

A photograph of two women in a public square, likely in Rome, with the Colosseum in the background. One woman, with red hair and glasses, is seated in a wheelchair and smiling. She is wearing a light blue sleeveless top and a light blue skirt. The other woman, with dark hair, is standing and leaning over the wheelchair, holding the handlebars. She is wearing a black top and a long, flowing skirt with a large pink and black floral pattern. The background shows the ancient stone structure of the Colosseum and a paved plaza with other people.

## A guide to live-in domiciliary care

Christies  
Care

Est. 1987

Living independently at home

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“

If you're in a home you can't get up at 1am and make a cup of tea or put a film on. My late husband said, 'As long as I can wake up and look through my window, the world's all right.'

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Nursing the Nation, ITV





“

We have enjoyed each others company and worked together to share household tasks, including looking after my tortoise! I have enjoyed showing Lee this part of East Anglia. I look forward to seeing her in the future.”

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Respite Client

# Introducing live-in care

There are three main reasons why you should use a live-in carer when you want or need full-time support.

## For quality of life

With a live-in carer, you have one-to-one help, letting you lead the life you want to lead. You get up and go to bed when you want, eat what you want, go out where and when you want, see your friends when you want. Most care homes work on a ratio of at least four clients to one carer, so cannot give you a tailored service.



## For value

At a weekly cost in the region of £1000-£1500 (for more details, see page 22), live-in care works out cheaper than most good care homes. The savings are greatly increased when family members can 'do' a week or so at a time or when a couple both need support. They can share one live-in carer, rather than paying two care home fees. It is also substantially cheaper than having three carers working in eight-hour shifts.



## To stay in your own home

According to a recent survey by the Alzheimer's Society, 85% of people interviewed do not want to go into a care home. We all want to be in our own homes, surrounded by the neighbours, garden, pets, furniture and shops that we have always known. We don't want to be committed to institutional life.



# Why choose Christies Care?

## 30+ years

experience of live-in care grown through word of mouth.

We recruit & vet our carers carefully (including enhanced DBS checks). On average, only 4% of applicants become a Christies Carer.



Our carers must pass a **2 week** induction training programme (which exceeds the standards laid out in the Care Certificate) and yearly update training.

We have the right carers for our clients & enough carers to be sure that we can find the right personality 'fit', so that clients will get on well with carers.



We have a team of experts throughout the country, who are close to our clients, wherever they live.



## Our other advantages include:

### A careful assessment

We listen carefully to our clients. We like to come and visit you to make an assessment of your needs and wishes, if possible before we introduce your first carer. This enables us to find out what you want and need and to help agree the balance of responsibilities between carer and client in order to make assignments a success.

### Choosing and training the right carers

The personal relationship between carer and client is of vital importance. We aim to assign carers who get on with their clients and are competent to carry out the daily tasks.

We offer advanced training courses for carers who contract with clients with severe dependency. If we have a client with particular needs, we will run a training course focused on those needs.

### A nationwide network

Our clients live all over the UK. We have Local Area Advisors who live all over the UK and work with their local clients. In addition, we have good working relationships with family-owned hourly agencies who help us help our clients at their local level. In this way, we can combine the efficiency of a single operating base with the close local support that is so often useful.

In our most recent inspection, the Care Quality Commission (CQC) rated us outstanding. Only 2% of all social care providers reach this level of excellence.

Inspected and rated

**Outstanding** ☆



Finalists for the Health Investor Award

**HealthInvestor**  
Awards 2019

**Finalist**



“

Thank you to everyone for all of your hard work supporting N to live in his own flat with the lifestyle that he enjoys. He has a great team around him, which makes all the difference.

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Client's Clinical Psychologist

## Why choose Christies Care? *continued*

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### Keeping up to date

We get in touch regularly to make sure our record of your wishes is up to date. This is then relayed to the carer who can respond to any changes or developments. This includes a check on the quality of service given by each carer, so we can be sure we continue to assign those who are suitable for our clients.

We also ask carers for their views. We want to make our service work well.

