

Purple Balm Limited

Purple Balm Plymouth

Inspection report

Unit 26, Devonshire Meadows
Broadley Park Road, Roborough
Plymouth
PL6 7EZ

Tel: 01752275100

Date of inspection visit:
17 September 2020

Date of publication:
02 November 2020

Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Purple Balm Plymouth (hereafter known as Purple Balm) is a domiciliary care agency registered to provide personal care to people living in their own homes within the Plymouth area. It was supporting 34 people at the time of the inspection.

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

People told us they felt safe and well supported by staff they liked and who knew their needs well. People said staff were usually on time and lateness was communicated to them. Staff were recruited using a robust process to check if they were safe to work with people who may be vulnerable. Medicines were managed safely. Clinical oversight of the service was led by a registered nurse and supported through engagement with key external health professionals.

Staff had completed safeguarding training and knew how to identify and where to report suspected abuse. Known risks were assessed and there was instruction for staff on how to support people to manage these risks. Healthcare concerns were escalated appropriately.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People were happy with the care they received. However, feedback suggested communication from the office could be improved. People did not feel involved in the changes in the service, and there were limited choices for preferences of care staff. The service was in the process of restructuring and new staff had been recruited but were yet to start in post.

There was an understanding of the regulatory requirements by the registered manager and audits were taking place. Staff told us they felt supported but would like to have team meetings.

We recommended that people were contacted in a timely way to ask for their views.

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

Rating at last inspection

This service was registered with us on 24 September 2019 and this is the first inspection.

Why we inspected

This was a planned focussed inspection based on the date of registration and we had not inspected this service before. There will be no overall rating given for the service as this was not a comprehensive inspection, which we cannot carry out at present except in exceptional circumstances due to the risks posed

by Covid-19

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Purple Balm Plymouth

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection team consisted of one inspector and one assistant 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

We gave a short period notice of the inspection because we needed to ensure there would be staff in the office.

What we did before inspection

We reviewed information we had received about the service since it was registered. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

During the visit to the site office we looked at care records and Medicine Administration Records for three people. We spoke with the registered manager.

We reviewed a range of records. This included three staff files in relation to recruitment, staff supervision and training, complaints, safeguarding, incidents and quality assurance. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

After the site visit to the office, we continued to seek clarification from the provider to validate evidence found and requested further records to aid the inspection. We spoke with seven people and three relatives and received email feedback from one person who used the service. We received feedback from four professionals who work with the service and had feedback from four staff.

Is the service safe?

Our findings

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

This is the first inspection for 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

- People told us they felt safe being supported by Purple Balm staff. They said, "I feel safe, they are as good as gold", "When they are here, I feel safe" and, "The ones that are here have been here for quite a long time, they are all really well trained and meet my clinical needs."
- Staff fed back they knew what abuse might look like for different people and felt confident identifying and reporting any concerns. Staff had completed training on safeguarding adults and children.
- There was a safeguarding policy and procedure and the registered manager reported and investigated any concerns as required.

Assessing risk, safety monitoring and management

- Assessments of people's needs, and their home environment took place before support was offered. This was to ensure people's needs could be safely met, and staff would not be placed at risk from environmental issues.
- Individual risks people faced around their care or health needs were assessed. Clear plans were in place for how staff should support people to manage and mitigate those risks. For example, there were clear instructions on how to support a person with their catheter. The registered manager said, "Each section of a care plan identifying a need is linked to a risk assessment."
- The registered manager showed insight into supporting people to live their lives as they wished whilst positively managing the risks they faced. For example, a person who was not safely able to use their cooker was supported to learn how to use the microwave to heat food up and make simple recipes.

Staffing and recruitment

- Robust recruitment processes were followed to check if new staff were suitable to support people who may be vulnerable. This included an application, interview, references, DBS (police) check, induction, shadowing, and probation period.
- People said, "I have seen different faces at different times but it's not too bad", "I normally do get all the same care staff" and, "I have to have the same ones because it is clinical, I see the same faces."
- People told us staff were not usually more than five or ten minutes late and most of the time they were notified if staff were going to be late. They said, "They are sometimes five minutes late, Purple Balm always calls me and tells me if they are stuck in traffic", "They are always on time, they never go early" and, "Sometimes they are ten minutes in case of a hold up."

