

Purest Support Limited

Head Office

Inspection report

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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

About the service

Head Office is a domiciliary care service providing personal care to people living in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of inspection, the service was providing personal care to eight people.

People's experience of using this service and what we found

People were supported to have choice and control over all aspects of their lives, according to their ability. The support people received enabled them to be more independent.

People told us that the staff who visited them were kind, caring and considerate. They made positive comments about senior staff in the organisation such as the registered manager.

Care planning made clear the support people needed to reduce risks and remain safe. This meant staff had access to information to help them minimise risks.

There were enough staff to meet people's needs. Staff received appropriate training and supervision to carry out their role.

The service sought people's feedback and acted upon it. People were given easy read questionnaires which staff supported them to complete. People told us they were also asked for their views during discussions about care planning. People's views were documented and acted upon.

There was an appropriate quality assurance system in place to monitor the quality of the service and identify any areas for improvement.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

- The service set out in care plans what support people needed to increase their independent living skills. Since our last inspection the service was providing the regulated activity of 'personal care' to less people, because they had been supported to live more independently.

Right care:

- Staff knew people as individuals and individualised care planning and risk assessment was in place.

Right culture:

- The provider was committed to a culture of increasing independence and promoting the rights of people using the service. They had taken steps to modify the way the service operated over time to ensure people had more independence and lived more autonomously.

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

Rating at last inspection:

This was the service's first inspection since it registered with CQC on 28 October 2020.

Why we inspected

This was the service's first inspection.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led

Details are in our well-led findings below.

Good ●

Head Office

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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

Notice of inspection

This inspection was carried out remotely due to COVID19. The service was contacted and asked to provide documentation by email.

What we did before the inspection

We reviewed information we had received about the service since it registered with us. We sought feedback from the local authority and professionals who work with the service.

During the inspection

We spoke with two people who used the service and a relative about their experience of the care provided. We spoke with staff including the two registered managers.

We reviewed a range of records. This included three people's care records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

afe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection of this newly registered service. This key question has been rated 'Good'. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff had received training in safeguarding people from abuse and understood their responsibilities in protecting people.
- There were systems in place to respond appropriately to any concerns about a person's safety and welfare, including an appropriate policy to guide staff in the actions they should take. People told us they felt safe when care staff supported them.

Assessing risk, safety monitoring and management

- There were comprehensive individualised risk assessments in place for each person using the service. This clearly set out what support the person needed to remain safe at each visit. Care was taken to ensure that measures in place did not compromise the person's independence.

Staffing and recruitment

- There were enough staff deployed to meet people's needs in line with their preferences for the times of their visits, gender of care staff and to ensure people had a regular group of care staff who visited them.
- Appropriate recruitment checks were carried out on staff to ensure they were safe to work with vulnerable people. This included criminal records (DBS) checks and employment checks.

Preventing and controlling infection

- Staff were provided with appropriate personal protective equipment (PPE) to do their job and reduce the risk of the spread of infection. People told us that staff wore appropriate PPE when visiting them.
- Policies and procedures were in place with regard to how the service limited the risk of the spread of COVID19. This included routine testing for staff.

Learning lessons when things go wrong

- The service had a system in place to analyse incidents and accidents. Where these occurred, they were reviewed and any changes to care planning or risk assessments were made where required. People told us that they were consulted when updates were made to their care planning.
- The service had a system in place to identify shortfalls in staff practice. We saw minutes of meetings where issues were discussed with staff.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection of this newly registered service. This key question has been rated 'Good'. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The service carried out a thorough assessment of people's needs before they started providing care to them. People told us they had been involved in the planning of their care.
- Care was planned in line with best practice guidance, such as that produced by the National Institute for Health and Care Excellence (NICE).

Staff support: induction, training, skills and experience

- We reviewed the training matrix and saw that staff received a range of training which was suitable for the role. This included training in subjects such as moving and handling, safeguarding, fire safety, first aid and the Mental Capacity Act 2005.
- People told us they had no concerns about the care provided by staff.