We know that live-in care can be lonely. We offer support to the carers we assign, especially over their first few weeks of work. We encourage them to call us whenever they feel the need so we can offer them support, guidance and encouragement. We like to make regular visits to our clients, generally four times a year but more often when necessary. At times, we will carry out unannounced visits, as part of our quality checking process.

### Reliability and continuity

We do not let our clients down. Sometimes we ask if we can delay our commitment to start for a few weeks because we may not have the right carer available. However, once we have started, you are not left without a carer. Our size allows us to find a substitute for a carer who has to leave her client. We understand the importance of continuity which is why we try always to assign a team of carers to our clients.

### Our philosophy of care

The carers we introduce are trained to treat clients with respect. They work to maintain privacy, modesty, dignity, choice, independence and self-determination.

We maintain confidentiality at all times whilst allowing clients to have access to their own records.

We are open about the costs involved, especially where a client's wishes for extra attention may impose on their carer's rights and the normal conditions of service.

We do not discriminate on the grounds of age, race, gender, sexual orientation, religious belief or disability.

### See for yourself

We have a purpose-built disability-friendly bedroom in our Guest House so that clients can come and see us at first hand.

# When is live-in care useful?

Providing over 20,000 weeks of care a year all over the UK, we know of the widely different circumstances that show how useful it is to have a live-in carer. Especially for a person who wants to stay at home for as long as possible, or who might be anxious at being moved into a care home, even for only a few weeks.

## Short-term live-in care:

Many of our clients only need a carer from us for a few weeks. We welcome this: if having a live-in carer for a few weeks helps our client to continue to stay at home and independently, then our service has worked well.

### Respite for family

We can assign a live-in carer to fill in for a family member or carer who needs a holiday or break from work. It is often the preferred option for clients who might otherwise need to spend the period in a care home. Live-in care is the natural choice when respite care is needed, so a family carer can take a break with minimal disturbance or fuss. It can even save the cost of a house-sitter or pet-sitter.

### Respite for a private carer

We are often useful to fill gaps for clients who generally employ their own carers. We can do this as an ad hoc or regular arrangement - just give us as much notice as possible.

### Rehabilitation & convalescence

Many people only need to engage a carer for a short time to support them through a period of recuperation or convalescence, such as in the few weeks after returning from hospital. We can assign carers to support them while they regain the strength needed to return to independence.



## When is live-in care useful? *continued*

### A 'quick start' service

Although Christies Care is not an emergency service, we are often able to assign carers at short notice, for example to provide cover when a full-time carer is taken ill or leaves unexpectedly. Live-in care is a cost-effective way to save someone from being sent to a care home at short notice, which can create as many difficulties as it solves.

### For flexible costs

If family are able to help in any way, the cost of full time support is sharply reduced. If a family member can do one week in four then the annual cost will be reduced by a quarter. Furthermore, its flexibility means you can save live-in care for when you really need it - it can be used for one or two weeks a month, or whenever the need arises.

### A few weeks' trial

A potential client may already have several hours of care a day and now wants help at night. What next? Live-in or care home? We offer to assign carers for a four week trial to help our client decide what to do.

## Long-term live-in care

### Long-term housekeeper and carer

Many clients need someone who will stay in the house almost all day so that they can live at home independently and safely. For some carers, their main task is to be a good companion and to offer reassurance and comfort for the client and client's family. Others provide the full spectrum of physical support.

### Complex conditions

We are used to providing carers to adults with complex conditions. We give specialist training to our carers so that they can provide the proper level of support in these circumstances.

### End of life care

Looking after someone with a terminal illness requires a special type of person who can carry out the necessary tasks quietly and calmly. We give special training to the carers we assign so that they have the skills necessary to provide terminal illness support. They will be working alongside community nurses and other professionals as well as the client's family. Often, our client is receiving NHS continuing healthcare support at this stage. We welcome this and are contracted to many Clinical Commissioning Groups for this purpose.

### NHS continuing healthcare

If our client has a dependency that makes him or her eligible for NHS continuing healthcare, the NHS pay the cost of the care, this is not means tested. We are registered with the CQC as a domiciliary care agency with a rating of 'outstanding' and are thus able to contract with Clinical Commissioning Groups to deliver the care they require.



