

Ignite Health And Home Care Services Ltd

Step Forward Support

Inspection report

24 Devonshire Road
Birmingham
B20 2PQ

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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

Step Forward Support is a residential care home providing personal care to people who have learning disabilities or autistic spectrum disorder. The service can support up to five people.

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

Systems were in place to protect people from the risk of abuse and harm.

People were comfortable, relaxed and happy around care staff and staff understood how to keep people safe.

Staff understood who to report concerns to as well as the risks to people's health.

People's support needs were risk assessed and care plans provided staff with the information they needed to manage the identified risk.

The risks to people's health were reviewed regularly and care plans updated following any changes.

The provider carried out recruitment checks to ensure staff were suitable for the role.

Staff had the necessary skills to carry out their role. Staff had regular training opportunities and training specific to people's individual needs was provided.

Staff had very good knowledge and understood people's health conditions and the support they required.

People received their prescribed medicines safely and in accordance with their specific guidance.

People were supported to attend appointments with healthcare professionals and guidance was sought.

Staff followed the infection control procedures the provider had in place.

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. Some people who were identified as lacking capacity did not have capacity assessment.

During the inspection this was raised with the registered manager who confirmed capacity assessments would be completed for all service users who lacked capacity.

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.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. There was a strong focus on supporting people to be independent, develop their skills and access their local community. This enabled people who used the service to live as full as life as

possible and achieve the best possible outcomes.

Right support:

- Model of care and setting maximises people's choice, control and independence

Right care:

- Care is person-centred and promotes people's dignity, privacy and human rights

Right culture:

- Ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

People's individual communication needs were considered to support them to be involved in their care. Systems and processes in place promoted a positive culture in the home.

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

Rating at last inspection

This is the first rating of this service. The service was registered with us on 03 July 2020.

Why we inspected

This was a planned inspection as the service had not previously received a rating.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 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 ●

Step Forward Support

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was completed by one inspector.

Service and service type

Step Forward Support is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. 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 unannounced.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and two relatives about their experience of the care provided. We spoke with three members of staff as well as the registered manager, human resources representative and care manager.

We reviewed a range of records. This included four people's care records. We looked at three staff files in relation to recruitment. We also looked at a variety of records relating to the management and quality assurance of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We also received feedback from three healthcare professionals.

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

- Staff knew how to recognise potential abuse and protect people from it. Staff had received training on how to keep people safe and described the actions they would take where people were at risk of harm. One staff member told us, "If I witnessed or became aware of any type of abuse, I would ensure the person was safe and tell my manager." Another staff member told us, "If I was unhappy with how we dealt with a safeguarding issue, I would tell you [CQC] or the police."
- We observed people were relaxed around staff. Relatives told us their loved ones were safe and comfortable with staff members. One person told us, "I like the staff they are good to me".
- Risk assessments were in place for people and updated regularly. Risk assessments contained information to guide staff on how to manage people's risks safely. Staff we spoke with knew people well.

Assessing risk, safety monitoring and management

- Risk to people had been appropriately managed. There were robust risk assessments in place to guide staff to how they should support people safely. One healthcare professional told us, "Their assessment process is very detailed which allows them to propose a support plan that is personal centred and captures how risk is going to be managed in the least restrictive way".
- Some people displayed distressed behaviours. In these instances, the provider had identified triggers to these behaviours, early warning signs to indicate the person may be distressed and strategies to be used by staff to reassure and support the person to prevent any escalation. We saw staff put these strategies into practice to ensure people's safety.
- People had individual personal evacuation plans (PEEPS) to ensure they were supported safely in the case of an emergency.
- Risks in relation to the premises were identified, assessed and well-managed.

Staffing and recruitment

- Recruitment checks were completed to make sure staff were safe to work with people. This included obtaining references from previous employers, and background checks with the Disclosure Barring Service (DBS).
- Staff told us they had received an induction when starting work, had the opportunity to shadow other staff and completed training.
- Our observations during the day, indicated there were enough staff on duty to support people with their care needs. People and their relatives told us there was enough staff to meet people's needs. Using medicines safely
- We reviewed a selection of medication administration records (MAR's) and saw that information for staff

members to follow was clear.

