

Starcross Trading Limited

Starcross Trading Ltd T/A Bears

Inspection report

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Ratings

Overall rating for this location

Are services safe?

Are services effective?

Are services caring?

Are services responsive to people's needs?

Are services well-led?

Summary of findings

Overall summary

This was a focused follow up inspection to investigate whether concerns from our previous inspection on 11 and 12 February 2020 had been resolved. We did not rate this service at this inspection. The previous overall rating of good remains.

At this inspection we found:

- The provider has complied with the Requirement Notice issued in March 2020. The provider had made improvements to their recruitment processes and had completed retrospective reference checks for all staff to ensure fitness to work. The provider had also implemented a new system to ensure employee files were consistently being fully completed including documentation such as interview notes and reference checks.

Summary of findings

Our judgements about each of the main services

Service

Patient transport services

Rating Summary of each main service

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Emergency and urgent care

Urgent and Emergency services were a small proportion of activity. These services included high dependency transfers between hospitals. Arrangements for patient transport services (PTS) and urgent and emergency care were mostly the same. Where arrangements were the same, we have reported findings in the PTS section.

Summary of findings

Contents

Summary of this inspection

Background to Starcross Trading Ltd T/A Bears	5
Information about Starcross Trading Ltd T/A Bears	5

Our findings from this inspection

Overview of ratings	7
Our findings by main service	8

Summary of this inspection

Background to Starcross Trading Ltd T/A Bears

Starcross Trading Ltd T/A BEARS (British Emergency Ambulance Response Service) is operated by Starcross Trading Limited. The service provides emergency and urgent care and a patient transport service. BEARS was founded in 2009 and is an independent ambulance service providing a range of different patient transport services based in north west London. This includes the transfer of high dependency patients, paediatric and neonatal intensive care transfers, patients receiving Extracorporeal Membrane Oxygenation (ECMO), non-emergency transfers secure/mental health patient transfers and a paramedic service. ECMO is a form of life support that provides both cardiac and respiratory support to persons whose heart and lungs are unable to provide an adequate amount of gas exchange to sustain life. The service provides transport for both adults and children and young people. Journeys are made to various locations within London and longer journeys occur on a regular basis. The service has vehicles operated by emergency care assistants, emergency medical technicians and paramedics. The service provides patient transport services (PTS) and emergency and urgent care (EUC) services. EUC patient transfers are between hospitals. The provider is registered for the regulated activities:

- Transport services, triage and medical advice provided remotely
- Treatment of disease, disorder and injury

The service performs contracted work with two London NHS Trusts and ad-hoc work for various other hospitals nationally. The service also does ad-hoc work for other independent ambulance providers based on agreed set rates. The service also subcontracts some work out to smaller independent ambulance services.

The main service provided by this ambulance service is Patient Transport Services (PTS). Although the service experienced fluctuations in activity during the COVID-19 pandemic over the last 12 months, PTS makes up 78% of the work the service undertakes. Emergency and Urgent Care (EUC) takes up 22% of the work the service undertakes. Where our findings on Emergency and Urgent Care (EUC) – for example, management arrangements – also apply to other services, we do not repeat the information but cross-refer to the PTS section.

The service was last inspected on 11 and 12 February 2020 and a report was published in March 2020. Following the 2020 inspection, the service was rated as good and was served with one Requirement Notice for failing to comply with Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 19 (Fit and proper persons employed).

How we carried out this inspection

The team that inspected the service comprised a CQC lead inspector and one other inspector. The inspection team was overseen by Nicola Wise, Head of Hospital Inspection.

We inspected the Starcross Trading t/a Bears on 24 September 2021 using our focused inspection methodology. We inspected only the areas specific to the requirement notice which was issued in March 2020. We inspected the service to determine whether the provider was now compliant with the requirements set out in the Requirement Notice issued in March 2020.

Summary of this inspection

This was an unannounced inspection. During this inspection, the inspection team spoke with the registered manager and the HR manager and reviewed documentation in relation to the concerns set out in the Requirement Notice in the previous inspection.

You can find information about how we carry out our inspections on our website: <https://www.cqc.org.uk/what-we-do/how-we-do-our-job/what-we-do-inspection>.


Our findings

Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Patient transport services	N/A	N/A	N/A	N/A	Inspected but not rated	N/A
Emergency and urgent care	N/A	N/A	N/A	N/A	Inspected but not rated	N/A
Overall	N/A	N/A	N/A	N/A	N/A	N/A

Patient transport services

Safe	
Effective	
Caring	
Responsive	
Well-led	Inspected but not rated 

Are Patient transport services well-led?