“

She got me out in the sunshine and that made all of the difference.”

Letter from client



# How does it work?

The relationship between a client and her carer is core to the success of live-in care.

## How does it work?

The fee Christies Care charges depends on the work you want to be carried out and is agreed before we assign the first carer. A consistent fee is set, one that includes a carers travel expenses. The fee will usually be for a period of seven days, unless otherwise agreed.

Carers are paid a higher rate for bank holidays and this is included in the fee that you pay.

In addition to the main fee you may be expected to pay an allowance if night disturbances are excessive.

If your carer's time off is reduced for any reason you may be expected to pay a reduced time off allowance.

The carer's week runs from Wednesday to Wednesday. We will agree the number of weeks our carer works before she has a break. For long term live-in care, we aim to introduce a stable team of carers to you, each of whom you'll get to know well.

## What will my carer do?

Before we assign a carer to you, it's important that you think carefully about the tasks you need carrying out. On pages 16 to 18, we have put some details of housekeeping, social and personal care tasks your carer will expect to do.

A description of these tasks will form the basis of our contract with you. Normally, we will set these out as a support plan. We will produce the guide, plus any necessary risk assessments, following our visit to you before we start.





What else? Are there activities or pastimes you want to take up, now you have live-in care to help? A key part of our service is to help our client enjoy themselves as much as possible.

Clearly, your requirements will change over time and our carer will note any changes and pass them to us so we can update your support plan. These changes can then easily be shared with our other carers. Our feedback calls to you will also give us the chance to discuss changes with you and correct any misunderstandings. If we feel that your moving and handling may involve significant risk to you and our carer, we will need to carry out a risk assessment so that we can recommend additional equipment or techniques to protect the safety of you both.

We recognise that all our clients are vulnerable. Although we can examine risk factors and make recommendations to reduce or eliminate them, we cannot be responsible for events in your home. It is your home and we do not run it.

### Support & feedback

To make sure that our assignments are successful, we offer clients our support whenever they need it. We also give guidance, support and advice to carers.





“

The training was very comprehensive. I was very impressed with the training. The trainers are very committed and put a lot of energy into the course. I felt part of an award winning team and caring organisation.'

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Christies Carer

# Choosing & training suitable carers

Our success depends on finding people who are suited to care work and then vetting and training them well.

We take great care in selecting and vetting applicants, before offering them high quality training and regular support when they go on to work with their clients. When we assign a new carer, we ask our client to tell us if they are happy with the person we have assigned. We depend on the carers to give the standard of service you require.

## Selection of suitable people

Increasingly, our carers come to us from personal recommendations, which is ideal. It means that they already have a good idea what's involved with supporting clients. We always give each new applicant a telephone interview, and follow up two or three references before they come to the office for their face-to-face interviews, training and DBS checks.

## Two weeks of training

Carers come from a wide variety of backgrounds. Many will have previous experience of domestic and personal care. Whatever the carer's background, she will spend two weeks at our training centre for interview, induction and initial training. This enables us to get to know the carers, assess their suitability for live-in care and to match their skills to the differing and often complex needs of our clients. If the carer is not able to pass our training course, we do not want that person as a carer.

Our initial training exceeds the syllabus laid out in the Care Certificate and includes:

- Christies Care philosophies and best practice guidelines
- safer people moving and handling
- continence management
- personal care
- food hygiene
- medication, administering and recording
- safeguarding
- learning disabilities
- dementia awareness
- basic life support and first aid
- nutrition and hydration
- end of life care and
- other care-related subjects

## Advanced training

Some clients need us to assign carers with more than induction and initial training skills.

We run many extra training courses throughout the year for our carers and work with our clients to make sure that we can assign people who are suitably trained.

We are continually expanding the range of training courses we offer our carers. This is recognised by our gaining a number of training and development awards for both our courses and our trainers over the years.

# A good working relationship

When you engage a carer, you take on responsibility for ensuring that her living conditions are comfortable and that she has everything she needs to carry out her work effectively.

We know that carers really appreciate comfortable surroundings and it often influences their choice of clients.

