How Staff, Teams & Services Work Together

- The provider demonstrated an exceptional ability to work collaboratively across staff teams and external services to meet people's needs, even in challenging circumstances. People benefited from joined-up, well-coordinated care that reflected their personal goals, health needs, and life style choices.
- Care transitions were managed smoothly and respectfully, with staff ensuring people only needed to tell their story once. The service consistently shared up-to-date care and support plans and assessments when people moved between services. For example, following hospital discharges / admissions or when coordinating with GPs and community professionals, ensuring continuity of care.
- Despite ongoing challenges from frequent changes in district nursing teams across the Burton & Derby territory, Visiting Angels maintained a high standard of partnership working. Where relationships with district nursing teams were harder to sustain, the provider compensated with enhanced internal communication, comprehensive caregiver observations, and close family liaison. This proactive and preventative approach protected people from the effects of fragmented external support.
- Caregivers were trained to monitor and report signs of health deterioration, meaning that concerns were identified early and relayed quickly to external professionals. This was particularly important in the absence of consistent community nursing support. One example included rapidly adapting a care plan when mobility needs changed, enabling the person to avoid unnecessary hospitalisation or care home admission. A relative said "I asked the angels if they were trained in palliative care when they took care of Dad, I was blown away when they explained the amount of training they had completed".
- The service facilitated external health appointments and liaised with professionals such as GPs, occupational therapists, and social workers to ensure people's wider needs were met. Caregivers often accompanied clients to appointments or supported them in preparing for and understanding clinical advice, a key aspect of integrated care.
- Internal communication within the organisation was exceptional. The leadership team led by example with a culture of collaboration through structured communication systems such as shared digital notes, care review discussions, and regular team meetings. Staff commented that they felt included, informed, and confident in raising concerns or escalating issues when necessary.
- Visiting Angels' leadership modelled and championed multi-agency working. The Registered Manager and senior team advocated strongly on behalf of people using the service, ensuring that health and social care professionals were brought together around each individual's needs.
   Families expressed high levels of trust in the service's ability to "pull everything together," particularly during times of change or crisis.
- > This level of partnership working despite external limitations consistently led to better outcomes for people, such as being able to remain safely at home, receive the right input at the right time,



and feel emotionally secure. These practices go above and beyond the standards expected, meeting the characteristics of 'Outstanding' care.

### Score: 4

Regulation match 9, 12 (consider regulation 17).

### **Supporting People to Live Healthier Lives**

- The auditor observed that the provider supported people to manage their health and wellbeing holistically, enabling them to live more independently while retaining choice and control. Staff encouraged people to engage in healthy routines and provided support that helped reduce or delay the need for more intensive care.
- Care records reviewed during the audit showed proactive contact with a range of health professionals, including occupational therapists, pharmacists, and district nurses. This collaborative approach ensured people received timely interventions that supported their health, maintained their independence, and promoted safe care delivery.
- The Registered Manager has undertaken additional training in urinalysis, enabling them to assess and identify potential urinary tract infections in clients who are symptomatic. This has had a direct benefit to clients, as the provider is able to identify early indicators, communicate findings to the GP, and facilitate a faster medical response, often resulting in prompt antibiotic treatment and the avoidance of escalation.
- While this proactive clinical knowledge adds significant value, a recommendation was made during the audit for this urinalysis assessment process to be supported by a formal competency framework. Documenting this as a core training element across the team would enhance consistency and ensure robust governance in clinical observation practices.
- The auditor also recommended the provider explore use of the National Early Warning Score (NEWS) system, a recognised best-practice tool in identifying clinical deterioration. The leadership team showed openness to continuous improvement and confirmed they would review this tool for potential integration into practice.
- People were supported in ways that aligned with their lifestyle, medical conditions, and personal choices. Staff encouraged healthy eating, hydration, physical activity (where appropriate), and emotional wellbeing through companionship and meaningful routines. Where people had specific health goals or risks, care and support plans reflected these and were regularly reviewed.
- The provider demonstrated a strong foundation in promoting healthier living, with clear links to external professionals and internal expertise that benefited outcomes for the people they support.

#### Score: 3

Regulation match 9, 12 (consider regulations 10, 11).



#### Monitoring & Improving Outcomes

- Visiting Angels Burton & Derby consistently monitors the care and support provided to ensure that outcomes for people are positive, consistent, and reflective of both clinical needs and personal aspirations.
- Care plans are detailed and person-centred, capturing each individual's goals around independence, health, and social engagement. People who use the service have shared that staff are proactive and supportive in helping them work toward these goals. For example, one individual who initially required a high number of care hours experienced a significant reduction in dependency after coordinated support between Visiting Angels and external partners. This led to greater independence and quality of life in their own home.
- The provider takes a proactive and flexible approach to responding to changes in people's needs. One such example involved a client whose daughter contacted the office in distress due to concerns with the reablement team's support. The provider and Registered Manager acted quickly, expanding the care package the same day to include lunch and evening visits, ensuring continuity and emotional reassurance for both the client and their family. A review and updated care plan followed promptly to reflect changes in the client's medical condition and mobility. This intervention meant the client could remain safely at home with familiar caregivers, avoiding the need for 24-hour nursing care.
- Ongoing communication, including regular welfare check-ins by the Registered Manager, helping ensure that people remain happy with their care and that evolving needs are met swiftly.
- > All of these efforts support a culture of continuous improvement, where care delivery is closely monitored and adjusted to achieve the best possible outcomes for every individual.

#### Score: 4

Regulation match 12, 17 (consider regulation 9).

#### **Consent to Care & Treatment**

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 assisted to do so when needed. When they lack mental capacity to make a safe and informed decision 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 so that they can receive care and treatment when this is in their best interest and legally authorised under the Mental Capacity Act 2005. The application procedures for this in care homes and hospitals are called "Deprivation of Liberty Safeguards (DoLS).

- The provider ensured that people were supported to make informed choices about their care and treatment. Staff consistently sought and recorded consent before delivering care, and clients consistently said they felt respected and in control of decisions regarding their support.
- The service demonstrated a clear understanding of the Mental Capacity Act (MCA) 2005 and it's principles. Staff had received specific training in relation to MCA and how to apply it in day-to-day practice. This helped ensure that people's rights were upheld and that any decisions made on their behalf were lawful and in their best interests.



- During the compliance visit, the auditor reviewed training records and staff feedback confirming that MCA and consent were included in both induction and ongoing development. The Registered Manager delivered a comprehensive PowerPoint training session on the MCA during team meetings, covering topics such as assessing capacity, best interest decisions, and supported decision-making. This was followed by a staff quiz, which helped assess competence and reinforce understanding in a supportive learning environment.
- Care plans reviewed during the audit clearly showed whether individuals had capacity and included signed consent where appropriate. In situations where people's capacity had changed or fluctuated, the provider had recorded formal capacity assessments, and staff could explain how they would act in the person's best interests, involving families or advocates as needed.
- > The provider maintained a culture of respect and dignity around decision-making. People were given the time and information needed to understand their options. Families also confirmed they were included in conversations and felt confident that consent was always respected.

Score: 3

Regulation match 11 (consider regulations 9, 10).



#### CARING

People are always treated with kindness, empathy and compassion. They understand that they matter and that their experience of how they are treated and supported matters. Their privacy and dignity is respected. Every effort is made to take their wishes into account and respect their choices, to achieve the best possible outcomes for them. This includes supporting people to live as independently as possible.

#### https://www.cqc.org.uk/guidance-regulation/providers/assessment/single-assessment-framework/caring

#### **Rating: Outstanding**

Overall Evidence for the Caring Domain:

The auditor looked at 5 out of 5 quality statements for the Caring domain, these were Kindness, Compassion & Dignity, Treating People as Individuals, Independence, Choice & Control, Responding to People's Immediate Needs and Workforce, Wellbeing & Enablement.