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

- Where people required staff support to eat and drink, the care plans clearly set the support needed step by step for staff.
- People's preferences around meal times were set out in their care plans. This ensured people could be supported in a person-centred manner.

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

- Where other professionals were involved in people's care, this was noted in their care planning. For example, where people had a social worker.
- The service recorded the contact details of people's GP's, dentists and other healthcare professionals so they could be contacted for advice if required.
- One person's relative told us that the service helped them with contacting other professionals such as social workers where required.

Ensuring consent to care and treatment in line with law and guidance

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

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People's capacity to make decisions about their care and treatment were assessed. People were supported to have choice and control over all aspects of their lives. Care planning made clear how people could communicate their wishes and people were encouraged to be independent.
- Where people had a power of attorney, information about this was included in their care records. A power of attorney is a legally nominated person who can advocate for someone's best interests in the event they no longer have capacity to do so.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection of this newly registered service. This key question has been rated 'Good'. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People told us the staff were kind, caring and treated them well. One person said, "I can't fault them. When I'm feeling a bit down or depressed, they listen to me, and when they go, I feel better." A relative said, "They are so friendly and supportive, not only to [family member] but also to me. They are like an extension of our own family."
- Staff had training in equality and diversity and care records reflected people's individuality.

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

- People's views about their care were recorded in their care plans. People's daily routines were described in detail to ensure staff carried out care in line with their wishes.
- People told us they felt their views were heard by the service. One said, "Well I am very honest anyway but if I don't like anything, I know I can tell [registered manager] and it won't happen again."

Respecting and promoting people's privacy, dignity and independence

- People told us staff were respectful of them and their home. A relative said, "They are very respectful here, they leave it as they found it."
- People told us staff knew how they liked to be supported but still asked when they visited to see if their preferences had changed.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection of this newly registered service. This key question has been rated 'Good'. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's care records were reflective of people as diverse individuals and made clear their interests, needs and preferences. People received support from a consistent staff team who knew them well. A relative said, "We have the same group of carers visit them, so they know [family member] well."
- People had been involved in the planning of their care, where this was possible. A relative said, "We were involved in the care plan and recently a review as some changes were made. We have a copy here."

Meeting people's communication needs

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 carers.

- Information was provided to people in a way they could understand. Care planning made clear how people could communicate their needs and preferences. This included how people may communicate with body language, signs or signals.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Whilst the service is not required to provide social support and activities as part of the regulated activity, they did consider how they could support people to live full and active lives and reduce the risk of social isolation.

Improving care quality in response to complaints or concerns

- The service had not received any formal complaints from people using the service.
- An appropriate complaints policy was in place and people were provided with a copy of this.
- People told us they knew who to complain to if they were unhappy and felt that what they said would be acted on.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection of this newly registered service. This key question has been rated 'Good'. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive culture of caring in the service and people told us this was evident at all levels.
- The support people received from the service meant they could continue living in their own homes which was in line with their wishes and maintain more independence.
- Meetings were held with staff to discuss changes to the service and to communicate messages about the care they delivered. Staff views were documented in these meetings.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong and managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements, continuous learning and improving care

- There was a robust quality assurance system in place to identify any shortfalls or areas for improvement.
- This included audits of care records and checks on staff practice.
- People made positive comments about the registered manager. One said, "[Registered manager is here quite regularly, they have always looked after me." A relative told us "[Registered manager] is part of our care team and we see them regularly."

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

- People were regularly asked for their views on the service they received. This happened via reviews of their care plans and surveys. We reviewed the results of the most recent survey and saw these were all positive. We saw the service had plans in place to adjust these surveys to see whether they could get further feedback to help them improve. This showed a willingness to develop the service.
- There was also a survey of staff views, and we saw the results of the most recent survey were positive.

Working in partnership with others

- The service had developed positive working relationships with other professionals involved in people's care. This allowed for effective sharing of information between organisations to ensure people received joined up care.