Remember that unless agreed beforehand, a carer's job is to look after one person only. She is there to provide housekeeping, companionship and care and although she should be prepared to tackle an emergency, she cannot act as a qualified nurse.

## Your carers have been told not to:

- Smoke in your home.
- Have alcoholic drinks in your home.
- Invite unknown visitors into your home.
- Make calls on your telephone except to Christies Care and the next carer.
- Act as signatories or witnesses to legal documents.

## Promoting longer assignments

Our aim is to promote longer assignments by the carers you choose. A good working environment for your carer can go a long way in doing this. Also the offer of a short break in the middle of an assignment can be very useful. If family can come every few weeks and substitute for a chosen period, perhaps for 48 hours, your carer can recharge her batteries and be happy to return and continue her assignment.



## A comfortable working environment

You are responsible for providing full board and lodging for your carer.



Your carer needs her own room, which is properly heated, with a comfortable bed, an easy chair, chest of drawers, bedside light and table. Please make sure the room is comfortable and if possible do provide a television.

## The working day

We recommend that you allow your carer at least two hours free time each day, as well as a break of at least 30 minutes each morning and afternoon, and time for her own meals, a bath or shower, and a reasonable night's sleep. If the support you need is particularly strenuous or stressful, you will need to provide additional time off. Free time means that the carer is able to come and go as she pleases - if you insist that she stays in your home, it is not free time. If she cannot get enough free time, she is able to claim some compensation in lieu and this will add to the cost.



If you need your carer to carry out extra night duties, we suggest that you give her opportunities for extra rest during the day to compensate, as a possible alternative to an extra cost to you.

In our experience, carers perform much better when they have adequate rest breaks.

### Internet

We expect our carers to have access to unlimited WIFI. This allows our carers to keep in touch with family members and the office so they feel less isolated. Most of our carers have a mobile device they can use to access the Internet. Carers are asked not to use their mobile devices whilst working.



### Alerts & alarms

It is important that you can get assistance when you need it. We recommend that you invest in an intercom, monitor or mobile door bell, so that you can alert your carer to your needs when they are elsewhere in your home or garden.



### Insurance, safety & risk assessments

You have an overall responsibility to provide safe working conditions in which your carer can carry out her tasks. We will need to carry out a comprehensive series of risk assessments in and around your home and its environment. We make some recommendations below.



- Make your house safe. Check that smoke and carbon monoxide alarms are installed and working properly, that there are no loose carpets, trailing flexes, projecting furniture or poorly-lit places that could give rise to an accident.
- Provide suitable equipment. Ensure that you have everything your carer needs to carry out her tasks properly, including specialist equipment such as hoists, sliding boards, gloves, aprons, etc.
- Ensure that the domestic staff section of your household insurance policy covers your carer for any accident, loss or damage while she is working for you in your home.
- Make sure that your carers are able to work in accordance with normal health and safety regulations. If a client is suddenly too difficult to move with the help of a single carer, we will want to carry out another risk assessment to reduce the risk to both client and carer.



PRINCESS ROYAL  
TRAINING AWARD  
2017

# Housekeeping & social duties

## Companionship

How do you like to spend the day? Do you want someone to read to you, sit with you, and accompany you on walks or visits? Or do you see your carer as being on stand-by until a task needs doing?

## Shopping

You may want to stay in charge of all household expenditure or to delegate all or part of it to your carer. If you ask your carer to do the shopping, we can supply a record book so that everything that is spent can be properly accounted for.

## Handling money, jewellery and valuables

We recommend that you take sensible precautions with all valuables. We can supply a pre-loaded debit card, so that you need not run the risk of giving a third party your cash card and PIN number. This is covered in more detail on page 23.

## Preparing food & cooking meals

Think about whether you would like preparing meals to be a joint enterprise or the sole responsibility of your carer. Carers expect to cook simple meals and follow any special diets for one or two people. They have the right to refuse to cook for large numbers.

## Pet Care

It is a normal part of a carer's duty to feed pets and to give them some exercise each day.