Visiting Angels Burton & Derby consistently demonstrated a deeply embedded culture of compassion, empathy, and respect. People receiving care, their families, and professionals all described interactions with the service as warm, kind, and personal. The provider's commitment to treating people as individuals was evident throughout, with personalised care plans, thoughtful gestures, and attention to emotional as well as physical needs. Feedback repeatedly highlighted that people felt genuinely cared for and never rushed, and that care was delivered respectfully and with dignity. Staff had time to build meaningful relationships, creating bonds that made people feel seen, safe, and valued.

The provider went above and beyond to ensure care was truly person-centred. People's personal histories, cultural preferences, and individual aspirations shaped the way support was delivered. Equality and diversity were promoted through training and practice, and people consistently felt respected regardless of background. Families praised the emotional support given, not only to the person receiving care but also to loved ones during difficult times. Examples included gestures such as birthday flowers, support through bereavement, and personalised care even during hospital admissions, ensuring continuity and emotional security through familiar faces.

The culture of compassion extended to the staff team, with wellbeing initiatives such as the Angel Care, structured recognition schemes, and an award-winning organisational culture. Staff felt appreciated and supported, resulting in a highly engaged and consistent team who delivered care with warmth and pride. The auditor verified this through staff interviews, internal documentation, and external accolades including top rankings on Homecare.co.uk and national awards for service excellence.

The consistently high standard of care, personalised attention, emotional insight, and embedded culture of kindness clearly exceed expectations and meets the criteria for an 'Outstanding' rating in the Caring domain.



This service scored 100 (out of 100) for this area. Find out what we look at when we assess this area and how we calculate these scores. <u>https://www.cqc.org.uk/assessment/quality-statements</u> <u>https://www.cqc.org.uk/assessment/quality-performance/reach-rating</u>

### Kindness, Compassion & Dignity

- > The provider consistently demonstrated kindness, empathy, and compassion in the way care was delivered to people receiving support.
- Through communications the entire staff team were observed to treat people, their families, and professionals with warmth and respect at all times, inclusive of the auditor carrying out the compliance visit.
- People shared extremely positive feedback, stating they felt genuinely cared for. Comments included: "They all treat me with kindness, and I am very happy with my care," and "[staff] are very caring people."
- Staff were sensitive to people's emotional wellbeing and went beyond routine care to offer comfort and companionship. For example, one family member commented " anytime at all that I need help they are there and not just for me but for my brother also".
- People consistently said their privacy and dignity were upheld at all times. Care was never delivered without seeking consent, and individuals felt respected in how support was given.
- Staff had enough time during visits to build rapport and trust. This enabled them to develop meaningful relationships and offer care in a way that felt personal, safe, and valued. One caregiver said, "I feel like I am caring for friends sometimes."
- Caregivers were trained to understand people's personal histories, preferences, and emotional needs, which helped them tailor support and communication respectfully.
- > The provider, Registered Manager and team led by example, adopting a culture where kindness and compassion were embedded into daily practice.
- Care and support plans reflected people's individual needs, preferences, and dignity, with regular reviews to ensure care remained sensitive and respectful.
- > Families expressed confidence and reassurance in the care provided, saying that their loved ones were treated like individuals, not tasks.
- > The service promoted a culture of compassion not only with clients, but also among staff, with a focus on respectful communication, support, and team morale.

#### Score: 4

Regulation match 9, 10 (consider regulation 12).

### **Treating People as Individuals**

- > The provider delivered truly person centred care, consistently treating people as individuals and ensuring their unique needs, preferences, and personal histories shaped the care they received.
- Care and support were tailored to each individual's strengths, aspirations, culture, and preferences. Personalised care plans documented people's social, cultural, and religious needs and were actively reviewed to reflect any changes.
- Staff were trained in equality and diversity and demonstrated their understanding in day-to-day practice. People felt seen and valued regardless of their background or personal circumstances.



- Family feedback confirmed that individuals were never treated as "tasks" but as people whose emotional and relational needs were met alongside their care needs.
- > A family member commented that "Dad said he never felt hurried or rushed and that everyone always had plenty of time for him. He was treated with respect and consideration by the team who always treated him as an individual and were very aware of his needs and wants."
- Another person described the team as "the best of the best" and praised them for the emotional support and empathy shown to their entire family, not just the person receiving care.
- Clients felt remembered and valued commenting "You got me flowers for my birthday, it makes me feel so special and thought of." "The staff prepare everything for the next angel; they work well together and the quality of care is unbelievable".
- > The service also contributed to improved family dynamics, with one relative noting that staff helped a husband better understand his wife's condition, strengthening their relationship.
- > The provider extended their commitment beyond care tasks, offering thoughtful gestures like home visits after a fall, flowers, and cards, showing how well they knew and valued each person.
- The auditor could evidence that the level of personalisation, respect for individuality, and consistently positive outcomes described in both direct feedback and examples strongly align with the characteristics of 'Outstanding' care. The provider goes above and beyond the expected standard, demonstrating deep commitment to each person's identity, values, and quality of life.

Score: 4

Regulation match 9, 10, 14.

### Independence, Choice & Control

- > The service actively promoted people's independence and ensured they retained choice and control over their care and daily lives.
- Staff understood that maintaining autonomy was central to people's wellbeing and took time to learn about each individual's preferences, goals and routines.
- People were supported to make informed decisions and were involved in shaping their care and support plans. Care records reflected people's choices and were regularly reviewed in line with their changing needs and aspirations. One example involved a client whose care needs reduced over time through targeted support and involvement with external agencies. The provider worked in partnership with professionals and the client to promote independence, which resulted in the person regaining confidence and requiring fewer care hours.
- People were empowered to stay at home and remain in control of their lives. When one client was at risk of being moved to residential care, the provider acted swiftly to increase support and coordinate care around the person's wishes. This flexible and responsive action allowed the individual to remain in their own home with the support of familiar staff, preserving their independence and reassuring their family.
- Staff respected people's right to choose how and when they received support. For example, care was not task-focused but led by people's preferred routines. People consistently reported feeling listened to and in control. One family member told us their father "never felt rushed," and that staff were "very aware of his needs and wants," treating him as an individual at all times.



- Caregivers were skilled in encouraging people to remain independent in daily activities. They gently supported people to do as much as they could for themselves, offering encouragement and practical help without taking over. This approach helped build people's confidence and supported longer-term wellbeing.
- > The service placed value on building trusting relationships that promoted both physical and emotional independence. People felt respected, informed and central to decisions about their care.
- > The provider clearly empowers people to live as independently as possible, while always respecting their right to choice and control. The evidence shows consistent, proactive support, with personalised care that adapts to changing needs and enables people to live fulfilling lives in their own homes. The positive outcomes described, the flexibility shown in care delivery, and the feedback from people and families all reflect a level of care that goes above and beyond what is expected, meeting the threshold for 'Outstanding'.

Score: 4

Regulation match 9, 12 (consider regulation 10).

#### **Responding to People's Immediate Needs**

- The provider demonstrated an exceptional and person-centred approach in responding to people's immediate and changing needs. The service was proactive in recognising changes, quick to act when support needed to be increased or adapted and consistently prioritised continuity and emotional reassurance for people in their time of need.
- In one example, when a person's condition changed and they were admitted to hospital, the provider worked flexibly with the family and hospital team to ensure their regular caregivers could continue providing support. The individual's existing care hours were restructured and condensed into a three-hour window at the hospital each day. This meant the person continued to receive care from familiar staff their "very own Angels" who knew their preferences and could offer comfort during a difficult and unsettling time. This continuity provided great emotional security and minimised disruption during their hospital stay.
- Another example involved a client who was at risk of being placed in 24-hour residential care due to concerns around unmet needs. When the client's daughter contacted the office to express dissatisfaction with the re-enablement team, Visiting Angels responded immediately. The care package was increased the same day to include additional lunch and evening calls, enabling the person to remain safely at home. The care plan was quickly reviewed and updated to reflect changes in mobility and medical condition. This rapid and compassionate response provided reassurance to the family and upheld the person's wish to stay in their own home.
- People using the service consistently reported confidence in the provider's responsiveness. One person said, "To drop in on me after I had a fall, what an excellent service," while another commented on how their mother and father felt valued and supported during difficult times. The team were described as kind, timely and reliable, frequently going above and beyond, such as providing emotional support to family members navigating care decisions. Communication was regular, personal, and built on strong relationships, led by an attentive Registered Manager and office team.



