

Purple Balm Limited

Purple Balm Exeter

Inspection report

2
Sandpiper Court, Harrington Lane
Exeter
Devon
EX4 8NS

Tel: 01392350010
Website: www.purplebalm.co.uk

Date of inspection visit:
25 August 2017
30 August 2017

Date of publication:
05 October 2017

Ratings

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

Summary of findings

Overall summary

The inspection took place on 25 and 30 August 2017 and was announced. This was the first inspection of the service since registering at this location. The service was inspected at the previous location on 1 and 2 September 2016 and was fully compliant with all regulations covered in the inspection. During this inspection we found no breaches of regulations and we found people received a good service.

Purple Balm (Exeter) domiciliary care agency is a domiciliary care agency which provides personal care to vulnerable adults in the community, the majority living in the Exeter area. The service provision varies from half hourly visits daily to the provision of 24 hour care for people living in their own home. The agency also provides staff to work in residential and other social care settings; however we did not inspect this aspect of the service as there is no requirement for it to be registered. The registered manager told us personal care support was currently being provided to approximately 50 people.

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

The service was well-led. The registered manager and senior management team was praised for their caring manner, open and approachable management style. Care staff told us they felt well supported, and one member of staff said, "Purple Balm are excellent. I couldn't fault them. If you have any queries or worries there is always someone at the end of the phone. Whether it's concerns about a client or personal matters". There were systems in place to regularly monitor the service and make improvements where necessary, including audits, checks, and satisfaction surveys. Where they identified areas for improvement these were acted upon. People told us the service was very well run, and praised the management team and all the staff. They said, "It's one of the best agencies", "They are an amazing company" and, "They are very friendly and very effective".

People told us they felt safe. They said they received a consistent and reliable service. Purple Balm had a system for identifying the most vulnerable people, which meant their needs would be prioritised if there were any problems affecting service provision. People were protected from abuse and harm because staff had completed training in safeguarding adults, and knew how to recognise and report safeguarding concerns. Purple Balm had worked closely with the local authority and other agencies to report and investigate safeguarding concerns and take any action necessary to keep people safe. Risks to people's health and safety were well managed. Before people began receiving a service an assessment was carried out to assess any risks to the person using the service and to the staff supporting them. Where people needed assistance with medicines, staff had received training and knew how to support people safely.

Staff had the skills and knowledge to meet people's needs effectively. Staff received training on a range of topics relevant to the needs of the people who used the service. Staff were well supervised and told us they

were well supported. People's health needs were monitored and prompt action was taken to address any concerns or changes. The service had good links with local health and social care professionals and supported people to seek advice and treatment promptly when necessary.

The service was caring. People were supported by staff who knew them well and understood their needs. We heard many examples of praise for care and kindness of the staff. Comments from people included, "They are very caring staff, they cannot do enough for me" and, "Staff and office staff listen to my needs." Purple Balm took an active role in the local community, fund raising for charities and organising an information day for older people in the area.

People received a responsive service. People's needs were assessed and reviewed regularly. A care plan was drawn up with each person before the service started. The care plans contained easy to read and clear information about each task the person wanted support with. The care plans explained how to support and encourage people to remain independent. People were confident they could raise any complaints or concerns with the provider and these would be dealt with promptly and satisfactorily.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Risks were identified and managed in ways that enabled people to make choices and be as independent as they could be.

There were sufficient numbers of suitable staff to help keep people safe and meet their individual needs.

People received their medicines when they needed them and these were managed and administered by staff who were competent to do so.

People were protected from abuse and avoidable harm.

Is the service effective?

Good ●

The service was effective.

Staff received a comprehensive induction and on-going training to make sure they had the skills and knowledge to provide effective care to people.

People were supported by staff who knew how to ensure their legal and human rights were protected.

People received the support they needed to maintain their nutrition and hydration, and ensure their health needs were met.

Is the service caring?

Good ●

The service was caring.

Staff were kind, patient and professional and treated people with dignity and respect.

Staff were committed to promoting people's independence and supporting them to make choices.

There was an ethos of involving and listening to people who used the service.

Is the service responsive?