## Housework

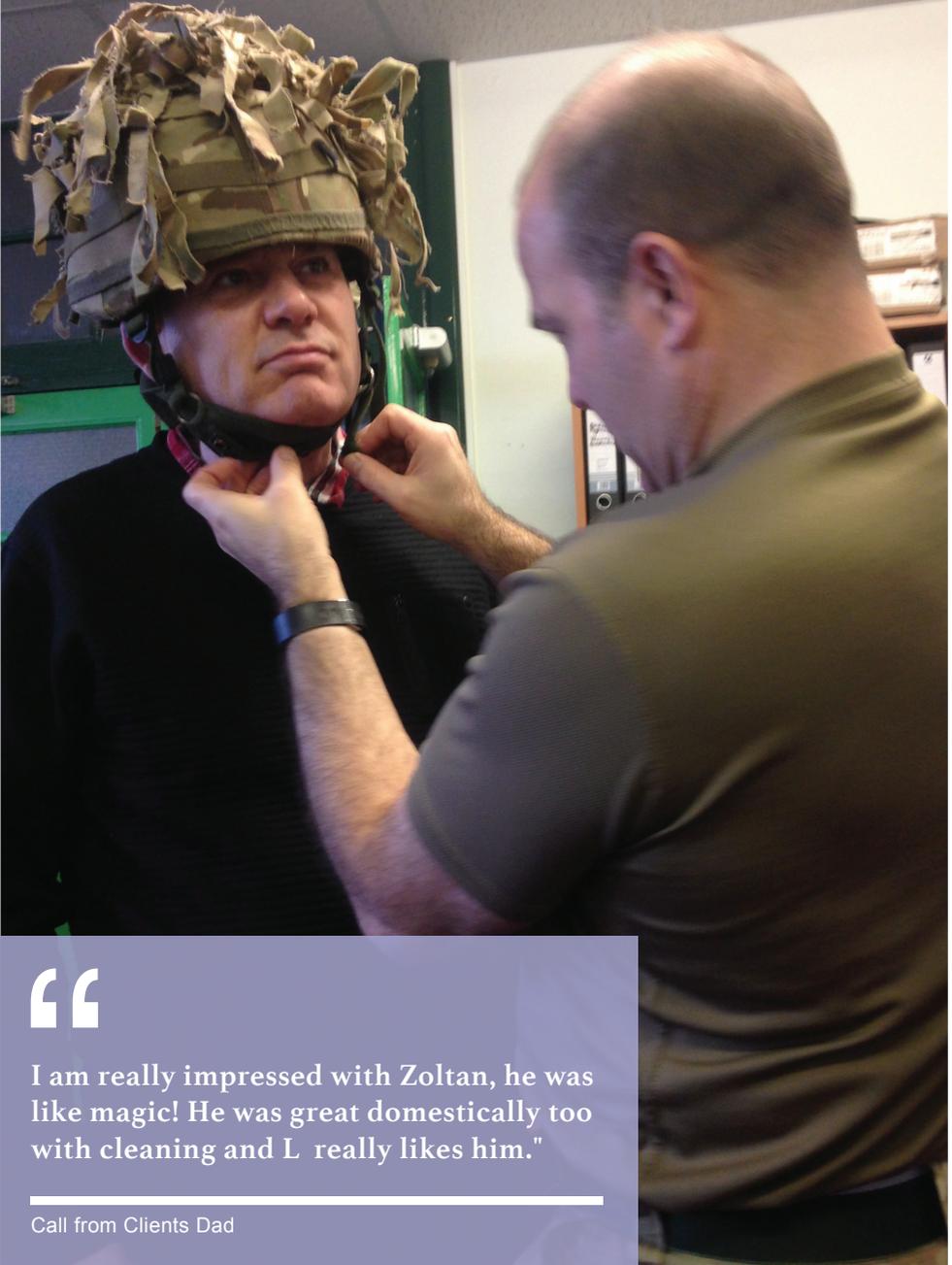
It is part of your carer's duty to keep your house tidy. This includes keeping bedroom, bathroom, and toilets clean, as

well as the kitchen and rooms in which you spend the day. Any heavy cleaning, such as scrubbing carpets, cleaning outside windows and washing curtains, should be subject to special negotiation between you and your carer. We can help in discussions if necessary.