> The provider's actions reflect a deep understanding of the importance of timely, flexible care that meets people's needs in the moment and often prevents a crisis from escalating. This approach clearly exceeds expectations and demonstrates the values of truly 'Outstanding', responsive care.

Score: 4

Regulation match 9, 10, 11, 12 (consider regulation 16).

### Workforce Well-Being & Enablement

- The service demonstrates a proactive and embedded culture of promoting staff wellbeing, engagement, and mental health. This was evidenced through structured initiatives, internal communications, and recognition strategies observed during the compliance audit.
- The auditor observed multiple examples of staff recognition, being celebrated and rewarded across various milestones. For example, Angelversaries are formally recognised during team meetings, with annual pay increases awarded to staff as a token of appreciation for continuous service, probation completion is celebrated with flowers and cards, a gesture verified through internal memos and photographic evidence. Staff promotions are celebrated openly and shared via newsletters and team meetings.
- Visiting Angels Burton & Derby received the "Best Company to Work For Award" at the Company Culture Awards, reflecting the impact of this internal culture externally. Further evidence was sourced by team meeting PowerPoint presentations, internal newsletters (Caregivers Newsletter), visual evidence of cards/flowers provided and memo communications to staff, evidencing the provider meets criteria for 'Outstanding' in leadership and staff recognition.
- A strong example of a responsive wellbeing system is the Angel Care, a confidential, internal referral service supporting staff with stress, anxiety, or mental health concerns This formed a structured referral process was documented with; risk assessments, reasonable adjustments, up to 6 confidential therapy sessions, welfare checks post-support, diarised monitoring for ongoing issues. In addition, the auditor saw real-time referrals having been made and monitored and was reassured by this initiative.
- The auditor reviewed the Angel Care referral flowchart, completed and anonymised referral examples, emails and notes from the management team outlining processes. The provider clearly demonstrates 'Outstanding practice' in supporting mental health and wellbeing, making this enjoyable through learning with a quiz. This is further supported by a 'Well-Being Champion'.
- Social events such as Bonkers Bingo and team dinners show inclusive planning based on staff preferences. Ongoing updates on safety (e.g., email phishing alerts) and organisational developments (e.g., welcoming new team members).
- The auditor evidenced structured and responsive systems in place, with a strong culture of care and recognition. For example, there were multiple layers observed of staff celebration, an embedded culture of inclusion and feedback. Proactive committee and staff-led initiatives which enhanced engagement and with the Angel Care process of welfare checks the provider and Registered Manager were enabled to showcase proactive risk management and emotional support.



- Also evidenced and noted was an impressive series of accolades including; a consistent 10/10 rating on Homecare.co.uk top spot & West Midlands Top 20 Award 2024, attributed to caregiver dedication and service quality, nomination for Franchisee of the Year at the Stars of Social Care Awards. These recognitions reflect the service's commitment to building a supportive, high-performing environment where staff feel their efforts are seen and valued.
- Other significant and key achievements are Visiting Angels Best Practice Award in Sales & Marketing 2024, Franchisee of the Year 2021, North Registered Manager of the Year 2021, UK Angel of the Year 2022, Acting Midlands Registered Manager of the Year 2022, Care Manager of the Year 2024, UK Care Manager of the Year, Visiting Angels Midlands Angel of the Year, Highly Commended UK Angel of the Year, UK Carer Centric Team of the Year and finalists in Stars of Social Care Awards 2024. For 2025 the team are finalists for Franchise of the Year once again nominated by Visiting Angels Head Office and they have been shortlisted for Employer of the Year Staffordshire Business Awards.

Score: 4

Regulation match 9, 12, 17, 18



#### RESPONSIVE

People and communities are always at the centre of how care is planned and delivered. The health and care needs of people and communities are understood and they are actively involved in planning care that meets these needs. Care, support and treatment is easily accessible, including physical access. People can access care in ways that meet their personal circumstances and protected equality characteristics.

People, those who support them, and staff can easily access information, advice and advocacy. This supports them in managing and understanding their care and treatment. There is partnership working to make sure that care and treatment meets the diverse needs of communities. People are encouraged to give feedback, which is acted on and used to deliver improvements.

### https://www.cqc.org.uk/guidance-regulation/providers/assessment/single-assessmentframework/responsive

#### **Rating: Outstanding**

Overall Evidence for the Responsive Domain:

The auditor looked at 7 out of 7 quality statements for the Responsive domain, these were Person-Centred Care, Care Provision, Integration & Continuity, Providing Information, Listening to & Involving People, Equity in Access, Equity in Experiences & Outcomes and Planning for the Future.

Visiting Angels Burton & Derby demonstrates a deeply embedded commitment to responsive, personcentred care. The service places people at the heart of their care, involving them and their families in co-producing highly personalised support plans that reflect individual values, preferences, and histories. A clear focus on relationship-building is evident through caregiver matching based on compatibility and shared interests, which assists emotional wellbeing, continuity, and trust.

Client and family feedback consistently praised the service's flexible and compassionate approach, noting that caregivers felt like "part of the family." Case examples showed powerful outcomes, such as preventing unnecessary institutionalisation, rebuilding trust after previous trauma, and supporting rare dementia needs with exceptional attention to detail.

The service is also proactive in ensuring people receive joined-up care and equitable access to wider health and social care services. Care records and referrals illustrate strong multi-disciplinary collaboration, enabling timely intervention and avoiding hospital admissions. Communication is inclusive and adapted to people's needs, ensuring full involvement in their care regardless of digital literacy, language, or sensory needs. Visiting Angels' approach to listening and acting on feedback is systematic, inclusive, and embedded into everyday practice. People feel heard, respected, and in control of their support.

In planning for the future, the provider demonstrates a thoughtful, preparatory approach to dignified long-term care, even though it currently does not support an individual with end-of-life support directly. Staff receive dignity-based training, and relationships with palliative care partners are in place to enable smooth transitions. While end-of-life training in future planning remains an area for development, the overall quality of responsiveness across care provision, communication, equity, and future readiness positions the service as consistently strong, person-led, and adaptive to people's changing needs.



This service scored 89 (out of 100) for this area. Find out what we look at when we assess this area and how we calculate these scores. <u>https://www.cqc.org.uk/assessment/quality-statements</u> <u>https://www.cqc.org.uk/assessment/quality-performance/reach-rating</u>

### **Person Centred Care**

- > The provider demonstrated an exceptional commitment to delivering person-centred care that was tailored to each individual's needs, values, and preferences. People were not only at the centre of their care but were active participants in shaping how it was delivered.
- Assessments and care and support plans were highly personalised, reviewed regularly, and developed in collaboration with people supported, their families, and relevant health professionals where required.
- The auditor reviewed a number of care and support plans and observed that each one contained a client details section, which included life history, interests, family connections, likes and dislikes, and specific preferences, such as preferred times of care or routines. This not only informed high-quality care but supported a genuine sense of identity, dignity, and emotional wellbeing for each individual. Caregivers were carefully matched to people based on shared interests and compatibility, reinforcing meaningful relationships.
- Clients and families described outstanding levels of personalised care. One relative said, "Visiting Angels is just so the correct name for them, as they are all angels. The care they have provided for my 85-year-old mum has been second to none, she called them all 'her ladies' and struck up a special friendship with [person's name]". Another person said, "My mum now calls them 'my girls' and absolutely loves their visits. My dad ended up having care too, they treat them with the utmost respect and their nature made a difficult situation so much easier."
- People's relationships with staff consistently demonstrated emotional connection, trust, and continuity. One family shared, "They genuinely care for your loved one like a member of your family." Another said, "Without them, my father would not have been able to live in his own home. More importantly, they provided companionship and he developed a strong bond with them." These sentiments reflected an ethos that goes well beyond task-based support, embracing emotional wellbeing, companionship, and a sense of community.
- The provider's systems and leadership promoted a culture where personalised care was not a one-off event but a continuous, evolving partnership. People's individuality was genuinely celebrated, and the impact on wellbeing, independence, and confidence was clearly evident across feedback and case reviews. This level of responsive, relationship-led care exemplifies the characteristics of 'Outstanding' person-centred care and provision.

