

Ignite Health And Home Care Services Ltd

Ignite Health and Home Care Service

Inspection report

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Tel: 01562515073

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Ratings

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

Summary of findings

Overall summary

Ignite Health and Home Care Services provides personal care to 25 people 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.

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

People were positive about the care they received and felt safe being supported by staff who they were familiar with. Staff understood how to keep people safe and the registered manager understood their obligations to notify relevant stakeholders of any concerns. People had up to date risk assessments in place to guide staff about the risks to people's health. Recruitment processes included checks on potential staff to make sure they were suitable for the role. People were happy with the support they received with their medicines. Improvements had been made to the way in which people's support was recorded and systems to review staff competency to support people had been updated.

People told us the service was well run and staff told us they were happy to work there. People gave feedback about their experiences of care and changes would be made where required. Staff understood the registered provider's whistleblowing policy and felt able to raise concerns if required. The registered provider together with the registered manager understood their role and responsibilities and had systems in place to support this. The registered manager had taken on board feedback from the last inspection and had made improvements where required. Where appropriate District Nurses were referred to where appropriate to improve people's experience of care.

The last rating for this service was Requires Improvement (28 December 2019) and there was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ignite Health and Home Care Service on our website at www.cqc.org.uk.

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.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Ignite Health and Home Care Service

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.

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.

Inspection team

There was one Inspector in the inspection team.

Service and service type

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

Notice of inspection

We gave the service 24 hours notice of the inspection. This was because we wanted to be sure there would be people at the office to speak with us.

Inspection activity started on 10 November 2020 and ended on 24 November 2020. We visited the office location on 12 November 2020.

What we did before the inspection

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.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority.

During the inspection

We spoke with three people who used the service and two relatives about their experience of the care provided. We spoke with the registered provider, registered manager and assistant manager.

We reviewed a range of records. This included three people's care records and multiple medication 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.

After the inspection

We spoke with three care staff by telephone.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

At our last inspection the registered provider had failed to ensure medicines were managed safely. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Sufficient improvements had been made in regard to the management of medicines. Therefore, the provider was no longer in breach of regulation 12.

Using medicines safely

- At the last inspection a number of areas requiring improvement were identified. These related to systems for ensuring staff were competent to support people and ensuring records were accurately and correctly completed.
- Since the last inspection, a new electronic system for recording peoples' medicines was introduced together with training to ensure the records were completed correctly. Systems were in place to record short term medicines together with long term medicines. The registered manager explained how improvements had been made to auditing records for people as well as ensuring staff training was up to date. People also told us they received the support they required.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe being supported by care staff and having them in their home.
- Staff understood how to protect people from harm and had had Safeguarding training.
- The registered manager understood their obligations to report any concerns they had to the local authority and CQC. Safeguarding notifications we reviewed confirmed this.

Assessing risk, safety monitoring and management

- People's care needs were assessed and recorded in their care files for staff to refer to. Risk assessments were detailed in people's care plans and had been reviewed and updated as needed.
- Staff explained to us how they supported people to reduce any risks to people's health. For example, staff explained how they monitored people's skin to ensure it was not at risk of breaking down.

Staffing and recruitment

- People told us they were supported by the number of staff they expected to support them. People told us they knew who to expect and that they had a consistent team of staff to support them.
- The registered provider's recruitment process included background checks to ensure staff were suitable to work at the service.

Preventing and controlling infection

- Staff told us they had access to PPE (Personal Protective Equipment). We saw staff attend the office to collect their PPE. People confirmed that staff wore PPE when supporting them.

Learning lessons when things go wrong

- The registered manager had implemented systems aimed at improving safety for people using the service.
- Accidents and incidents were recorded and shared with the management team to monitor.
- The registered manager reviewed accidents and incidents to identify trends and minimise any reoccurrence by sharing learning with staff. Updated guidance was shared through team meetings and at supervision meetings.

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.

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to 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

- People were positive about their experience of care and felt the service was well run.
- People felt assured when they contacted the administrative office, their query would be resolved.
- Staff told us they enjoyed working there and felt supported by the management team.

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

- Staff understood the providers whistleblowing policy and felt confident to use it if they had concerns.
- The registered provider understood the need to investigate and respond to complaints and where appropriate they made referrals to other organisations such as the Local Authority or CQC.
- Complaint logs included information about what actions had been taken to resolve the complaint. Complaints were responded to in line with the providers policy.

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

- Regular checks were made by the registered manager and nominated individual to assure themselves of the standard of care being delivered.
- The registered manager reviewed reports from their electronic care planning system to assure themselves people were receiving the care they needed. In addition, the registered manager carried out spot checks and supervision meetings to check staff understanding and practice.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; Working in partnership with others

- People told us they were consulted about their care, to check they were happy with the care being provided. People told us they would discuss their care with the staff supporting them in the first instance and were confident any issues would be resolved.
- The management team and care staff understood and promoted an inclusive culture. Care staff had received training on Equalities legislation and understood the significance of the protected characteristics.
- The registered manager was working with local stakeholders such as district nurses and the local authority to improve people's experience of care.

- The registered manager had taken on board findings of the last inspection and had invested in new systems to improve people's experience of care.