## Driving

Many of the carers we assign can drive. However, our responsibility is limited to checking that a carer has a current driving licence when coming for interview and training. If you ask your carer to drive your car it is at your risk and expense – remember to check and amend your insurance if necessary, and ask to see the carer's full driving licence. We do suggest to our carers that they check that your insurance is amended, before they drive your car.





“

I am really impressed with Zoltan, he was like magic! He was great domestically too with cleaning and L really likes him.”

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Call from Clients Dad



# Personal care

## Dressing, undressing, washing & bathing

Your carers can help with dressing, undressing and choosing the right clothes. They can also help with washing, from helping a client into and out of the bath/shower, to giving bed baths and dealing with your continence needs.

## Care of teeth & hair

Your carers know how to help with oral hygiene and care of hair, make-up, shaving etc.

## Assisting with mobility

Your carers are trained to use a range of equipment to help with their client's mobility including: portable or fixed hoists (electrically or manually operated), turntables, sliding boards and slings.

## Skin & pressure area care

Your carer will work to ensure that your skin is kept in as good a condition as possible between visits from the Community Nursing Service. Your carer may wish to have your permission to make a record of any pressure areas before she starts care.

## Continence Management

Your carers are able to deal with the consequences of bladder and bowel incontinence. They are also able to work with all items of equipment regularly used in bladder and bowel care, such as colostomy, ileostomy or catheter bags.

## Giving medicines

Carers assigned by us are given training on medication, including assessments of competence and current good practice. Usually, carers may help their clients follow doctors' directions, provided they have active consent. Your carer will keep a signed record of the time, date and dosage each time medication is given.

## Dosset boxes

Current best practice states that carers should not be asked to fill a client's dosset box. We recommend that the task should be carried out by a pharmacist or GP.



# When a carer moves on

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No carer, however willing, can stay with a client forever. As soon as we have agreed how long our carer will stay with you, we will work with you to plan for a smooth handover to a new carer.

Our aim is to assign you to a regular team of people whom you like. Sometimes, we can arrange for a new carer to come to your home early, before your existing carer leaves, in order to learn your routine under experienced guidance.

## What if you don't get on?

It is rare that the carers we assign don't get on with their clients. However, occasionally personalities do not get along, making both people uncomfortable. When this happens, we will try to resolve the situation as quickly as possible. Please contact us at once if you become dissatisfied with the support you are receiving from your carer.

## Changing your carer

If your carer is agreed to be incompetent or to be behaving inappropriately, we will assign a further carer.

If our carer is injured or sick, we will arrange to introduce a substitute carer for the relevant period of time.

If you are simply unhappy with our carer but there is no incompetence, we will do our best to resolve the situation.

## If your carer wants to leave

If our carer wants to leave before her contracted time, we can find another. She is always asked by us to stay until the substitute has reached your home.

When clients exhibit persistently difficult behaviour, it becomes hard to find carers willing to work for them. We will try and find a solution, in consultation with the family if appropriate. However, it can be hard to find anyone willing to live with a client who exhibits the following:

- Angry and resentful attitude.
- Criticism and comparison with other carers.
- Verbal abuse, whether social, sexual or racial.
- Excessive demands with no time off
- Physical aggression
- Excessive night calls with no additional time off or support.



“

I have enjoyed Jenny's stay and may I thank you and your team who are just great at finding carers to suit my needs. For that I am deeply grateful.”

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Email from a client

# Complaints & safeguarding

We are always happy to get your feedback about the service we provide.

Making a complaint will not threaten in any way the service that we provide to you. Our full complaints procedure is shown on our website and included in the new client pack we send you. We will send you a copy any time you ask.