#### Score: 4

Regulation match 9, (consider regulations 10, 11, 12, 14).



#### **Care Provision, Integrity & Continuity**

- The provider understood the diverse health and care needs of people and their local communities, so care was joined-up, flexible and supported choice and continuity.
- Care and support plans contained detailed specific information regarding people's diverse health and care needs. For example, there were decision specific care plans containing details regarding a person's care needs around diabetes including the support required and clear information on signs and symptoms for staff to be vigilant for and action to take.
- The provider, people and relatives and external professionals gave examples of how the provider worked with them to ensure people's care was joined up and flexible and supported continuity of care including effective communication regarding people's health needs and flexibility in visit days and times to support with appointments.
- The service celebrates the life-enhancing impact the team have on the people they support, from helping clients regain confidence after illness to enabling them to remain active in their communities. The care is outcomes-focused, with success stories regularly shared in team meetings and newsletters to inspire reflective practice. Clients say they feel genuinely seen, heard, and supported, which is reflected in Visiting Angels Burton & Derby's consistent five-star reviews and high retention of both clients and caregivers.
- The provider should be proud of the strong culture of honesty, accountability, and transparency that runs throughout the service. Integrity is modelled from the top, with leaders actively encouraging open dialogue and quick resolution when issues arise. The team are candid in their communication with clients and families, particularly when challenges occur, and building trust means sharing not only the successes, but also how they learn and grow.
- Staff are empowered to speak up through confidential reporting mechanisms and regular one-to-one check-ins, and they know their concerns will be taken seriously. The provider regularly shares "you said, we did" updates to demonstrate responsiveness to feedback, and learning from complaints and compliments alike is built into training and quality assurance processes. This culture of integrity helps build deep trust with their clients, local professionals, and one another, ensuring that care decisions are always made in people's best interests.
- Continuity of care is at the heart of their approach, underpinning the strong relationships the caregivers build with clients and their families. The team are highly intentional about care matching, considering personalities, interests, and preferences when assigning caregivers. This results in long-standing, trusted relationships that provide emotional well-being and a strong sense of familiarity for the people they support.
- The provider has invested in smart rostering systems and maintains a stable, highly committed workforce, ensuring minimal disruptions to care delivery. When changes are unavoidable, they manage transitions with clear communication and sensitivity, preparing clients and families in advance. The provider's low turnover rates and high levels of staff retention means clients often receive care from the same carers over long periods. In turn, this allows them to spot subtle changes in clients' wellbeing early and respond swiftly, enhancing safety, quality, and peace of mind.

#### Score: 4

Regulation match 9, 12, 17 (consider regulation 10).



### **Providing Information**

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 carer's.

#### http://www.england.nhs.uk/ourwork/accessibleinfo

- The provider demonstrated a clear and proactive commitment to ensuring people received appropriate, accurate, and up-to-date information in ways that suited their individual needs and preferences.
- People were supported to access their care plans and daily care records through the provider's electronic system. However, the provider acknowledged that not everyone was comfortable using digital platforms, and adjustments were readily made in these circumstances. Where necessary, care staff and managers offered printed summaries or held face-to-face discussions to ensure people understood the content of their care and support plans and any changes being made. One relative commented "I am always there for reviews but they actually speak to my brother directly which is lovely to see".
- > This flexibility reflected the provider's wider aim of delivering accessible, inclusive communication that empowered people to be fully informed and involved in their care.
- Staff were trained to identify communication needs and preferences during the assessment process, and these were documented clearly within care records.
- There was also evidence of regular reviews taking place in a format suitable to each person. For example, some reviews were held in the person's home with family present, allowing for a collaborative and supported approach to information sharing. In other instances, telephone updates were provided where face-to-face meetings were not practical.
- The service had systems in place to update families and representatives where consent had been given. This included regular phone calls, emails, and care note summaries being shared in a timely manner.
- People and their families reported they felt informed, understood their care and support, and knew who to contact with any questions or concerns. The approach to providing information was not only practical but person-centred, ensuring that no one was disadvantaged in understanding or participating in their care.

#### Score: 3

Regulation match 9, 12, 17.

### Listening to & Involving People

- > The provider demonstrated a strong and embedded culture of listening to and involving people in their care, support, and service improvement.
- > There was clear evidence that people were enabled to share their feedback, preferences, and concerns easily and were regularly involved in decisions about their care.



- The auditor observed that when individuals raised complaints or concerns, the provider responded promptly and maintained open communication throughout, keeping people informed of any changes made as a result.
- Feedback was actively sought through a combination of informal interactions, planned care reviews, and structured feedback mechanisms such as surveys.
- > The service's objective was clearly to ensure that care delivery was person-led and adapted in real time to people's changing needs, wishes, and experiences.
- Staff advised that they actively listen, take feedback seriously, and promote choice and control in people's day-to-day care.
- The provider's approach to listening led to several positive and impactful outcomes for the people supported. The auditor evidenced several positive outcomes for people, in all cases reviewed, involvement was consistent, meaningful, and made a demonstrable difference to people's experiences and outcomes.
- The provider's aim was not only to meet care needs, but to do so in a way that made people feel heard, safe, and respected. Their goals centred on restoring trust in care, enhancing independence, and delivering support in partnership with the individual and their family.
- > The service's approach to listening and acting upon feedback was proactive, well-documented, and deeply embedded into its culture of care.
- > The provider was exceptional at enabling people to share feedback and ideas, or raise complaints about their care, treatment and support.
- Staff always involved people in decisions about their care and told them what had changed as a result.
- A complaints procedure was in place and people and relatives felt listened to. Regular feedback was sought from people supported and relatives; this reduced the risk of formal complaints. One relative said, "If I was unhappy, I would speak to the carer or the management. I know that any concerns raised would be acknowledged quickly and a joint approach would be taken to problem solving or finding appropriate resolutions to issues. They thoroughly deserve an 'Outstanding and I do hope they get it".

Score: 4

Regulation match 9, 10, 16, 17.

### **Equity in Access**

- The provider ensures that people using the service are supported to access the care, support, and treatment they need in a timely and efficient manner. Care records, staff communications, and review documentation consistently show that people supported are not only supported by Visiting Angels Burton & Derby's internal care team but also actively linked to wider health and social care services.
- The auditor observed that the provider takes a proactive approach to identifying when people's needs extend beyond the scope of domiciliary care and facilitates external referrals without delay. Where appropriate, the service engages with families, GPs, district nurses, social workers, and hospital discharge teams to ensure people receive the right care at the right time.



- People who used the service had fair and impartial access to a range of support services, regardless of their background, health condition, or care funding arrangements. There was also evidence that the provider recognised and acted on potential barriers such as mobility.
- Care and support planning records and digital logs referencing contact with district nurses, GPs, and occupational therapists were evidenced and communications and referral forms to multi-disciplinary teams such as falls teams, occupational therapists, dietetic teams and SALT teams were evident.
- It could be observed that there was a positive impact on people supported as they received timely and appropriate health interventions through external partnerships which created avoidance of unnecessary hospital admissions due to proactive escalation and liaison with health professionals.
- People supported expressed confidence that they were not left to navigate care pathways alone as clear systems were in place to identify and respond to wider health and social care needs; evidence of timely referrals and inclusivity in practice.
- Overall, the provider demonstrates strong and consistent performance in ensuring equitable access to necessary services beyond their own provision. There is an embedded culture of multidisciplinary collaboration, and the service acts promptly and inclusively to meet people's broader health and wellbeing needs.

Score: 3

Regulation match 12, 13, 17 (consider regulations 9, 10).