Good ●

The service was responsive.

People received care and support in accordance with their needs and preferences.

Care plans were reviewed with people to ensure they reflected their current needs.

The service had an effective and thorough process for managing complaints which people told us they would feel confident to use.

Is the service well-led?

Good ●

The service was well led.

People were supported by a motivated and dedicated team of management and staff.

The staffing structure gave clear lines of accountability and responsibility and staff received good support.

There was a quality assurance programme in place which monitored the quality and safety of the service provided to people.

Purple Balm Exeter

Detailed findings

Background to this inspection

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

This inspection took place on 25 and 30 August 2017 and was announced. We gave the service short notice because we wanted to meet the registered manager and needed to be certain they would be available during the inspection. This also gave the registered manager sufficient time to ask some people if they would be willing for us to contact them by telephone to ask for their views of the service. The inspection was carried out by one inspector and an expert-by-experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Before the inspection we reviewed the information we held about the service. This included previous inspection reports, statutory notifications (issues providers are legally required to notify us about) other data and enquiries.

During the inspection we went to the provider's office and spoke to the registered manager, field care supervisor, training administrator and nursing development manager. We spoke with ten people on the telephone and three members of care staff. We contacted three health and social care professionals and had feedback from one.

We looked at a range of records relating to people's individual care and the running of the service. These included six care and support plans, four staff personnel files and records relating to staff training, staff rotas and the quality monitoring of the service.

Is the service safe?

Our findings

People told us they felt safe using the service. One person said, "I feel very safe that they come and see me". They told us Purple Balm provided a reliable service, telling us, "They've never been late for my calls." There were sufficient numbers of suitably skilled staff to meet people's needs safely. If care staff were running late for any reason, or there were other problems affecting care provision, people were kept informed by the office staff or out of hours 'on call' service. They told us, "The office always call me if the carers are late" and, "'On call' always let me know if there is a problem." The 'on call system', ensured there was support available out of office hours to staff and people using the service. One member of staff told us a family crisis had occurred while they were at work during the weekend. They said, "On call were very supportive and managed to get someone to take over from me".

Risks to people's health and safety were well managed. Before people began receiving a service an assessment was carried out to assess any risks to the person using the service and to the staff supporting them. This included environmental risks and any risks relating to the health and support needs of the person. Risks relating to people's health needs, moving and handling, falls, choking and skin care were assessed and information given to staff on how to support people to minimise the risks. For example, "[Person's name] is at high risk of falls and needs to be encouraged not to rush as they will lose their balance". The care plan of a person with diabetes contained clear guidance for staff about how to recognise if their blood sugar levels were low, what action they needed to take to return blood sugar levels to normal, and when the paramedics should be called.

The registered manager told us they had recently improved the care plans by adding more detail to help staff recognise and monitor risks associated with the person's condition. For example, staff were prompted to be aware of potential risks to the feet of a person with diabetes as a result of raised blood sugars and poor circulation.

People's level of vulnerability was assessed to ensure the most vulnerable people would be prioritised if there were any problems affecting service provision. For example if their visits were 'time critical' because they needed their medicines, food or fluids at specific times, or if they were living with dementia and dependent on the service for their support. In addition care files contained a 'missing person' information form, completed by the family if a person had been identified as being at risk of going missing. This information was available to the 'on call' service to ensure people's needs were understood by staff arranging support out of office hours.

People were protected from abuse and harm. Staff had completed training in safeguarding adults, and knew how to recognise and report safeguarding concerns. They told us they knew what to do if they suspected people were at risk of harm or abuse and would have no hesitation in reporting any concerns to the registered manager. They knew how to contact other relevant agencies if necessary. Records showed that Purple Balm had worked closely with the local authority and other agencies to report and investigate safeguarding concerns and take any action necessary to keep people safe.

The risk of abuse to people was reduced because there were effective recruitment and selection processes

for new staff. Before commencing work all new staff were thoroughly checked to make sure they were suitable to work with vulnerable people. These checks included seeking references from previous employers and carrying out disclosure and barring service (DBS) checks. The DBS checks people's criminal record history and their suitability to work with vulnerable people. Staff disciplinary procedures were in place, and were used where required.

