

Northstar Home care Limited

NorthStar Home Care Ltd

Inspection report

3 Carloon Road
Manchester
M23 0BR

Tel: 01619459453

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29 July 2020
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07 August 2020

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23 September 2020

Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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Summary of findings

Overall summary

About the service

NorthStar Home Care is a domiciliary care service providing care and support to people living in their own homes. The agency provides help and support to adults with a variety of needs. The service provides a range of care services including; assistance with personal care, preparation of meals, medication administration and companionship. At the time of our inspection there were four people using the service.

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

Some improvements had been made in relation to recruitment, but staff files were still incomplete.

Systems and processes to assess, monitor and improve the quality and safety of the services had improved. However, some key documents held at the service needed to be updated.

Comprehensive assessments of people's needs were in place. Systems were in place to ensure people who used the service received their medication safely and staff had completed training in medicines administration.

A comprehensive programme of staff training was in place. People who used the service felt they were treated as individuals and respected. People told us the registered manager regularly checked with them to see if they were happy with the care they received.

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.

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 this service was requires improvement (published 19 September 2019) and there were multiple breaches 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 the service had made improvements and was no longer in breach of Regulations 9, 12 and 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and Regulation 12 Registration Regulations 2009 (Schedule 3). However, we found the service had not fully met the requirements made within the warning notices and there were still some improvements required with regard to Regulation 17 and Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Why we inspected

We undertook this targeted inspection to check whether the warning notices we previously served in relation to Regulation 17 and 19 of the Health and Social Care Act 2008 (Regulated Activities)

Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on warning notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will return to visit as per our re-inspection 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?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

NorthStar Home Care Ltd

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements of the warning notices in relation to Regulations 17, (Good governance) and 19, (Fit and proper persons employed), of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

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

The service had a manager registered with the Care Quality Commission. This means 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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection. Inspection activity started on 29 July 2020 and ended on 7 August 2020. We visited the office location on 29 July 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 and healthcare professionals who work with the service. We used all of this information to plan our inspection.

During the inspection-

We reviewed a range of records, including all four people's care records and we looked at all the care staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We spoke with two people who used the service and two relatives about their experience of the care provided. We spoke with all five members of care staff, the nominated individual and the registered manager. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Staffing and recruitment

At our last inspection the provider had failed to ensure staff were safely recruited. This was a breach of Regulation 19 of the of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Some improvements had been made but there were still some areas in need of improvement. This meant the service was still in breach of Regulation 19.

- Suitable references had been obtained for all staff since the last inspection. However, there were still documents missing from staff files and gaps in employment had not always been explored as thoroughly as they should have.
- Staffing levels were sufficient to ensure people's support could be provided as required.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to carry out comprehensive assessments of people's care needs. This was a breach of Regulation 9 of the of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 9.

- Comprehensive assessments of people's needs were in place and individual risk assessments had been completed and updated as required.
- When people's needs changed this was recorded and care adjusted to meet their current needs.

Using medicines safely

At our last inspection the provider had not implemented systems to evidence clear management and administration of people's medicines. This was a breach of Regulation 12 of the Health and Social Care Act of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection sufficient improvements had been made and the provider was no longer in breach of Regulation 12.

- Systems were in place to ensure people who used the service received their medication safely.
- Staff had completed training in medicines administration and there was oversight of competence by the registered manager.

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 inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

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

At the last inspection the provider had not implemented systems to evidence clear oversight of the service and records were not always accurately completed and maintained. This was a breach of Regulation 17 of the of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

At this inspection some improvements had been made, but there were still areas that required further improvement. This meant the service was still in breach of Regulation 17.

- Some key documents held at the service were inaccurate. A staff health and safety handbook we were sent included reference to a completely different service throughout. This had been pointed out at the previous inspection but had yet to be addressed.
- A further staff handbook we saw included reference to staff maintaining their registration with NMC, although the service did not provide a nursing service or employ nurses. The registered manager told us this was because some of the staff had been registered nurses in their own country prior to coming to the UK. This was not relevant to the service they provided and had also been discussed at the previous inspection but not yet actioned.
- We saw a number of improvements to systems and processes at the service. Medicines systems were now safe and staff were suitably trained and monitored. Staff records had improved and care records were thorough and reflected people's needs.

At the last inspection the service's statement of purpose did not reflect up to date and accurate information about the service. This meant the service was in breach of Regulation 12 Registration Regulations 2009 (Schedule 3).

At this inspection the statement of purpose had been updated to better reflect the service provided. The service was, therefore, no longer in breach of Regulation 12 of the Registration Regulations 2009 (Schedule 3).

At the last inspection the provider had failed to implement a comprehensive staff training programme. This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

A comprehensive programme of staff training was in place. This meant the service was no longer in breach of Regulation 18.

Continuous learning and improving care

- Audits of staff files and files for people who used the service were undated and did not include actions to address any issues found. These needed to be improved to include dates and actions taken.
- Regular checks were undertaken with people to ascertain if they were satisfied with the service. One person said, "The director phones regularly to check if everything is OK and I can contact them when I need to. It is a six star service, not five star, absolutely brilliant. I would recommend them to anyone." Another person said, "The manager rings regularly to check if things are OK."
- Care reviews had been completed and files updated to reflect people's changing needs.

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

- People felt they were treated as individuals and respected. One person told us, "[Registered manager] is brilliant. She contacts me a lot of the time and if the care needs altering, we work together." Another person said, "The quality of care is excellent, they go above and beyond and do what it takes to keep the client happy."

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 17 HSCA RA Regulations 2014 Good governance Effective quality monitoring systems did not always evidence clear management and oversight of the service.
Regulated activity	Regulation
Personal care	Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed Recruitment procedures were not sufficiently robust to ensure the safety and protection of people who used the service.