- Medicines were safely stored, administered and destroyed when people declined to take them or they were no longer required.
- There were measures in place to monitor the use of 'as required' medicines.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using Personal Protective Equipment (PPE) effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider had a system in place to check the vaccination status of staff and visiting professionals in line with the COVID-19 government guidance.
- People using the service were supported to maintain contacts with their relatives. A system was in place to support people to have visits from relatives and any other important people in their lives.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement.

Learning lessons when things go wrong

- We found accident and incident records were completed and monitored by the management team to reduce the likelihood of reoccurrence.

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 for 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.

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Some people who were identified as lacking capacity did not have a capacity assessment. This was raised with the registered manager who confirmed capacity assessments would be completed for all service users identified as potentially lacking capacity.
- We found the provider had sent Deprivation of Liberty Safeguards (DoLS) authorisation requests for people who lacked capacity and were waiting for these to be authorised by the local authority.
- Staff had received training in the MCA and had some basic knowledge of the Act. Staff were able to tell us how they asked for people's consent to care. We observed staff seek consent from people before supporting them.

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

- People's needs had been assessed prior to starting with the service in line with legislation and guidance. The assessments identified people's needs in relation to issues such as personal care, eating and drinking, mobility, skincare and communication. This information had been used to develop a care plan to support staff to understand how to meet the person's needs. One relative told us, "We have been involved with care planning from the start and throughout".
- People's protected characteristics, as identified in the Equality Act 2010, were considered as part of their assessments. This included needs in relation to gender, age, culture, religion, ethnicity and disability.

Staff support: induction, training, skills and experience

- Relatives told us staff knew what they were doing and were well trained. One person told us, "The staff are

trained well...they know what they are doing".

- The provider had systems in place to induct, train and develop staff. A staff member told us, "The training has been fine, I believe it gives me all the skills I need to do my job well".

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

- People's care records contained up to date nutrition information for staff to follow.
- People with modified diets had assessments to specify the type of diet they should consume.
- Staff we spoke with knew people's food likes and dislikes and were aware of specific dietary needs and any risks associated with eating and drinking.

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

- The service worked very closely with other agencies and health professionals in order to meet people's specific needs. Care records showed involvement from a range of health care professionals including GP, dentist and optician.
- Where required staff monitored people's health and worked well with external professionals to ensure people's health care needs were met.
- Staff monitored people's health care needs and would inform relatives, senior staff members and healthcare professionals if there was any change in people's health needs.
- Care plans were reviewed and updated to reflect any changes or recommendations from healthcare professionals. Staff told us they were confident changes to people's health and well-being were communicated effectively.

Adapting service, design, and decoration to meet people's needs

- The design and decoration of the premises was suitably adapted for the people who lived there.
- The premises provided people with choices about where they spent their time. We observed the provider was currently in the process of developing an activities room within the home to give people more choice with regard to how they spend their time.
- People's rooms were decorated and furnished to meet their personal tastes and preferences, for example having family photographs and artwork.

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 for 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

- Peoples' relatives provided consistent positive feedback regarding the care provided by the service. One relative told us, "[Name of service user] is happy there, the staff are very good."
- Staff spoke with kindness and compassion about the people they supported and told us they enjoyed their jobs. One member of staff told us, "I really enjoy my job, it's good to help people become more independent and do the things they enjoy."
- Staff had received training in Equality and Diversity. The registered manager gave examples of how they had worked to ensure people had equal access to opportunities and were not discriminated against. Staff knew people's history and their likes and dislikes and used this knowledge to support the person.

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

- Care plans were in place and had been developed with the support of people and their families. Meetings of people's care were held where people and their family attended and were involved in making decisions.
- Family members stated that they had been informed of any operational changes and asked for their views.

Respecting and promoting people's privacy, dignity and independence

- Relatives told us their loved ones were treated with dignity and respect.
- Staff told us they enjoyed working with the people they supported and understood their care and support needs. A staff member told us, "We get to know people really well, they all have a say in how their support is delivered."
- Staff maintained peoples independence wherever possible. Support plans promoted privacy, dignity and independence. Each person had a daily routine describing the activity and how staff can support the person to undertake it as independently as possible.