Inspected but not rated 

During this inspection we looked at specific aspects of the well led domain. Please see the overall summary for more information.

At our last inspection we found deficiencies in the recruitment process. At this inspection, the provider had made improvements to their recruitment processes and had completed retrospective reference checks for all staff to ensure fitness to work. The provider had also implemented a new system to ensure employee files were consistently being fully completed including documentation such as interview notes and reference checks.

At our last inspection we found that the provider was not meeting the regulatory requirements of schedule three of the Health and Social Care Act (Regulated Activities) Regulations 2014 which sets out the eight categories of information providers must keep about staff. The eight categories are; proof of identification; DBS; satisfactory of evidence of good conduct in previous employment; reasons for leaving previous employment; evidence of required qualifications; full employment history; satisfactory information about physical or mental health conditions. At our last inspection we found that some staff had not had a second reference provided and interview notes were not always present or retained in staff files.

Following our last inspection, the registered manager had conducted a review of all staff files to determine documentation that was missing. The service had completed an investigation and gap analysis of missing interview notes and references which we found at our last inspection.

The registered manager told us that their investigation found that interview notes for 20 members of staff were found to be missing due to a loss during the process of scanning paper records into the electronic system. As a result of this incident and the missing reference checks and interview notes that we found at our last inspection, the provider had employed a new human resources (HR) team which included an HR manager, HR officer and HR administrator.

The service had also made several changes to their recruitment process. This included additional assessments at the interview stage and capturing all information centrally on the provider's electronic information management system. The service had also signed up to an automated DBS update service (with consent of staff members) in order to ensure all staff had an up to date DBS. The HR manager told us that the electronic information management system allowed for better oversight of any requests for information or issues and this could then be easily escalated on a daily basis with the senior management team.

Patient transport services

The service had also implemented a Staff File Control Sheet which was a list of documents which were required before a staff member could start working. This included whether interview forms and reference checks had been completed. The sheet had been integrated into the provider's electronic information management system and required senior management sign off to 'activate' any member of staff for training and shadowing of shifts. This would then be followed by a secondary senior management sign off on the system on completion of all training to authorise the staff member to begin shifts.

For those staff members who had missing interview notes, a mini interview was held with the head of business. This was recorded within a History Note file kept within the staff member's personnel file. We reviewed these notes during our inspection. The notes detailed a conversation with the staff member, date of employment, date of last performance development review and sign off by the head of business and managing director.

At this inspection we found that the registered manager and HR manager had undertaken risk assessments for all staff who did not have the complete reference checks in place. The registered manager and HR manager had told us that they had attempted to actively chase references and where these could not be obtained, the service undertook risk assessments for all staff who did not have the required reference checks in place. We reviewed all 33 of these risk assessments and saw that a thorough assessment had been conducted which included a review of the staff members' DBS, driving licence, qualifications, driving assessment, interview process, right to work and number of references which had been obtained. Notes were made on the risk assessment by the registered manager with regards to staff members' competency, history and experience. All risk assessments were signed off by the registered manager and stored in personnel files. The risk assessments were also in the process of being uploaded as an additional 'tab' in the provider's electronic information management system.


At our last inspection we reviewed the non-executive director's file which contained evidence of revalidation and details of the four individuals who had been asked to provide a reference. However, we did not see such references within the file. At this inspection, the references were not stored within the file and had been stored on email which were not easily accessible. The registered manager told us that the references had not been filed correctly by the previous HR team following the last inspection. The registered manager told us that the senior management team were considering moving the personnel files for executives and non-executive directors to a secure area of the electronic information management system to ensure that all documentation could be kept in one place.

We reviewed personnel files for staff and executive members and saw that required checks had been carried out, such as DBS, driving licence and right to work, and there was evidence of training and offer letters. We saw that this had been stored within hard copy personnel files and the provider's electronic information management system.

At our last inspection we reviewed the recruitment policy and whilst it stated references would be requested it did not state how many were required for each staff member. At this inspection we reviewed the recruitment policy which had been updated since our last inspection and stated that a minimum of two references were required based on the last three years of employment history. The policy stated that if an employee had been at one company for more than four years, a minimum of one character reference would be obtained. We checked staff files and saw that a minimum of two reference checks had been requested, received and stored on the provider's electronic information management system including dates of when the request was sent and when references were received. We saw that a copy of the reference was then saved onto the system.

Following this inspection, we were assured that the provider was now compliant with the requirements set out in the Requirement Notice issued in March 2020.

Emergency and urgent care

Safe	
Effective	
Caring	
Responsive	
Well-led	Inspected but not rated 

Are Emergency and urgent care well-led?

Inspected but not rated 

See the Patient Transport Services (PTS) section for main findings