#### Equity in Experiences & Outcomes

- The provider demonstrated a strong commitment to ensuring that all individuals received fair and impartial care and experienced positive outcomes, regardless of their background or needs. Staff and leaders actively listened to the unique needs of people and tailored care and support, accordingly, ensuring that every person was treated with dignity, fairness, and compassion.
- The service maintained open communication with families and people supported and remained agile in adapting support packages where needed. There was clear evidence of the provider working responsively to avoid inequalities in experience and outcomes.
- > The auditor reviewed several examples of positive outcomes for people supported, there was a variety of outcomes for people.
- Case Example 1: Person-centred escalation to avoid 24-hour care
- A client [person's name] was at risk of moving into 24-hour nursing care due to reduced mobility and a decline in overall wellbeing. Initially supported by both Visiting Angels and a reablement service, concerns were raised by the client's daughter regarding the quality of external services. In response, Visiting Angels Burton & Derby rapidly increased care provision from two to four visits daily. A full review and update of the care plan followed, ensuring that all changes in mobility and health were reflected. The family expressed gratitude for the swift response and emotional support provided, enabling [person's name] to remain safely at home. This outcome not only promoted autonomy and dignity but also avoided unnecessary institutionalisation.
- Case Example 2: Tailored support for rare dementia diagnosis



- Another example involved a client, [persons' name], living with posterior cortical atrophy, a rare form of Alzheimer's, and who was also blind. Visiting Angels provided 55 hours of tailored care per week, incorporating personal care and extended sitting hours to give respite to their husband. Initial care provided by another agency failed to meet their needs, leading to anxiety, poor nutrition, and rapid deterioration. Once Visiting Angels Burton & Derby began support, there was an immediate and marked improvement. [Person's name] began eating properly again, recognised caregivers by voice, and re-engaged with their love of music. Their husband was able to resume social activities knowing [person's name] was cared for by a team they trusted. The daughter, who previously needed to travel frequently, no longer felt this was necessary, indicating a significant improvement in family quality of life and trust in the provider.
- > Case Example 3: Recovery from trauma caused by previous care
- A third client, [person's name], had previously experienced neglect and inappropriate handling by another care provider. This left them with trauma, distrust, and severe anxiety about physical contact. Visiting Angels Burton & Derby developed a bespoke care plan and coordinated with the Derbyshire Occupational Therapy team to assess and implement appropriate mobility aids (rotunda, hoist, mo-lift). The client was given the autonomy to select preferred equipment each day, based on their emotional and physical state. With ongoing encouragement and physiotherapy exercises integrated into care routines, the client regained the ability to stand and transfer independently. Their mental wellbeing significantly improved, as evidenced by their willingness to engage in conversation, contribute to care and support planning, and express preferences confidently. A heartfelt family review on HomeCare.co.uk highlighted the transformation: "They have restored [person's name] confidence, they are quickly becoming like part of the family."
- Although the provider currently supports a relatively demographically consistent client base, they have shown foresight in identifying potential barriers or inequalities. Leaders have created mechanisms to capture the lived experience of people supported.

#### Score: 4

Regulation match 12, 17 (consider regulations 9, 10).

#### **Planning for the Future**

- Visiting Angels Burton & Derby demonstrates a proactive and respectful approach to supporting people to plan for the future, with strong foundations in person-centred care and dignity.
- Whilst the service currently does not support clients receiving end-of-life care or a person requiring anticipatory medicines, it has taken initial steps to prepare its caregivers and engage meaningfully with future planning. The provider has demonstrated awareness of the importance of future planning and anticipates the need to be responsive to such referrals of clients.
- Leadership has shown foresight by building links with palliative care partners, such as the End of Life Community Coordinator at Derby Hospital, positioning the service for future collaborative care.
- > 22 caregivers have received training in Dignity in Care, embedding key values such as respect, empathy, and person-led decision making into their everyday practice.



- Training supports effective conversations around personal wishes, care preferences, and decision-making, even outside of formal end-of-life contexts. However, the auditor could not find evidence that the leadership team had completed similar training, which creates a gap in modelling best practice from the top down.
- The absence of current specialised training or leadership involvement in dignity-based training prevents the service from achieving an Outstanding rating, but practice overall is consistent, thoughtful, and above the minimum required standard.
- A client had received palliative care a while back and their daughter mentioned the following "I said to the caregiver if you are with Dad when he passes away then that's okay as you have cared for him like your own family, fortunately I was with him". They went on to say that when Dad passed away the business owner went to the daughters home to pay their respects and they are also attending Dad's funeral next week which is just wonderful, they are an extended of family".
- The service demonstrates a commitment to person-centred care and long-term planning through its existing care and support planning platform. Initial assessments routinely gather information about preferences, long-term goals, and family involvement, allowing for flexible care planning that can evolve over time. This offers clients empowerment and freedom of choice.
- While no anticipatory medicines are currently managed, staff understand their role in raising concerns and escalating health changes.
- Relationships with external health professionals (e.g. GPs, community nurses) are well established, ensuring safe transition should more complex care be needed.
- Workforce readiness is evident among caregivers, but development and leadership-level involvement in relevant training needs to improve.
- > The service meets the expected standard of good care in planning for the future. It ensures that people's preferences, dignity, and choices are respected, even though it currently does not manage complex care at end of life.

### Score: 3

Regulation match 9, 10 (consider regulation 11).



#### WELL-LED

There is an inclusive and positive culture of continuous learning and improvement. This is based on meeting the needs of people who use services and wider communities, and all leaders and staff share this. Leaders proactively support staff and collaborate with partners to deliver care that is safe, integrated, person-centred and sustainable, and to reduce inequalities.

There are effective governance and management systems. Information about risks, performance and outcomes is used effectively to improve care.

https://www.cqc.org.uk/guidance-regulation/providers/assessment/single-assessmentframework/well-led

#### **Rating: Outstanding**

Overall Evidence for the Well-Led Domain:

The auditor looked at 8 out of 8 quality statements for the Well-Led domain, these were Shared Direction & Culture, Capable, Compassionate & Inclusive Leaders, Freedom to Speak Up, Workforce Equality, Diversity & Inclusion, Governance, Management & Sustainability, Partnerships & Communities, Learning, Improvement & Innovation and Environmental Sustainability- Sustainable Development.

Visiting Angels Burton & Derby demonstrates an exceptionally strong, values-led leadership culture that permeates all aspects of service delivery. The leadership team is visible, and wholly committed to a vision of compassionate, person-centred care that goes beyond compliance to embed integrity, respect, and inclusion across the organisation. Caregivers and clients alike benefit from a culture built on mutual trust and empowerment. The provider's Statement of Purpose and organisational values are not static documents but are actively used to guide decision-making, shape expectations, and uphold high standards. Leaders invest in personal connections with staff, ensuring new team members feel welcomed and aligned from day one. Their open-door ethos and consistent modelling of the service's values have resulted in high staff morale, exceptional retention, and a confident, capable workforce.

The service also excels in how it creates safe spaces where staff feel empowered to speak up, raise concerns, and contribute meaningfully to service improvement. Practical support initiatives such as confidential counselling access, interest-free loans, and flexible rota adaptations reflect a leadership team that listens, acts, and supports the holistic wellbeing of its workforce. Equality, diversity, and inclusion are embedded into daily practice, not just policy, with lived examples of fair opportunity and genuine celebration of cultural and individual identity.

Governance systems are structured, responsive, and data informed. The use of the Birdie care management system has strengthened oversight and enabled proactive, real-time learning. While some governance policies required updating at the time of audit such as the Business Continuity Plan immediate action was taken, reflecting the leadership's transparency, responsiveness, and commitment to continuous improvement.

Partnership and innovation are also standout strengths. The service plays a meaningful role in the wider community, sustaining long-term, impactful relationships with organisations like CarersPlus Café, Derby & Burton Hospitals Charity, and DAACSS. These initiatives are not tokenistic but reflect a culture of active citizenship and co-production. Internally, the service is dynamic and forward-thinking, with leadership creating space for innovation to emerge from all levels of the team. Staff feel trusted to trial new ideas, with examples such as the introduction of a client newsletter and responsive care



adjustments arising directly from team suggestions and digital insight. Taken together, these factors reflect an 'Outstanding' level of leadership, capable, compassionate, inclusive, and deeply attuned to the needs of both people supported and caregivers.