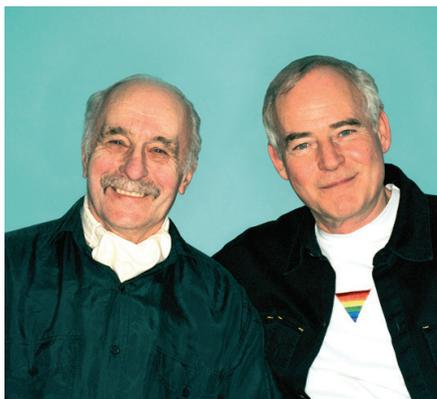
Christies Care is committed to safeguarding vulnerable adults from abuse. If you believe that you, or a person for whom you are responsible, may have been abused, you should make a referral to your Local Authority safeguarding team. We can give you details. We also have a duty to refer details to the Local Authority safeguarding team.

## Equal opportunities

Christies Care is an equal opportunities organisation and works to assign carers from many countries across the world. We do not discriminate against either carer or client on the grounds of age, race, ethnicity, culture, sexual orientation, religion or for any other reason. We expect our clients and the carers we work with to have similar principles.

## Duty of candour

Christies Care is open and truthful in all of its dealings with clients, their carers and their families.



# Payment: a guide to prices

Our price for live-in care depends on your needs and the intensity of work the carer must do.

Each client is costed individually, although it is likely to vary between £1000-£1500 a week.

It will also change with the living conditions offered to our carer. We are asking a carer to live in your home and carry out agreed tasks. We will pay her according to these tasks and conditions under which she works.

This booklet describes our service where we employ the carer and take full responsibility for carrying out care tasks properly and in accordance with current regulations.

There is an alternative. If you are confident that the manner in which the carer carries out her tasks will not be subject to supervision, direction or control by anyone, then you may use us as an introducing agency, where we don't employ the carer but introduce her to you, to work under contract to you, to carry out your wishes.

This arrangement costs about £750-£1000 a week. It is subject to rules set out in the Finance Act 2014. To preserve the genuine self-employed nature of the carer's work, the rules must be followed.

If you should decide to use our introductory service:-

- The manner in which the carer carries out her tasks must not be subject to (or to a right of) supervision, direction or control by anyone.
- The carer will be self employed. We will have made sure that she has a NI number and self-employed tax reference or has at least started the process of registration. We will also ensure that she completes a tax return each year and settles her NI and tax obligations. If carers cannot produce evidence of this we will stop introducing them to clients.
- She is free to work with her choice of client and for more than one agency. She may accept work for a portfolio of clients, each for a comparatively short time of a few weeks, and she will decide whether or not she wishes to work for a particular week or set number of weeks.
- The carer will be trained by us to be 'suitable' to meet your wishes and needs. By this we mean that she will be competent to carry out agreed wishes and normal social care tasks.
- It is important to evidence this relationship and we ask our clients and carers to agree and sign a contract for services, which will set out clearly the carer's responsibility to do her work without supervision, direction or control.

# Payment administration

## Cash Card

Sometimes a client may give her carer (or anyone else) unsupervised access to a cash card and PIN number, which has risks for both client and carer. We can offer clients their own pre-paid debit card, to provide access to a controlled amount of cash or credit for the carer to spend on housekeeping or other things.

Our objective is to reduce financial risks and provide a simple payments administration service for our clients. We would top up the card by an agreed amount each week, and recover our costs by direct debit. This service is free to our clients. However, normal charges are made by the card issuer.



## Preliminary Deposit

This deposit is set at four weeks of fees and is held by us until the care arrangement comes to an end. Then the deposit will be off-set against any unpaid invoices or work not yet invoiced. Any balance will be returned to the client forthwith.

We ask our clients to pay our fees four weeks in arrears, by direct debit.

## Travel costs

Our weekly fee will be agreed inclusive of travel costs, except for agreed emergency placements.



## Payment administration *continued*

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### Payment for respite care

We ask clients who wish to book a respite carer to pay the fees for this in advance. This also applies to an assignment which has an immediate start e.g. a client coming out of hospital for convalescence or when it makes sense to arrange an assignment before we make our assessment visit. This needs to be paid by debit or credit card over the telephone on our secure telephone line 01728 605107.

### Value Added Tax

Our fees and other expenses are shown as including VAT at the current rate where VAT is levied. If VAT rates change, up or down, we reserve the right to change the fee accordingly.

