

Starcover Health & Social Care Ltd

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Inspection report

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09 March 2022

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Starcover Health & Social Care Ltd is a domiciliary care agency. It provides personal care to people living in their own houses and flats. At the time of our inspection two people were receiving regulated activity. 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 the service and what we found

The inspection was prompted in part due to concerns received about people's safety, we found no evidence people were unsafe. We found safeguarding concerns were raised and recorded. We were assured people received their medicines safely.

Audits carried out by the provider were not always completed. There was no systems in place to improve the safety of the service following accidents or incidents.

We made two recommendations for the provider to review good practice guidance in relation to monitoring accidents and incidents and in relation to effective quality assurance processes.

People told us visits were carried out on time and staff told us they had enough time to support people. Staff told us they felt supported and leaders were approachable. One staff member said " I know the leadership team very well. I can have open honest two-way conversations, I will say if I am not happy.". There were no staff meetings or staff surveys, most relatives told us they felt involved. One relative said. "I fill out forms at least once a year. I have only given positive feedback."

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

Rating at last inspection

The last rating for the service was requires improvement (published 28 February 2020).

Why we inspected

We received concerns in relation people's safety and management of the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Starcover Health & Social Care Ltd on our website at www.cqc.org.uk.

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 safe.

Is the service well-led?

Requires Improvement 

The service was not always well-led.

Starcover Health & Social Care Ltd

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.

This was a targeted inspection to check on a concern we had about people's safety and management of the service.

Inspection team

The inspection was carried out by an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

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 24 hours before the inspection site visit. Inspection activity started on 02 March 2022 and ended on 20 March 2022. We visited the office location on 09 March 2022.

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, such as details about incidents the provider must notify CQC about, for example incidents of abuse. We reviewed all other information sent to us from stakeholders such as the local authority and members of the public. We used all of this information to plan our inspection.

During the inspection

We spoke with six relatives about their experience of the care provided. We spoke with six staff members including three people from the management team. We looked at two care records and two medicine records. We looked at three staff files regarding recruitment. We also looked at quality monitoring records relating to the management of the service, such as audits and quality assurance reports.

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 changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- There was no system in place to improve the safety of the service following accidents or incidents.

We recommend the provider implements an effective system to monitor and review accidents and incidents.

- Risk assessments were person centred to reflect people's individual needs. There were specific risk assessments for how to manage certain physical health needs, such as diabetes and catheter care.
- Staff had received the appropriate training and knew how to support people to mitigate potential risks.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from the risk of abuse and avoidable harm, one relative told us "[Relative] is absolutely safe with the care".
- The provider had a safeguarding policy and staff demonstrated a good awareness of safeguarding procedures. They knew who to inform if they witnessed abuse or had an allegation of abuse reported to them.
- Safeguarding concerns were raised and recorded and we found the safeguarding policy was relevant to the service.
- Staff were up to date with safeguarding training.

Staffing and recruitment

- The provider had recruitment checks in place to ensure staff were suitable to work in a care setting.
- Visits were carried out on time. One relative said, "Carers are bang on time and will stay extra". Staff told us they had enough time to support people, "We aren't rushed, we have plenty of time to help them [people using the service]".

Using medicines safely

- People received their medicines safely. One relative said "They [staff] check the medication when they arrive and will bring to my attention if there are any errors in the prescription".
- The provider conducted regular medicine audits.
- The provider ensured all staff who administered medicines were trained to do so and had included frequent competency checks, however these were not documented. Following the inspection, we were provided with evidence showing the service had implemented the recording of medicine competency assessments.
- There were clear records to confirm medicines were administered as prescribed using the electronic recording system.

Preventing and controlling infection

- Staff told us they were provided with personal protective equipment (PPE) to use when carrying out personal care in people's homes to prevent cross infection.
- People we spoke with said staff wore their PPE when attending their homes and all staff were following COVID-19 guidance. There was a good supply of PPE stock in the provider's office and staff knew they could collect more stock at any time.
- There was an infection control and COVID-19 policy in place.

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. The rating for this key question has remained 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; Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- Audits carried out by the provider were not always completed. We found gaps in the audits we reviewed and there were no actions taken therefore there was no evidence of a continuous approach to improving care.

We recommend the provider implements effective audits and takes action to update their practice accordingly.

- The home had policies and procedures in place which covered all aspects of the service. The policies seen had been reviewed and were up to date.
- There was a training matrix in place. At the time of the inspection, all staff were up to date with training.
- The feedback about management and leadership was positive. Staff told us they felt supported and leaders were approachable. One staff member said " I know the leadership team very well. I can have open honest two-way conversations, I will say if I am not happy."
- Care records were accurate. Risk assessments were completed for those people with specific health needs.
- The registered manager understood their responsibilities in relation to regulatory requirements such as informing CQC of particular events within the service.

Continuous learning and improving care

- The provider demonstrated an open and transparent approach to sharing learning and improving the service. Following the inspection, the provider reviewed their systems and processes for auditing the quality and safety of the service.
- Following the inspection, the director of operations showed us a 'learning log' on which they recorded what had gone wrong and what action they had taken to prevent it from happening again.

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

- The provider completed satisfaction surveys, people and their relatives were asked for their feedback about the service they received.
- Most of the relatives spoke well of the care staff. They said they treated the service users well, with care, dignity and respect.

- Staff were able to raise concerns with the management team and had regular supervision.
- There were no staff meetings or staff surveys, however we did see evidence of ongoing communication with staff through whatsapp.

Working in partnership with others

- The provider had established good working relationships with health professionals. We saw evidence of multi-disciplinary meetings.
- Professionals were positive about the service, one professional said, "[The service] have provided a quality of care to the individuals we support and have been pro-active in dealing with concerns/issues raised by families and the person they support."