There were systems in place to ensure people received their medicines safely. Care plans contained signed forms showing people had consented to having their medicines administered and the level of support required. The service ensured staff were trained and competent before allowing them to administer medication, and their competency was reassessed regularly during the spot checks. Monthly audits of medicine administration records (MAR) were carried out to monitor any issues such as gaps in recording. Any issues identified during the spot checks and audits were followed up with staff, who then repeated their medicines administration training if necessary.

All staff received training in infection control and PPE (personal protective equipment), like disposable gloves and aprons, was provided. Regular observations and spot checks by senior staff ensured this was used appropriately.

Is the service effective?

Our findings

People spoke positively about the skills, knowledge and experience of the staff supporting them. One person said, "The staff know what they are doing, I'm very happy". Written feedback from another person stated, "[Carer's name] is brilliant, doing as much as possible. They know when I am feeling down or struggling emotionally or physically more than usual".

Purple Balm had its own training department and training manager, providing training to staff and external organisations. This side of the business was being developed and a nursing development manager had just been appointed who could deliver training such as administering eye drops and using nebulisers, dementia and first aid. A mandatory rolling programme enabled staff to maintain their knowledge and skills, and they were encouraged to develop professionally, for example undertaking relevant national vocational qualifications. Staff told us, "There is a lot of training on offer. It's there" and, "The training is excellent. If we feel we're not too confident about something we only have to say the word". The service was proactive and creative in linking with external agencies to meet the training needs of staff. For example, a local funeral directors was going to offer a session to staff about "the continuity of care in a funeral parlour", to look at 'what actions happen when someone dies and the process of leaving home'.

The agency had developed a comprehensive induction programme for new staff. This included five taught days which covered a range of topics, such as Purple Balm's policies and procedures, infection control, health and safety, medicine administration, moving and handling, safeguarding, the mental capacity act and disability awareness. New staff then went on to shadow more experienced staff to build on their knowledge and experience. During the three month probation staff completed the Care Certificate, a detailed national training programme and qualification for newly recruited staff, and had two 'spot checks' when the field care supervisor observed their practice to ensure their competency. Staff told us the induction process gave them the skills and confidence they needed to support people effectively. One member of staff said, "[Trainer's name] is amazing, really nice and very thorough. I'd never done caring before. I was so scared but they made me feel so welcome. I was nervous about going out first of all, but at the first call everything slotted into place".

Staff said they felt well supported by the agency. They received regular spot checks, supervisions and an annual appraisal. The supervisions were timed to coincide with the spot checks and therefore provided an opportunity to reflect on their strengths and areas for development.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When a person lacks the mental capacity to make a particular decision, any made on their behalf must be in their best interests and the least restrictive option available. We checked whether the service was working within the principles of the Mental Capacity Act 2005 (MCA). Staff had received training and demonstrated an understanding of the requirements of the MCA. One member of staff told us the training was, "...perfect for the job we do". When people lacked the mental capacity to make certain decisions, the service had followed a best interest

decision making process. Care plans showed that the service had contributed to best interest processes for a range of decisions, including managing finances and moving into residential care.

People told us staff supported them to maintain their hydration and nutrition where required. Comments included, "I'm always asked what I would like to eat or drink" and, "I like all my carers and they always ask me what I would like to eat and drink". Care plans contained clear guidance to enable staff to meet people's individual dietary needs. For example, the care plan of a person with diabetes stated, "Encourage [person's name] to eat a healthy balanced diet, high in carbohydrates and low in salt. Encourage them to test blood sugar levels before each meal and record accurate blood sugar levels at all times".

Care records showed that staff supported people to access appointments if needed and liaise with health and social care professionals involved in their care if their health or support needs changed. One person's care plan showed that an assessment with a speech and language therapist (SALT) had taken place for a person at risk of choking. This had involved the person, their relative and their regular carer from Purple Balm. The guidance from the SALT had been added to the person's care plan the following day, which meant all staff had access to the information they needed to support the person safely. A health and social care professional who had worked with Purple Balm to support a person in the community told us that Purple Balm "went above and beyond" They had worked very closely with them, communicated well, and were co-operative.