### Care funded by Social Services Departments or Clinical Commissioning Groups

There is a national commitment that all adults who receive care from Local Authorities and Clinical Commissioning Groups should have the right to manage this themselves, including control over the cost. We have many clients who use our employment agency service, with all or part of the cost paid in this way.

We welcome this. We believe it will become increasingly useful to our clients, especially when they are offered a residential/nursing home as 'the next stage' and they want to stay at home instead.

### Part week Fees

- For respite care we charge a minimum of 7 days. Any days after that will be charged at a pro-rata rate.
- For ongoing care, our weekly fee is for full or part weeks of care.

# Our code of practice for clients

Carers are there to support you to live your life in the way that you want.

They are not there to take over, or make decisions for you. Our code of practice is designed to ensure that you retain and maintain as much independence and control over your life as possible:

- We will respect your wishes and opinions and work to maintain your dignity and self-respect at all times.
- We will not discriminate against you on the grounds of race, gender, religious belief, sexual orientation or disability.
- We will respect your home and possessions.
- You decide the tasks that your carer will carry out for you.
- We will seek to assess your needs and wishes carefully and to be given updates regularly, recognising your wishes and your expectations of the service you receive.
- We will keep your personal and medical information confidential. If we need to speak to a third party such as a doctor or the district nurse, we will seek your permission before doing so, except in an emergency or crisis. Any information about you which we hold on record will be made available to you on request.
- You have the right to expect carers to be honest, fully vetted, well trained and capable of performing their tasks.
- We have a detailed complaints procedure which is available online - if you would like to see a copy, just ask. You may also file your complaint online by emailing [complaints@christiescare.com](mailto:complaints@christiescare.com)



# Statement of purpose and inspection report

We have full registration with the Care Quality Commission and the Scottish Care Inspectorate and at our latest inspection CQC rated us as Outstanding.

The introducing agency part of Christies Care, covered in this booklet, follows the regulations in the Employment Agencies Act 1973, as amended, and the Conduct of Employment Agencies and Employment Businesses Regulations 2003. We also follow a large number of the standards set out in the Health and Social Care Act 2008. In most cases, the service we offer exceeds these standards.

Christies Care has a written statement of purpose as required by the Care Quality Commission. Our most recent inspection report is held in the office or can be viewed online at [www.cqc.org.uk](http://www.cqc.org.uk). We have also recently had our first inspection by Scottish Care Inspectorate and have been rated 4.

Copies of all of our reports are available from:

## Christies Care Ltd

Rose House, Street Farm Road,  
Saxmundham, Suffolk, IP17 1AL

**Telephone:** 01728 605107

**Website:** [www.christiescare.com](http://www.christiescare.com)

## About Christies Care

Christies Care is an agency that specialises in providing live-in care at home. We provide long term, respite and palliative live-in care throughout the UK.

## Directors

**Hon Hugh Gathorne-Hardy**  
MA, Chairman

**Freddy Gathorne-Hardy**  
PhD, Managing Director

**Lin Barnes**  
Registered Manager & Director

**Caroline Gathorne-Hardy BA**

Member of the United Kingdom Home Care Association.

Registered with the Care Quality Commission. 1-138279808

Registered with the Scottish Care Inspectorate. CS 2016 350815

Our offices are open Monday to Friday 9:00am until 5:00pm, except Bank Holidays.

All prices are correct at time of print but are subject to change.

You can get this brochure in different versions by contacting us.





“

I can't thank you enough for everything and in particular enabling my mother to be able to live in her own home for as long as possible.”

---

Client's daughter





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**Website:** [www.christiescare.com](http://www.christiescare.com)

**Email:** [care@christiescare.com](mailto:care@christiescare.com)



# Please get in touch if you would like to know more about Christies Care.

We provide long term, respite and palliative live-in care throughout the UK.

You can speak to us by calling 01728 605107. Our offices are open from Monday to Friday, 9:00am until 5:00pm. Alternatively, you can visit our website at

[www.christiescare.com](http://www.christiescare.com)



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Member of the United Kingdom Home Care Association. Registered with the Care Quality Commission.

Telephone calls are recorded for information and training.



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