

Ignite Health Care Limited

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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?	Requires Improvement ●

Summary of findings

Overall summary

About the service

Ignite Health Care Limited is a domiciliary care agency providing personal care to 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. At the time of our inspection there were two people receiving personal care.

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

All necessary pre-employment checks were not completed prior to staff commencing work. This was updated following the site visit. There was sufficient staff to meet the needs of the people the service currently supported. Risk assessments were in place, for example, in regards to mobility and environment. The registered manager conducted spot checks on staff to ensure they were wearing personal protective equipment (PPE) appropriately.

Staff had received appropriate training to support people. Staff supervisions were taking place to support staff. People were appropriately supported with eating and drinking and good hydration was encouraged. Care notes showed people were being supported with their oral hygiene needs.

Care plans and records were person centred and reflected the needs of the person. Staff had a good understanding of people's needs and how they liked to be supported. Staff gave examples of how they treated them with dignity and respect. People using the service and their relatives were involved in care plan reviews.

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 .

We received positive feedback about the registered manager. The registered manager conducted monthly audits for each person using the service. The registered manager had plans for developing these further in the future. The service is small, the registered manager had a good knowledge of people using the service and regularly worked alongside staff.

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 5 November 2020 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We have found evidence that the provider needs to make improvements. Please see the safe section of this full report.

Recommendations

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service and will take further action if needed.

We have made a recommendation around the around safe recruitment of staff.

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?

Good ●

The service was not always safe.

Is the service effective?

Good ●

The service was effective.

Is the service caring?

Good ●

The service was caring.

Is the service responsive?

Good ●

The service was responsive.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Ignite Health Care Limited

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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of one inspector.

Service and service type

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

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was announced. We gave the service notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 26 May 2022 and ended on 17 June 2022. We visited the location's office on 31 May 2022.

What we did before the inspection

We reviewed the information we received about this service since they registered with the Commission. We used the information the provider sent us in the provider information return (PIR). This is information

providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We reviewed records relating to the running of the service including two care plans, three staff files and medication administration records. We spoke to a social care professional , who works closely with the service, two staff and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider . Following the inspection, we spoke with a social care professional and two relatives of people using the service.

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 of this newly registered service. This key question has been rated requires improvement. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- Staff were not always recruited safely. A disclosure and barring service (DBS) check should be completed for all staff prior to employment commencing. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The recruitment files for two members of staff showed these checks had not been correctly completed prior to employment commencing. For one staff member, the DBS check was completed in May 2022 however; they had worked at the service since November 2021 alongside the registered manager. For another person, the registered manager had not checked the update service before they started work. We made the registered manager aware of this during the inspection. Following the site visit, the registered manager checked the update service and provided evidence of this.

We recommend the provider reviews information required in respect of persons employed or appointed for the purposes of a regulated activity.

- People received support from a consistent staff team. We received feedback from a social care professional and a relative that this was important for people at the service.
- At the time of the inspection the service were actively recruiting more staff to enable them to accept more care packages from the local authority. The registered manager understood the importance of having the staff in place to ensure any additional person's needs could be met.

Systems and processes to safeguard people from the risk of abuse, Assessing risk, safety monitoring and management

- The service had a safeguarding policy in place. Staff were aware of the signs of abuse and how to report them.
- Staff had completed training in safeguarding.
- Relevant risk assessments were in place to support people, such as environmental and mobility.

Using medicines safely

- Staff supported people with medicines safely.
- Staff had received training and competency assessments in medicines administration.
- The medication administration records did not show the directions for administration. The registered manager explained this was supported by the information on the medicines blister pack.

Preventing and controlling infection

- Covid risk assessments were in place to support staff during the pandemic.
- Audits of staff donning and doffing personal protective equipment (PPE) had been completed by the registered manager.
- Staff told us there was enough PPE available.

Learning lessons when things go wrong

- At the time of the inspection, no accidents and incidents had been recorded at the service.
- In the event of an incident at the service, the registered manager had an accident form in place which included a section around reflective practice.
- Staff had good knowledge around what to do if there was an incident at the service.

