

Purple Social Care - Housing Support Housing Support Service

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Edinburgh
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Type of inspection:
Unannounced

Completed on:
30 August 2024

Service provided by:
Purple Social Care Ltd

Service provider number:
SP2016012767

Service no:
CS2016349494

About the service

Purple Social Care is registered to provide a housing support and care at home service to adults with support needs living in their own homes.

The service has its office base in the South Gyle area of Edinburgh. Staff operate in dedicated teams covering different areas of Edinburgh. The service provides different levels of support to people according to their assessed needs. This ranges from 24 hour care at home support packages to smaller packages of care.

At the time of the inspection the service was providing support to 63 people.

About the inspection

This was an unannounced which took place between 23 and 30 August 2024. The inspection was carried out by one care inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service.

This included:

- previous inspection findings
- registration information
- information submitted by the service
- intelligence gathered since the last inspection.
- electronic feedback from staff, relatives and involved professionals

In making our evaluations of the service we:

- spoke with eleven people using the service and three of their relatives
- spoke with nine staff and management
- observed practice when visiting people in their homes
- reviewed documents

Key messages

- People's care and support needs were regularly reviewed.
- People experienced stability and continuity in their staffing arrangements.
- There were effective systems for monitoring the quality of care people experienced.
- Staff were well supported in their learning and development.
- Staff worked well together and were well supported by their managers.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service had begun to use self-evaluation, however, further work was required to develop this approach to support improvement.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our staff team?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people. We evaluated the performance of the service under this key question as very good.

People told us that they were very happy with their care staff and that they were treated with compassion, dignity and respect. Comments included: "all the girls are lovely - they always come in happy and she looks forward to seeing them."; "they are absolutely wonderful, so lovely - nothing is too much trouble."; "they are always calm and don't rush my relative and know the best way to communicate with them so she doesn't get confused and anxious."; "always respectful and there is excellent communication with the office staff."; "Some communicate better than others but they all do their job well."; " They are all very good - always check with me whether I need anything else before they go." This meant that people could be assured that those supporting them were promoting their rights to be treated with due care, dignity and respect.

People's care and support needs were regularly reviewed. Leaders visited them at home to observe their support, discuss any adjustments needed to their care package and to gather feedback about the quality of their support. People had access to the provider's policies and procedures and management's contact details should they need to discuss any issues. Feedback from people experiencing care and their relatives told us that people felt involved and included in their support planning. This meant that people could be confident that their care needs were regularly reviewed and that their views were listened to.

The provider had invested in an electronic care planning system which was used effectively to recording people's care needs and record details of the support they received at each visit. Staff told us that they could access people's personal plans and record people's care easily. Feedback from involved health and social care professionals told us that people's health benefited from the care and support they received; that staff communicated well with them regarding people's care needs and that staff were caring and compassionate. Comments included: "Service user expressed she was happy with her care provider and the level of service she received. Her needs are being well met in the community." and "I was very impressed with the level of care and compassion I observed when working with (name of service user). Changes that needed to be made to their support package were planned for well." This meant that people could be assured that their care provider was regularly reviewing their support needs and was responsive when their needs changed.

There were detailed plans in place to support people well with their personal care needs. We observed staff supporting people well with their mobility equipment and conversing with people so that they knew what to expect. This helped to put people at ease and build positive trusting relationships with them.

There were effective systems in place to support people well with their medication and the management team regularly audited medication records. Staff had guidance to follow when supporting people with their skin health. We found that some of the skin integrity records such as the prescribed cream chart were not being coded when staff were unable to apply the prescribed cream and there needed to be improved consistency in recording. The management team agreed to carry out a full audit of skin care/topical cream records and provide further guidance for staff around effective recording. This meant that people could be assured that those planning their care and support were responsive and were committed to continuously improving their service.

How good is our staff team?**5 - Very Good**

We found significant strengths in the staffing of the service and how this supported positive outcomes for people. We evaluated the performance of the service under this key question as very good.

Staff recruitment was well organised. Prospective employees were carefully vetted before they started to support people. The management team carried out observations and competency checks to monitor the quality of care people experienced. There were effective induction process to support new staff in their roles. Staff had access to a wide range of training suited to the needs of people they supported. The provider maintained a record of staff training and any refreshers due. Staff received regular supervision and spoke well of the support they received from the management team. This meant that people could be assured that those providing their care were being well supported in their learning and development.

The provider maintained an overview of staff's registration with the Scottish Social Services Council (SSSC). Some staff expressed that they were keen to achieve health and social care qualifications. The management team advised that they were planning this in terms of priority to meet with SSSC timescales for gaining the required qualifications. This meant that people could be assured the management team had a good overview of current skills and qualifications and were planning ahead to support staff to achieve relevant qualifications for their role.

Staffing arrangements were well managed with identified teams for each area with flexibility as needed. People supported received their staffing arrangements well in advance and people told us they had consistency in their staffing. We advised the provider to provide staff rotas in formats suited to the needs of people they support as two people told us they couldn't read their staffing arrangements. The provider was actively recruiting to a few vacancies in one area team at the time of inspection so staff and management were working flexibly to provide continuity for people affected by any changes to their team. If for any reason staff were going to be later than the agreed times the office staff contacted people to let them know. Staff told us that communication with the management team was effective so that if they needed support when out in the community there was always someone they could discuss matters with. This meant that people could be assured that their care provider had effective systems in place to promote consistency and continuity in their staffing arrangements.

There were effective systems for sharing information about people's support needs and getting updates when people's needs changed. Staff told us that they enjoyed very good support from colleagues and reported effective teamworking. This meant that people's care and support was consistent and stable because staff worked together well.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order that people can have confidence that their skin health is being consistently promoted well, the provider should review and update the protocols for the application of 'as required' topical creams and

check staff's understanding of the updated protocols. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: Any treatment or intervention that I experience is safe and effective (HSCS 1.24)

This area for improvement was made on 7 February 2023.

Action taken since then

Staff received training in the application of prescribed creams and people told us they were well supported by their staff in this area. Some skin care records were completed well and care given could be viewed on people's timelines in their support plans. We have asked the provider to carry out a further audit to promote consistency in completion of prescribed cream charts and the detail in some of the 'as required' protocols. This will support further improvement on progress made in promoting people's skin health. This area for improvement has been met.

Previous area for improvement 2

In order that people can be assured that their personal plans detail their health and social support needs very clearly and are updated when their needs change, the provider should review and update people's mobility, skin integrity and catheter care plans and corresponding risk assessments. The provider should also ensure that all documents are dated and signed when updated.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS 1.15) and 'I experience high quality care and support because people have the necessary information and resources.' (HSCS 4.27)

This area for improvement was made on 7 February 2023.

Action taken since then

People's personal plans contained detailed information about their health needs. The electronic planning system which was being introduced at the previous inspection was now firmly established and staff were confident in using it. People's mobility, skin integrity and continence support needs were well detailed in their plans. This meant that staff had detailed guidance to follow to support people well and recognise any changes to their usual presentation that would need reporting to management. This area for improvement has been met.

Previous area for improvement 3

In order that people can be assured that staff have the right training and development to support their needs effectively, the provider should improve the systems so that information about staff training and development is more easily accessible. This is to include further detail in staff supervision records about their learning and development needs. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.' (HSCS 3.14)

This area for improvement was made on 7 February 2023.

Action taken since then

Staff training records were now better organised and the provider evidenced a good overview of staff training and development. The service maintained a supervision matrix to monitor the frequency of staff

supervisions. These improvements were supporting staff well in their ongoing learning and development. This area for improvement has been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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