

Pulse8+ Ltd

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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 well-led?

Good ●

Summary of findings

Overall summary

About the service

Service for Independent Living is a domiciliary care agency providing personal care to people in their homes.

People's experience of using this service.

Not all people who used the service received personal care. The Care Quality Commission (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 broader social care provided, people's experience of using this service and what we found.

People were supported with their medication when required. Risk assessments were completed, and staff had appropriate training.

Staff told us they felt well-trained and supported in their role. Staff felt listened to and able to contribute to the running of the service. For example, any ideas that could improve the service for people. The managers regularly observed staff practice to ensure people were supported safely and as they chose. People were fully involved in all aspects of their care.

Staff had completed training to identify signs of abuse and escalate concerns as and when required risks to people's health and well-being. Individual risk assessments were completed to ensure staff had the information to support people safely.

Staff identified when people were unwell or needed additional support, and referrals were made to medical professionals as required.

The service employed a recruitment manager to complete the necessary checks on new staff to ensure that only appropriate staff were employed.

Infection control measures were implemented to reduce the risk of spreading infection.

Incidents and accidents were investigated, information was used to improve, and lessons were learned. However, not all incidents were correctly coded, which meant investigations were not always relevant.

Risk assessments were completed, and the staff had appropriate training. The managers had an open-door policy that meant staff had the opportunity to speak with the managers if they had any concerns.

Staff had regular supervision, spot checks, and appraisals, which gave the manager and staff the

opportunity to address any concerns and progress in the organisation.

Audits were carried out regularly by senior staff to monitor the service provided and assess where improvements were required.

Preventing and controlling Infection

Control measures were put in place to reduce the risk of infection spreading. Incidents and accidents were investigated, the provider ensured personal protective equipment was available. This included gloves, aprons, and masks. All staff had completed training in infection control.

People and their relatives gave positive views about the service provided and some areas for improvement. The managers welcomed feedback and used the information to improve.

Staff were provided with induction and training opportunities to provide them with the skills required to meet people's needs. The registered manager was proactive in sourcing additional training for the staff when required.

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

People were treated with kindness, dignity, and compassion. Staff took the time to get to know people and encouraged them to maintain their hobbies and interests.

People's communication needs were understood, and people told us that they felt comfortable and confident expressing their views and sharing any concerns.

People were supported with their medication when required. Risk assessments were completed, and the staff had appropriate training

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe Details are in our findings below</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well led Details are in our well led findings below</p>	<p>Good ●</p>

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Detailed findings

Background to this inspection

The inspection

We carried out this inspection under section 60 of the Health and Social Care 2008 (the Act) as part of our regulatory function. We checked whether the provider met 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 1 inspector.

Service and service

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

Registered manager: this provider must have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service.

Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and for compliance with regulations. At the time of our inspection, a registered manager was not in post. The Care Quality Commission had received an application for the person to register as the manager of the service.

Notice of inspection: we gave the service 72 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 2 February 2024 and ended on 8 February 2024.

What we did before the inspection

We reviewed information we had received about the service since their last inspection.

During the inspection, we spoke with the provider and the acting manager. We spoke with 7 relatives, 6 people using the service and 5 staff.

Is the service safe?

Our findings

Our findings - Is the service safe? = Good

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. At our last inspection, we rated this key question as Good. At this inspection, the rating has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people's safety and well-being were assessed and managed.
- People were involved in this process, and their views were considered when planning people's care.
- Risk assessment detailed how to respond to people's health conditions.
- Staff told us that people were involved in their care as much as possible, so they had control over how they were supported. We looked at 4 Care records and saw information to support staff in caring for people safely.
- Detailed risk assessment had been completed and there was clear information about people's care needs.
- A relative told us their relative told her. "The staff are really lovely. They come on time and involve her in whatever they do. I also feel relative is safe."

Using medicines safely that people

- People were supported to take their medication. Risk assessments were in place to ensure people were supported safely.
- A relative told us, "[named person] now takes their medication with support from staff. This is to ensure that medication is taken at the right time."
- All staff had completed training in the safe administration of medication; this was updated when required to ensure people received their medication safely.
- Records were available to ensure the medication prescribed had been taken as instructed.
- Staff told us that if they were concerned, they would contact the office for advice.