This service scored 91 (out of 100) for this area. Find out what we look at when we assess this area and how we calculate these scores. <u>https://www.cqc.org.uk/assessment/quality-statements</u> <u>https://www.cqc.org.uk/assessment/quality-performance/reach-rating</u>

### **Shared Direction & Culture**

- Visiting Angels Burton & Derby demonstrates an exceptionally strong, values-driven culture that is both embedded and lived across all levels of the organisation. The provider's vision is not only clear and inclusive but has been actively co-developed and continuously reinforced through leadership, engagement, and example. This culture goes beyond compliance, it reflects an organisation that truly leads with integrity, compassion, and community focus, enabling both staff and clients to thrive.
- Clients benefit from a culture deeply rooted in respect, dignity, and compassion. The service's vision of delivering high-quality, personalised care is consistently reflected in client feedback, which highlights a warm, professional, and empathetic approach from all Angels.
- Staff described the culture as "kind, empowering, and people-first," with one relative commenting; "they approach every client with kindness, compassion, empathy, respect, and integrity. They are committed to the highest standards for each client and these standards never drop, I know as they have cared for 2 family members".
- All staff were clear about the organisation's values and how these translate into day-to-day actions, decision-making, and expectations of service quality.
- While not directly observed in this domain, the leadership culture was evident in how care staff spoke about their work, their clients, and the pride they took in delivering care aligned with the provider's values. Interactions described in care records and supervision notes consistently reflected respect, dignity, and compassion.
- People commented on the provider's openness and commitment to person-centred care, valuing the service's community engagement and responsiveness to local needs.
- A clear and comprehensive strategy and vision is in place, underpinned by principles of transparency, equity, inclusion, and human rights.
- New staff receive in-depth inductions which include a strong emphasis on the provider's values, and the Registered Manager personally meets with each new team member to listen to their feedback and embed a shared understanding from day one.
- Leadership practices are transparent and responsive, and team meetings and supervisions are used to reflect on practice and encourage two-way communication.
- > The culture at Visiting Angels Burton & Derby has led to high levels of staff satisfaction, low turnover, and strong retention, factors which directly benefit clients through continuity and relationship-based care.
- The leadership team were described as approachable, emotionally intelligent, and committed to continuous improvement, showing openness throughout the inspection process and actively seeking feedback to improve further.



- The service's Statement of Purpose (SOP) is meaningful, up to date, and reflects the organisation's mission, values, and person-centred, carer-centric approach. It has been recently reviewed to align with the updated Visiting Angels mission statement, ensuring consistency across national branding and local service delivery.
- The leadership team understands the importance of clearly defining and communicating the organisation's purpose to staff and clients. Staff at all levels are aware of the Statement of Purpose and demonstrate how their roles contribute to delivering high-quality, compassionate, and respectful care.
- > As a result of this embedded and inclusive culture, staff feel empowered to speak up, contribute ideas, and uphold exceptionally high standards of care.

### Score: 4

Regulation match 10, 12, 13, 17 (consider regulation 9 and registration regulations 2009, regulation 12).

### Capable, Compassionate & Inclusive Leaders

- Leadership at Visiting Angels Burton & Derby is demonstrably compassionate, inclusive, and deeply aligned with the service's values and community focus. Leaders at all levels are visible, approachable, and deeply invested in both the wellbeing of their staff and the quality of care delivered. The leadership team lead by example and consistently demonstrate emotional intelligence, integrity, and commitment to learning and improvement. Their credibility, humility, and values-led approach underpin a culture that supports excellence and personal growth across the service.
- The compassionate leadership style directly enhances the experience of people using the service. Clients benefit from a workforce that is well-supported, motivated, and led by example, resulting in reliable, person-centred, and high-quality care.
- Staff consistently described leaders as capable, knowledgeable, and exceptionally supportive. Leaders were praised for their accessibility, honesty, and compassion, with staff at all levels feeling heard, supported, and encouraged to grow. The ethos of compassionate leadership was evident in team interactions, with leaders evidencing respectful relationships and modelling kindness.
- Although not directly quoted here, people have noted the responsive and collaborative nature of the leadership team, reflecting a wider impact of their compassionate and inclusive leadership across the health and care system.
- Leaders bring together skills, knowledge, experience, and life skills, as evidenced by leadership qualifications, previous health and care experience, and ongoing development.
- Discussions with leaders revealed a clear understanding of the local care context, workforce challenges, and community needs, which they proactively address through support, training, and development initiatives.
- There is ample evidence of innovation and leadership with a selection of Derby & Burton Hospitals Charity as "Charity of the Year" for 2025/26, reflecting forward planning and purposedriven alignment. In addition to this with the creation of a Carers' Committee empowers the people they support to lead fundraising and engagement, embedding co-production in their community strategy.



- Staff across the service are encouraged to lead or participate in community-facing initiatives, showing organisational alignment.
- A structured approach to leadership development was evident. The Registered Manager highlighted that they couldn't do all of this without the wider staff teams. Members of the management team were appointed and supported to create stability and resilience across the service.
- Leaders invest in staff development, evidenced by structured training plans, career progression discussions, succession planning and mentoring. The auditor reviewed a proposal of the providers succession plan and this clearly defined future roles and responsibilities for the leadership team.
- > The impact of this inclusive and capable leadership is reflected in high levels of staff satisfaction, excellent staff retention, and a shared sense of purpose across the workforce.
- Staff feel empowered to contribute ideas and take initiative, leading to continuous service improvement and a culture where people are valued, respected, and supported to succeed.
- This evidence observed supports an 'Outstanding' rating as leadership is not just functional, but inspirational, visibly aligned with the service's values and committed to compassionate, inclusive care.
- Leaders create an environment of psychological safety and professional growth, resulting in high morale, accountability, and consistent care quality. There is a clear focus on continuous development of both individuals and the service, supported by strategic investment in leadership capacity and staff empowerment.

### Score: 4

Regulation match 6, 7, 18, 19 (consider regulation 4.5 and registration regulations 2009, regulations 14, 15).

### Freedom to Speak Up

- The provider has embedded a strong and proactive culture of psychological safety and open communication across the workforce. Staff feel empowered to speak up about concerns, share ideas, and access support when needed, with clear processes in place and leadership that listens and acts.
- There was evidence of individual team members (referred to internally as 'Angels') confiding in senior staff when facing deeply personal challenges, including mental health issues linked to past trauma. In one instance, an employee disclosed a personal history of significant difficulties that had recently resurfaced and was affecting their wellbeing. With compassion and discretion, the management team facilitated rapid access to professional counselling through the company's employee support programme. The team extended support beyond the initial 6 sessions whilst the staff member awaited NHS intervention, ensuring continuity of care and emotional stability during a critical time.
- Financial wellbeing has also been recognised as a key factor in supporting workforce resilience. The provider has offered interest-free personal loans to help staff cover essential expenses such as car repairs, enabling them to continue working. Additionally, the organisation's own companybranded vehicle is made available to staff whose personal transport is temporarily unavailable,



with insurance covered by the business. This practical support not only promotes attendance and reliability but demonstrates a values-led approach to supporting the team holistically.

- Adjustments for health and capability have also been made sensitively and proactively. One longstanding team member experiencing ongoing health issues was supported through a health risk assessment and changes to their rota, ensuring that more physically demanding visits were removed. This showed the provider's commitment to retaining valuable staff through reasonable adjustments, promoting inclusion and job retention.
- Culturally, the leadership team embeds openness and innovation. At a recent team meeting, staff were invited to reflect on how another provider might outperform them and were encouraged to suggest improvements. This exercise resulted in practical ideas being adopted such as the introduction of a client newsletter and recognition for individual contributors, reinforcing that caregiver voices lead to real change.
- Overall, these examples reflect a mature and embedded Freedom to Speak Up culture where staff feel safe, valued, and supported both personally and professionally. The provider's approach ensures issues are identified early, solutions are person-centred, and the workforce is treated with empathy, dignity, and fairness.