Is the service caring?

Our findings

People told us the care staff who visited were very caring, would always ask them how they were feeling and what they would like help with. Comments included, "They are very caring staff, they cannot do enough for me" and, "Staff and office staff listen to my needs." Written feedback in a recent quality survey said, "The Purple Balm carers were very caring and compassionate as well as patient with my family member".

The registered manager told us that staff retention at the service was good. This meant people received a consistent service from a team of care workers they knew and trusted, and who had a good understanding of their support needs. People said, "Having a stable team is brilliant" and, "I have the same carers".

While all the people we talked with spoke very highly of the care staff, there were mixed views about the office staff. Two people described them as "rude" and "uncaring". However other people told us, "The office staff listen to my needs", "Staff and office staff always listen to me and try and help me", "Office staff are lovely" and, "If I call the office I find the staff very helpful". We saw written feedback which stated, "Whenever I visit the office I have tea and biscuits made for me."

There was an ethos of involving and listening to people who used the service. People were involved and consulted in drawing up and regularly reviewing their care plan. They were asked for their views every six months in a quality assurance survey. The questionnaire stated, "At Purple Balm we like to continually improve the service we deliver to you. We would appreciate your support in completing the following short form to assist you in doing so". A stamped addressed envelope was included to make it easy for people to respond, and the questionnaire stated, "Your support worker can place it in the post box for you if this is helpful".

Staff were committed to promoting people's independence and supporting them to make choices. One person told us, "The staff encourage me to make decisions." Care workers told us they involved the person in decisions about their care as much as possible. One care worker told us how they supported a person who was living with dementia. They said, "I knew they would always have their cup of tea and what they would like for breakfast, but I always offered choice, even though I knew what their answer might be. I always ask them what they want to do during my time there... They might want to chat around the house or have a chat in the garden."

People told us that care staff treated them with dignity and respect. One person said, "Staff respect me and my home". Care workers described how they respected people's privacy and dignity when supporting them with personal care, knocking before entering and making sure the curtains were closed. They told us how they supported people to do as much as they could for themselves, and we saw that care plans promoted this. For example, [Person's name] requires assistance washing harder to reach areas, i.e. back and lower half of body. Able to wash their front independently".

Is the service responsive?

Our findings

People received a service that was responsive to their individual needs. The registered manager consulted with each person and/or their families and representatives to draw up and agree a plan of their support needs. There was also input from health and social care professionals if required. People confirmed they had been involved in setting out how they wanted staff to support them in all aspects of their care. They told us, "The care plan was very good, I was involved in all the planning" and, "I was involved in the care plan and reviews."

Care plans were person centred and included medical details, risk assessments, information about daily routines, the support people needed with activities of daily living, and information about their background and interests. Copies of the care plans and risk assessments were in the office and each person's home. There were signed forms consenting to the provision of care, guidance about how to make a complaint and contact details so people knew who to contact at the agency for advice or support. The plans were detailed, easy to read, and gave staff good information on how to support the person with each task. For example, "Staff to prepare main meal which will be a meal from the freezer. Leave on the side for [person's name] to cook in microwave. Likes to drink tea, coffee and juice throughout the day".

We saw care plans had been recently reviewed which meant the information they contained about people's support needs was up to date. Care plans were reviewed annually with the person or more frequently if their needs changed.

The agency provided regular additional information and updates to staff to ensure they were kept well informed about the people they were supporting and the service. This meant the support provided was responsive and flexible. People described Purple Balm as "Flexible when additional visits needed" and, "Very accommodating". One member of staff said, "This afternoon I'm going into a new client to me. I rang the office this morning to ask for a quick run-down, although the care plan is there. They give me good information". A daily report was sent to office staff with the information they needed to co-ordinate the service effectively, such as new care packages, new staff, staff sickness and changes in people's needs. A weekly memo kept care staff up to date on a range of topics including changes to people's care packages and issues that might affect the service, such as bad weather.