Staffing and recruitment

- The provider followed their policy about recruitment. This practice ensured that staff were employed safely. Disclosure and Barring Service (DBS) checks were completed and obtained before staff started work. These checks provide information, including details about convictions and cautions held on the Police National Computer. This information helps employers make safer recruitment decisions.
- Potential staff completed application forms so their work history could be reviewed. Staff told us they had an induction and training when they commenced employment.
- One person using the service told us, "I have had them for a few months now, and I have no problem with the staff. I get an excellent service."
- Another person told us, "The staff are very good. The staff arrived on time, and they did what I needed. They always ask if I need anything before, they go. We also have a good banter, which is nice."

- A relative told us "I am happy with the organisation and have peace of mind that my relative is being looked after."

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems to safeguard people from abuse. Where any safeguarding concerns were identified, investigations were completed, and appropriate plans were implemented to protect people from potential harm.
- The provider also notified the relevant authorities, for example, the Safeguarding Authority and the Care Quality Commission (CQC)
- People using the service and their relatives told us they felt safe with the staff that supported them.
- Staff told us they had received safeguarding training, and the records we saw confirmed this. All staff told us they would report any incidents they felt needed investigation.
- Staff were knowledgeable about types of abuse and how they might identify them. A staff member told us "People's body language and their behaviour may change, which could indicate abuse. I would immediately report concerns to the managers."

Preventing and controlling infection

- Staff had received training in infection control and prevention. Staff confirmed to us that protective clothing, including disposable gloves and aprons, was available to them and their use when assisting people with personal care

Learning lessons when things go wrong.

- All incidents were recorded and reviewed by the provider. A staff member supported a person with their finances. An incident took place where the staff member used the person's money by mistake. The staff member paid the person back and the police were called. Records show that the provider took appropriate action, the police disciplinary hearing was completed, staff members were subsequently dismissed and Stricter arrangements were made following the. All incidents involving people were reported to external organisations when required. The provider ensured that action was taken to prevent recurrence. Where things did go wrong, all staff were informed, so lessons were learned

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 our last inspection, we rated this key question as requiring improvement. At this inspection, the rating has changed 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 achieves good outcomes for people, engaging and involving people using the service, the public and staff, fully considering their equality characteristics. For example

- The acting manager told us that We promote a positive culture and ensure that staff understand dignity, respect, and consent and work within professional boundaries.

We listen to staff and support them as best as we possibly can. We encourage all staff to be completely honest and open with us, and we openly discuss any issues they may have. Our staff have been with us for some time now, and we feel they understand that we look at anything and everything in a fair and balanced way.

We are open and honest with our service users; if any issues arise, we understand the importance of honesty and learning from any mistakes made. We would apologise to the person and offer appropriate solutions.

- Staff told us they enjoyed working at the service and spoke fondly of the people they supported, demonstrating they knew people well.

Systems were in place to support continuous learning and improvement.

- The provider was knowledgeable and clearly understood the risk and regulatory requirements.
- The provider completed audits and checks. Where staff identified issues, action was taken. For example, a full investigation had been completed about an incident. Lessons were learned, and action was taken to prevent the same thing happening again. The incident was referred to the relevant authority, and procedures were changed as a result to prevent the incident from occurring.

Working in partnership with others

- The staff team worked in partnership with families and a range of professionals, including the local authority and social workers.
- At the time of the inspection, an application had been submitted to the Care Quality Commission to appoint a registered manager.
- People received personal care based on their care needs at all stages of their assessments.
- Staff demonstrated a good level of knowledge about the people they supported. They understood what action they needed to take if they had concerns about people's health.
- The service worked in partnership with external agencies to support people to achieve good outcomes, for example, district nurses and occupational therapists.

How the provider understands and acts on the duty of candour is their legal responsibility to be open and

honest with people when something goes wrong.

- The provider understood their responsibilities under the duty of candour and had policies and procedures to ensure they were open and transparent when things went wrong.