#### Score: 4

Regulation match 10, 12, 13, 16, 17 (consider regulation 9).

#### Workforce Equality, Diversity & Inclusion

- > The provider clearly demonstrated they valued diversity in their workforce. They worked towards an inclusive and fair culture by improving equality and equity for people who worked for them and demonstrated a high level of empathy towards the staff team.
- There was an Equality and Diversity policy in place and the auditor saw evidence that the provider embraced and celebrated diversity. For example, organising awareness day celebrations in the office and sending group messages to the team to celebrate these days such as national schizophrenia days, international self-care days, black history month and trans awareness weeks.
- For staff communications the provider arranged a buffet as part of team meetings, and we saw communication with staff to ensure any specific dietary requirements were met.
- Staff felt the provider valued diversity in their workforce. One staff member commented, "I tell [persons name] I love my job every day, I wouldn't want to be anywhere else, I love going to work".
- The provider demonstrated a deeply embedded commitment to equality, equity, and inclusion within the workforce, underpinned by both policy and consistent practices. Staff were not only protected from discrimination but were actively celebrated for their unique identities, cultures, and contributions. There was clear evidence that inclusion was not treated as a compliance requirement but as a core value within the organisational culture.
- The provider went beyond standard expectations to promote equity in career progression. As a whole staff felt seen, valued, and assessed based on merit, compassion, and skill, evidencing the provider's commitment to removing unconscious bias and championing talent from all backgrounds.



The consistent, practical application of inclusive principles combined with emotional support and a strong sense of organisational care demonstrates a level of leadership and culture that aligns with good characteristics. The provider does not just promote equality and inclusion; they live it, creating a psychologically safe and equitable workplace where every team member feels recognised and respected.

Score: 3

Regulation match 17, 18, 19.

### Governance, Management & Sustainability

The General Data Protection Regulation (GDPR) is a comprehensive data protection law that was implemented by the European Union (EU) in May 2018. The GDPR was incorporated into UK law through the Data Protection Act 2018. The UK GDPR essentially mirrors the EU GDPR with some minor modifications to make it compatible with UK law. It governs how businesses and organisations handle personal data, ensuring that individuals have control over their own data and that it is processed fairly and lawfully. The UK Information Commissioner's Office (ICO) is responsible for enforcing the GDPR in the UK and has the authority to impose fines for non-compliance. The GDPR sets out various rights for individuals, such as the right to access their personal data, the right to rectify inaccurate data, the right to erasure (or "right to be forgotten") and the right to data portability, among others.

Overall, the GDPR in the UK aims to strengthen data protection and privacy rights for individuals while also providing a framework for businesses and organisations to ensure they handle personal data responsibly and securely.

#### https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr/

- The provider had clear responsibilities, roles, systems of accountability and good governance.
   They used these to manage and deliver high-quality, sustainable care, treatment, and support.
   They always acted on the best information about risk, performance, and outcomes, and shared this securely with others when appropriate.
- Everyone employed at the service had a clear understanding of their role and responsibilities and we saw people had a job description as well as induction and training appropriate to their role.
- The provider had invested in a new technology platform named 'Birdie' that supported their oversight of the service and had robust governance processes in place. The auditor saw examples of how the system supported the leadership team to oversee care delivery and they had analysed data on risk to identify trends and themes and corrective action identified which they added to a "live" service improvement plan.
- Issues identified and any action to address these. For example, a person supported who had experienced a deterioration in their mental health and cognition, we saw evidence that this was shared securely with external professionals, the care plan and risk assessments updated, and staff were aware of changes following robust communications.
- We reviewed a quality report that the organisation had created, this contained data on safeguarding referrals, medication issues identified and addressed, staff survey feedback and future business plans. The use of the overarching audit wasn't embedded fully but the Registered



Manager advised this was the plan moving forwards but that currently the focus was on transferring all clients across to 'Birdie'.

- During review of governance documentation, it was noted that the Nominated Individual listed within the operational structure requires updating to reflect the current postholder. This update has been acknowledged and is being actioned to ensure that CQC holds accurate, legally required information as part of the provider's registration. This was actioned immediately by the Director.
- Overall, the Statement of Purpose is not treated as a static document, but is actively used to support decision-making, governance, and team alignment, reinforcing a shared direction and culture that prioritises both staff wellbeing and outstanding care outcomes.
- Visiting Angels Burton & Derby has a clear and structured approach to risk management. The service has developed a Failure Modes and Effects Analysis (FMEA) which is exceptionally detailed, comprehensive, and reflective of current operational risks. The FMEA has been recently updated and is actively used to anticipate potential failures in care delivery and implement preventative actions, demonstrating a proactive governance approach.
- However, the Business Continuity Policy (BCP) contrasts in scope and depth. The current version is basic in content and overdue for review, with the last scheduled update dated December 2024, making it now five months out of date. This delay is recognised as an organisational issue, with the responsibility for policy maintenance sitting at the wider network/franchise level, not with the local provider.
- The local leadership team remains aware of the contents of the current BCP and continues to implement its core procedures. However, the auditor advised that the service should adopt the updated version of the BCP and recommended enhancing it to include more detailed escalation procedures, external contact information beyond the current directors and office team, and contingency scenarios aligned with the level of detail present in the FMEA. This was actioned during the compliance audit by one of the Directors and shared with the auditor, evidencing responsiveness to safety.
- > This would bring the policy into alignment with the otherwise high standards of governance and sustainability already demonstrated by the service.

### Score: 3

Regulation match 17 (consider regulation 12 and registration regulations 2009, regulation 14, 15, 16, 17, 18, 20, 22a).

### Partnerships & Communities

- > Visiting Angels Burton & Derby demonstrates 'Outstanding' practice in how it engages with local communities and works in meaningful partnership with organisations across their territory.
- > The provider and Nominated Individual goes well beyond the expected standard by actively initiating, sustaining, and embedding partnerships that significantly improve experiences and outcomes for people receiving care and the wider community.
- The provider actively builds strategic and informal partnerships to improve outcomes and support wider community health and wellbeing by collaborative working and shared goals,



demonstrated with CarersPlus Café, Derby & Burton Hospitals Charity, DAACSS, and NHS End of Life teams.

- > The auditor found that networking and collaboration are proactive and well-resourced, not opportunistic or one-off with a tangible impact on people and communities.
- Ongoing weekly support to CarersPlus Café since July 2023 includes; staff volunteering their time each Tuesday, sponsoring refreshments and hosting well-attended monthly bingo events, improving emotional wellbeing and social connection.
- > The provider has supported and facilitated access to specialist information by introducing the group to Derby Hospital's End of Life Coordinator, a clear example of bridge-building across sectors.
- Active involvement in community events like the "Caring in the Community" day, where staff provided on-the-spot support and guidance to unpaid carers.
- The auditor observed evidence in sustained relationships and local reputation by way of the provider being invited to milestone celebrations (e.g., CarersPlus Café 10th anniversary), a clear reflection of the value and trust placed in the service by community groups.
- Re-engagement with DAACSS shows the provider's commitment to expanding reach and staying connected to evolving community needs.
- > There is a cultural ethos of partnership and community engagement is embedded in the service ethos, not reliant on one individual.
- The service exceeds the fundamental standards for this quality statement by taking a leadership role in the local community. It shows a deep understanding of local needs, uses this insight to build relevant, impactful partnerships, and empowers people using the service to be part of that process.
- Relationships are collaborative, consistent, and mutually beneficial, demonstrating the provider's commitment to long-term community investment.

### Score: 4

Regulation match 12, 17 (consider regulation 9).