The service had an effective complaints policy, which meant any complaints would be documented, investigated and responded to within clear timeframes. The service had not received any complaints since we inspected them at their previous location in September 2016. People told us they would not hesitate to raise any concerns if they had any, and were confident they would be taken seriously. Comments included, "Any issues are dealt with" and, "Any concerns I would call the office. "

Is the service well-led?

Our findings

People told us the service was well led. Comments included, "It's one of the best agencies", "They are an amazing company" and, "They are very friendly and very effective". Staff were also very positive about Purple Balm telling us, "I personally would recommend the company from a client's point of view and from a carers point of view. They are an excellent company to work for. I highly recommend them".

The service was managed by a person who was registered with the Care Quality Commission as the registered manager for the service. Staff told us they felt well supported by the registered manager and senior management team. One member of staff said, "[Manager's name] is lovely. They've been there for me big time. I needed time off for personal problems. Such good support!". Another member of staff said, "Purple Balm are excellent. I couldn't fault them. If you have any queries or worries there is always someone at the end of the phone. Whether it's concerns about a client or personal matters".

The registered manager told us they wanted to show staff how much they valued them and the work they did. Staff were recognised and rewarded for their commitment to the service every six months, and carers were nominated for the annual 'Carer of the Year' award. Photographs of the staff that had been recognised in this way were on display in the reception area. Staff told us they felt valued and were passionate about their roles. Comments included, "I love working here!", "It's like a family network" and, "I've never been happier. My family can see a real difference in me".

The provider and registered manager were committed to improving the quality of service provision and had been proactive in this respect. Care plan and risk assessment documentation had recently been reviewed and updated to ensure it contained the information staff needed to support people effectively. The provider was using the NHS 'information governance toolkit' to protect information held about people in line with 'department of health' information governance policies and standards. Policies had been reviewed and updated in July 2017 to ensure they remained accurate and up to date. Care staff had been given the updated policies on a memory stick, so they could access them easily on their computer.

The provider had a quality assurance system to ensure they continued to meet people's needs safely and effectively. Regular audits were carried out, looking at areas such as the completion of MAR charts, training and recording. The quality of the service was also monitored through the completion of regular unannounced 'spot checks' by the 'field care supervisor'. This included arriving at times when the staff were there to observe the standard of care provided, reviewing the care records kept at the person's home to ensure they were appropriately completed, and asking the person receiving the service for their feedback on the support provided. The findings of the spot checks were discussed in staff supervision and any concerns followed up, with additional training arranged if required.

The provider visited the office on four or five days a week which meant they had an oversight of the service and any issues arising. In addition they received a weekly report informing them of any safeguarding concerns, the number of supervisions, spot checks and appraisals that had been carried out, recruitment, and the capacity available to pick up new care packages. Accidents and incidents, and health and safety

issues were reviewed every two weeks at senior managers meetings to identify and agree any wider actions necessary to keep people and staff safe.

Quality assurance questionnaires were sent out every six months to the people using the service. The registered manager told us, "I will go through the replies and respond individually to pick up an issue". We saw that where a concern had been raised, the registered manager had visited the person to talk it through, provide reassurance and identify any action necessary to improve the service. The service also asked staff to complete a satisfaction survey, asking for their views on a range of topics including their satisfaction in working for Purple Balm, checking their understanding of the safeguarding and professional boundaries policies, as well as their knowledge and confidence in using the on call system and complaints process.

The registered manager was proactive in keeping their knowledge up to date and using this knowledge to improve the lives of the people they supported. They were involved in the 'Proud to Care' initiative, highlighting the importance of care work in Devon. In addition, they were a member of Devon County Council's 'provider engagement network', a forum for providers of adult health and social care services to share information and ideas.

Purple Balm had constructive links with the community through its involvement in charity work, for example, nominating a local 'charity of the year', and holding fundraising events including an Easter raffle and an 'It's a knockout' event. Since the previous inspection in September 2016, the service had relocated to a residential area. The registered manager told us this provided new opportunities for community engagement. They were in the process of arranging an 'older people's information day' in the local community, with guest speakers and information stands, and were exploring how they could work with local businesses and schools.