Using medicines safely

- Some people required support from staff to administer medicines and nutrition through a percutaneous

endoscopic gastrostomy or PEG. This is a way of introducing food, fluids and medicines into a person's stomach via a tube that passes through the abdominal wall. One relative said, "I'm happy with how they do meds they have all had their full training on the PEG and that."

- People all told us they were happy with how they were supported with their medicines.
- Medicines Administration Records (MAR) were complete and filled out correctly.
- Staff who administered medicines had completed training and were competency checked so the provider was assured they were safe to support people with their medicines. The registered manager told us the registered nurse in the service provided face to face training and supplemented this with video activities to test knowledge.

Preventing and controlling infection

- We were assured the provider was using PPE effectively and safely. The registered manager talked through the PPE process including ordering, distribution to staff, donning and doffing and disposal.
- People and relatives told us staff always wore PPE and were regularly washing their hands. They said, "They got masks all the time", "They come into the kitchen they wash their hands they wear the masks" and, "They wear masks and they wear gloves and a white apron."
- We were assured the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The registered manager gave examples of where situations had arisen, and the service had learned from them.
- There was a system in place to learn from accidents and incidents.

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 for this newly registered service. This key question has been rated requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- People told us, and records showed that people were supported to achieve positive outcomes. People were encouraged to retain their independence and live in their own homes. People were all very positive about the staff that provided them with support and praised their hard work.
- The registered manager was open with us during the office visit and explained where there had been challenges over the last year in the service.
- However, people and relatives told us changes were not always explained in a supportive or clear manner. For example, more than one person said they were given an ultimatum about which care staff would visit when. The messaging given out by office staff, including the leadership team sometimes left people feeling they had limited choices.
- People and relatives fed back there had been consistency with the quality of care and care staff but not with office staff and leadership. Recent changes in the service needed to be embedded into the service and communicated to people in a timely way.

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

- There were quality audits in place for records. Care plans and care records and MAR were checked regularly for any errors or gaps.
- The registered manager understood the regulatory requirements and what was expected of them.
- The service was undergoing a staffing restructure at the time of our inspection. The provider had designed a new staff hierarchy with clear roles for different aspects of service delivery. Professionals were positive about the service but did identify, "They need to strengthen their accountability and governance."

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

- The registered manager understood the duty of candour and knew when to keep relevant parties up to date when things went wrong or there was an accident or incident.
- Staff said the number of spot checks and supervisions had reduced and suggested team meetings would be helpful.
- Some people and relatives fed back despite being happy with the care provided, "I don't feel like we are listened to" and "I haven't had much input. The service I get from the carers is really good...but I haven't had

much input from the office."

- However, people said they felt comfortable contacting the office if they had a concern. One person said, "Any issues I've had with Purple Balm it has been dealt with there and then."
- We discussed with the registered manager how they were communicating with people to keep them up to date and involved. They told us they were aware the communication could be improved and had a plan to address this by writing a letter to all people using the service explaining changes and staffing updates. We discussed that this contact is made sooner rather than later.

We recommend all people using the service are contacted to ask for feedback in a timely manner and this is recorded and acted on.

Continuous learning and improving care; Working in partnership with others

- The registered manager was reflective and aware of areas to improve in the service. They had a plan to contact people but had not yet implemented it. They said, "We are hoping that as we reconnect with clients more over coming weeks and months, they will feel more comfortable contacting us with feedback."
- The registered manager described how the service worked in partnership with key health professionals such as district nurses, a children's community nurse and GP's to support people to improve or retain their health.
- We received positive feedback from external professionals on the service who felt the care provided was safe, staff cared about people and the registered manager was proactive in contacting agencies when required.