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 for 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 were supported by staff who knew and understood their needs. Relatives told us staff had built good relationships with people and knew their likes and dislikes.
- People had good links with family and staff supported people to maintain this. People had access to independent advocacy support.
- Staff respected people's individuality and diversity and were aware of people's personal preferences.
- A relative told us, "They have made an application for guardianship to support [Name of relative] when necessary and went through all the questions with me."
- Peoples' care plans were reviewed regularly, they remained up to date and appropriate to the individual. Changes to the care plans were communicated to staff. One relative told us, "Staff are very good, and I get constant feedback". One healthcare professional told us, "I have held reviews with staff over and can say the staff have been professional during those meetings".

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.

- The provider was aware of the AIS standards and people's specific communication needs were detailed in their care records.
- Staff were able to explain how they communicated effectively with people. For example, one staff member told us some people required structure to feel comfortable. As a result, staff members would inform people what was planned for the day and explain in detail what that meant.
- Information was available in different formats, for example, easy read.

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

- People were supported in a person-centred way to live their lives and do the things they enjoyed doing in a way and at a pace that suited them.
- People were encouraged to undertake activities in the local community with support from staff. Plans were in place for staff to follow when facilitating visits ensuring people are safe and supported.
- Peoples' likes and interests are gathered and recorded allowing staff to facilitate appropriate activities. Relatives spoke highly of the good communication between the staff and themselves. They were positive about the opportunities their family members were supported to participate in.

Improving care quality in response to complaints or concerns

- The provider had policies in place to respond to concerns or complaints.
- Compliments were used to identify what worked well.
- Relatives told us they were happy with all aspects of the service. They told us they would be confident speaking with the registered manager if there was something, they were not happy about. However, they had not needed to do this.

End of life care

- No one was receiving end of life care when we inspected. The provider had policies and procedures in place to support this need.

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 good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Mental capacity assessments had not been completed for some people who were identified as lacking capacity. We discussed these issues with the provider, and they confirmed mental capacity assessments would be completed for all people who required an assessment.
- The registered manager and care manager carried out regular audits to check on the quality of the service and to support continuous improvements.
- People were supported by staff who were motivated to carry out their role. Staff received regular supervisions where they had the opportunity to discuss their role and performance.
- Staff were aware how to raise a concern and told us they would do if the need arose.
- The provider was aware their legal responsibilities to inform us about significant events which could occur at the service.
- Staff we spoke with were positive about working for the service. One staff member told us, "The registered manager and management team are approachable and always willing to listen. The atmosphere at the home is good and positive."
- The provider had a clear vision for the development of their service.
- The management team had contingency arrangements in place to ensure the service delivery was not interrupted by unforeseen events. For example, the COVID-19 pandemic, we saw there were plans in place to ensure care tasks would be completed.

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

- People, relatives and all staff we spoke with told us they felt listened to and the provider was approachable. A staff member said, "We all support each other. All concerns are always listened to."
- The staff and management team put people first and promoted their independence, enabling people to make choices about their lives.
- The provider told us they only took on care packages if they could meet people's needs and provide them with good quality care.

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 management team understood their responsibilities around the duty of candour. They had a policy

and procedure in place. The management team told us they understood their responsibility to be open and honest when things go wrong.

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

- The management team used feedback from a variety of sources, including involving people and relatives in individual reviews to make sure the care and support was personalised and met people's needs.
- Relatives felt able to speak with staff and management of the home when needed and felt their feedback would be listened to.

Continuous learning and improving care

- The management team ensured they always kept up to date with changing guidance. They ensured staff were adhering to current guidance and best practice by carrying out spot checks. They also ensured policies had been updated to reflect these changes.
- Staff had completed training and they had access to continued learning so that they had the skills to meet people's needs.

Working in partnership with others

- Staff worked in partnership with health and social care professionals to ensure people had the care and support they needed to maintain their health and wellbeing. One healthcare professional told us, "We have been involved with Step Forward Support for some time and in relation to a number of individuals and we have always been impressed by the support they provide."