### Learning, Improvement & Innovation

- Visiting Angels Burton & Derby demonstrates an exceptional and embedded culture of continuous learning, innovation, and reflective improvement. The provider and leadership team are consistently forward-thinking, using both data and feedback to shape better outcomes and drive high-quality, person-centred care.
- Technology is strategically implemented through the Birdie platform, enabling proactive service oversight, timely interventions, and organisational learning. Innovation is embraced not for novelty, but for measurable improvements in safety, effectiveness, and quality of life for the people they support.
- People benefit directly from the provider's investment in innovation, with responsive care adjustments being made based on data-driven insights. For example, increased falls monitoring led to earlier engagement with occupational therapists and timely deployment of equipment, improving safety and independence.



- Staff spoke positively about the way learning and innovation are prioritised within the service. They described a leadership culture that encourages curiosity, improvement, and learning from mistakes, with one staff member stating they felt "trusted to bring ideas forward and supported to implement them."
- While innovation in practice isn't always directly observable, its impact is evident in the way care is adapted proactively, supported by the Birdie system. For example, reviewing daily notes, incident patterns, or care tasks and updating support accordingly.
- The provider engages in provider forums and partnership networks, contributing to sector-wide learning and improvement. They came across to the auditor as collaborative and forwardthinking about their local area and the care systems that need embedding.
- The provider uses the Birdie digital care management platform to monitor and analyse client data, enabling the leadership team to spot patterns, address risks, and drive continuous improvement.
- Built-in oversight tools allow for remote monitoring by the directors, with functionality to review daily logs, incident reports, and care plans. This ensures that any necessary changes to support can be implemented quickly.
- A comprehensive service improvement plan is in place, informed by audit outcomes, staff feedback, client needs, and sector developments. The plan is regularly reviewed and updated, with clear objectives that prioritise safety, dignity, and outcomes.
- The use of Birdie and a learning-led culture has led to demonstrable improvements in safety, responsiveness, and care personalisation. Issues are not only addressed when things go wrong, they are anticipated, analysed, and prevented where possible.
- Learning is cascaded effectively to staff through meetings, messages, and supervision, ensuring everyone shares accountability for service development. There is clear evidence of embedded innovation that supports real-time improvement, rather than being tokenistic or reactive.
- > The auditor found that learning is not just encouraged, it's structured, strategic, and part of the everyday culture at Visiting Angels Burton & Derby.

### Score: 4

Regulation match 16.

### Environmental Sustainability- Sustainable Development

- Visiting Angels Burton & Derby has a clearly structured and well-considered Environmental Sustainability Plan, which covers buildings, transport, paper use, and recycling. The organisation has a clear understanding of the environmental impacts of its operations and has taken meaningful steps to mitigate these, particularly through digital transformation and mindful resource use. While much of the service's sustainability impact is constrained by its building tenancy and rural geography, creative and responsible measures are being implemented to minimise their footprint and encourage staff participation.
- The provider evidenced leadership and awareness in relation to the environment and it's sustainability, the service has produced a formal Environmental Sustainability Plan with defined focus areas and governance oversight.



- Staff are introduced to sustainability practices at induction, showing early-stage cultural integration.
- Budgeting is used strategically to support low-emission behaviour, such as annual car servicing and MOTs.
- Whilst leasing part of a larger building limits control over emissions, the service still; encourages staff to reduce energy use (e.g. turning off lights and equipment), uses LED lighting and reusable cups instead of single-use plastics of which these actions reflect a practical and realistic approach given site constraints.
- Recognising the necessity of personal vehicles in a semi-rural care model, the service still takes steps to reduce emissions and uses Birdie software to improve geographical rostering and reduce mileage.
- The business owners provide £75 toward annual car servicing, pays for MOTs, and issues regular tyre checks to ensure efficiency, it also encourages (but does not yet mandate) use of hybrid/electric vehicles. This represents strong mitigation given the limitations of local public transport.
- Birdie software is being phased in to replace paper care plans and rostering, which; reduces paper use and associated carbon outputs, lowers demand on shredding services, improves logistics, reducing unnecessary travel between visits and printing defaults are embedded (double-sided, black & white) and FSC-certified paper use are embedded practices.
- All obsolete paper is scanned and sent for secure, ISO14001-certified recycling and cardboard is actively recycled. These practices show a commitment to waste management even in backoffice functions.
- > The provider has demonstrated clear action, accountability, and meaningful change toward environmental sustainability.
- The service is responsive to local challenges (e.g. rural geography, building limitations) and has introduced well-targeted, practical initiatives to reduce impact. However, there is limited evidence of measurable outcomes, such as reduced mileage statistics, carbon reduction tracking, or formal engagement with regional sustainability goals.
- > There is room for more innovation, such as sustainability champions, formal partnership with green organisations, or embedding sustainability in Quality Assurance reporting.

### Score: 3

Regulation match 17.



Areas for Action- colour coded for Quality Assuran	ce Rating of Actions
<b>Enforcement Action &amp; Breaches-</b> the quality and safety of the service has fallen to unacceptable levels.	* N/A
Immediate Actions- to be taken as risks to people living and using the care service have been identified. Priority attention to be given to mitigate further risks. These areas will be regulation breaches or potential offenses against regulations, where there is the possibility of enforcement action to be taken by CQC.	✤ N/A
Moderate Risks to Service Delivery. Aim to be completed within 4 – 8 weeks These areas will be in line with CQC requirements where this is a potential breach of regulations that is not sufficient to demand enforcement action.	☆ N/A
Development of Service- no current risks to people living and using the care service. To be completed within 6 months. These areas will be in line with CQC recommendations where if continued they could lead to further best practice observations and guidance, potentially leading to 'Outstanding'.	<ul> <li>Introduce individual fire safety risk assessments for clients using emollient creams, especially where smoking or oxygen is present. This will reduce fire risks and show clear management of personal safety. A template has been shared by the auditor.</li> <li>Ensure the safeguarding tracker includes a clear section that records actions taken and lessons learned for each concern. Check all recorded dates for accuracy and consistency to improve reliability and oversight.</li> <li>Extend DBS re-check intervals to three years to further raise safety standards.</li> <li>Document and continue to promote internal career progression journeys to showcase staff retention and mentoring.</li> <li>Improve documentation of field observations by ensuring infection control actions are explicitly recorded in care notes (e.g., "gloves and apron worn").</li> <li>Roll out Oliver McGowan training.</li> <li>Expand medication competency checks to include more questions and scenario- based examples. Ensure PRN and variable dose medicines have clear written instructions from prescribers so that care staff can administer them safely.</li> </ul>



*	Introduce learning themes analysis every
	quarter to track recurring patterns (e.g.,
	discharge issues, medication handling).
	Create a staff-led reflective learning
	forum (e.g., quarterly) to promote peer
	discussion of incidents and share ideas
	for service improvement.
	Update the Significant Events Tracker to
	include a dedicated "Outcome/Learning"
	column.
• • • • • • • • • • • • • • • • • • •	Add risk management reflection
	questions to client reviews (e.g., "Do you
	feel supported to take positive risks?").
	Expand the medication competency
	questions set used for assessment to
	include scenario-based or 'red flag'
	indicators.
	Introduce a medication protocol review
	checklist for when clients are prescribed
	variable doses or complex regimes.
	Develop and implement a competency
	framework for urinalysis assessments.
	Review the National Early Warning Score
	(NEWS) system for potential use in
	identifying health deterioration.
	Extend condition-specific training and
	ensure all staff are confident in
	identifying early signs of deterioration.



#### **Conclusion & Next Steps for the Care Provider to Consider**

Dependent upon outcomes and if the contents of this report has led to actions please consider the advice and guidance listed and include this within your own service improvement plan / sustainability and development plan. This should be reviewed routinely by the Registered Manager and the Nominated Individual.

Resources

The below links will be useful for both providers and Registered Managers, please select the link for ease of reference.

https://www.cqc.org.uk/guidance-regulation/providers/registration

https://www.cqc.org.uk/guidance-regulation/providers/regulations

https://www.cqc.org.uk/guidance-regulation/providers/notifications

https://www.cqc.org.uk/guidance-regulation/providers/assessment

https://www.cqc.org.uk/guidance-regulation/providers/enforcement

https://www.cqc.org.uk/what-we-do/how-we-do-our-job/fundamental-standards