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.

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

- The registered manager effectively assessed people's needs and reviewed these when necessary.
- Care notes showed people were supported with their needs and offered choices.
- There is an 'emergency grab sheet' at the front of each person's file to support professionals in case of an emergency.

Staff support: induction, training, skills and experience

- Staff completed an induction at the service. Staff training was a combination of online and face to face learning. Following training staff competencies were assessed.
- The registered manager was supporting staff to complete online training prior to work commencing to assess their suitability for the role.

Supporting people to eat and drink enough to maintain a balanced diet;; Supporting people to live healthier lives, access healthcare services and support

- People were encouraged and supported to meet their oral hygiene needs.
- Staff supported people to eat and drink. Care notes showed staff ensured people were left with drinks available to reduce the risk of dehydration.

Staff working with other agencies to provide consistent, effective, timely care

- We received positive feedback about staff working with other stakeholders to provide effective care to people.
- A social care professional provided positive feedback about the communication from the service and their ability to support the person effectively. They explained that staff supported other people involved in a person's care to further develop their skills to support people with specific needs.

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 MCA 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.

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.

- Mental capacity assessments were completed, where appropriate.
- Capacity assessments showed that people's capacity had been assessed in line with their ability to make specific decisions.

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

- Staff understood the importance of treating people with dignity and respect.
- The service had an equality and diversity policy in place which outlined their focus on supporting people with dignity.
- A relative told us ' They (staff) are really patient and take time for her (to complete tasks)'

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

- Care plan reviews showed that people and their families were actively involved in making decisions about their care.
- During a care plan review, one person fed back "everything (is) 100% satisfied."
- Staff explored options to provide additional support to people where possible. One relative told us "We will talk together about things we can do and come up with suggestions." Another relative told us, "They have been fantastic. I can't fault them."

Respecting and promoting people's privacy, dignity and independence

- Staff supported people's independence. One member of staff told us, "We let (people) let us know what they are able to do. We do not want to take away their independence."
- Staff treated people with dignity and respect. A relative told us staff treated their relative with dignity and respect and that staff "have a good understanding of (their relative)."

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, 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's care plans were personalised and encouraged choice for people using the service.
- Care notes demonstrated people received care in line with their choices. For example, what they would like to be left available for them when staff had finished providing support.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Care plans clearly outlined the communication needs of people using the service.
- The registered manager communicated effectively with people using the service to gather their views on the care they were receiving.

Improving care quality in response to complaints or concerns

- The service had a complaints policy in place. The policy was provided to all people using the service.
- At the time of our inspection, there were no records of complaints received from the service.

End of life care and support

- At the time of the inspection, the service were not supporting anyone with end of life care.
- Staff completed training in end of life care as part of their induction.

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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements, 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 had not ensured that appropriate pre-employment checks were completed for all staff prior to them delivering care. The registered manager was responsive following the inspection to ensure this was updated.
- The registered manager completed monthly audits of the service. The registered manager explained how they would further develop these audits.
- The registered manager was open and honest throughout the inspection process and understood their duty of candour responsibilities.

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

- Staff supported people with tasks which they were unable to complete independently which contributed to them remaining in their own homes.
- Staff worked collaboratively with relatives to provide care. A relative told us "They (staff) are receptive and open and bring their experience."

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

- We received positive feedback from a social care professional and relatives. "They communicate a lot with the family." "They (the service) are always contacting me."
- Staff felt supported by the registered manager. The registered manager conducted regular supervisions of staff, including spot checks, and staff felt supported.
- At the time of the inspection there was a small staff team in place. Staff had completed questionnaires to provide feedback about working at the service. The response we saw was positive.

Continuous learning and improving care

- The registered managers highlighted areas of improvement during supervisions.
- The registered manager followed up on actions highlighted by audits of the service.

Working in partnership with others

- We received positive feedback from a care professional who had worked closely with the service.

