

Caring Stars Limited

# Caring Stars Limited

## 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?

Good ●

# Summary of findings

## Overall summary

### About the service

Caring Stars Limited is a domiciliary care agency providing personal care to 25 people at the time of the inspection. 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 this service and what we found

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

**Right Support:** People were supported to have 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. Records relating to consent and capacity needed improving and we have made a recommendation about this.

**Right Care:** People were protected from the risk of abuse. Risk assessments had been carried out to identify the risks people faced. These included information about how to mitigate those risks. There were enough staff working at the service to meet people's needs and the provider had robust staff recruitment practices. The service's arrangements for controlling infections were effective. People received their medicines safely and accidents and incidents were reviewed to see if any lessons could be learnt from them.

**Right Culture:** People were supported with care that was person-centred. Quality assurance and monitoring systems helped drive improvements at the service. Relatives and staff told us there was an open and positive culture at the service. The provider was aware of their legal obligations and worked with other agencies to develop best practice and share knowledge.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

This service was registered with us on 7 June 2021 and this is the first inspection.

### Why we inspected

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

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

Details are in our effective findings below.

Good 

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good 

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good 

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good 

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good 

# Caring Stars 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 was carried out by 1 inspector.

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

#### Registered Manager

This provider is required to 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 compliance with regulations.

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

#### 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 that the provider or registered manager would be in the office to support the inspection.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 spoke with 2 people and 7 relatives about their experience of the care provided. We spoke with 6 members of staff including the registered manager.

We reviewed a range of records including 3 people's care records and medicines records. We looked at recruitment records for 3 members of staff. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

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

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse.
- Staff received training which gave them the skills required to recognise, report and record concerns.
- Staff were confident any concerns raised with the management team would be swiftly addressed to ensure people were kept safe.

Assessing risk, safety monitoring and management

- Risks associated with people's care and support had been identified and managed to keep people safe.
- Risk assessments clearly detailed the support people required to safely manage risks without restrictions being placed on their freedoms.

Staffing and recruitment

- Staff were safely recruited.
- The provider had a robust recruitment policy and process which helped them recruit suitable staff. This included obtaining pre-employment checks such as Disclosure and Barring Service checks (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines as prescribed.
- Staff had been trained in administering medicines and their competence regularly checked.
- The registered manager regularly checked medication administration records to ensure they were accurate.

Preventing and controlling infection

- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The provider was keen to learn when things went wrong. The registered manager analysed accidents and incidents, identified trends and patterns, and looked at changes that could be made to mitigate future events.

# 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.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The provider was not fully working within the requirements of the MCA. Records relating to consent, and capacity needed improvement. Records did not always demonstrate people, or their legal representatives had consented to their care.
- Despite the issues with records, we saw no indication people's rights were restricted. Staff understood the importance of supporting people to make their own decisions.

We recommend the provider reviews and updates consent and capacity decisions to ensure they are current and in line with the MCA.

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

- The provider ensured assessments were completed, which gathered detailed information about each person's care needs, prior to care being delivered. Care plans and risk assessments were devised using this information.
- People received effective care based on current best practice for people being supported in their own home.

Staff support: induction, training, skills and experience

- Staff received support to carry out their role effectively.

- Staff received a thorough induction followed by a training programme which continued throughout their employment. One relative raised a concern about staff training. They said they felt staff would benefit from more training in how to support people with dementia when they are feeling anxious or distressed. We discussed this with the registered manager who said they would take immediate action to address this concern.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support; Supporting people to eat and drink enough to maintain a balanced diet

- Staff worked in partnership with people and their families to help them maintain a healthy lifestyle.
- The registered manager recognised the importance of networking with health care professionals to further develop their knowledge and understanding of people's personal needs and risks.
- Mostly people were supported to eat, drink and maintain a healthy diet where this was an assessed need. One person said, "You have to show the staff the basics even how to make a sandwich." We discussed this with the registered manager, who gave us assurances they would address this concern immediately.

# 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

- People told us they received care from staff that were kind and who knew them well. Comments from people and relatives included, "The staff are so kind," and "The staff have been fantastic, they are really helpful."
- Staff told us they were aware of the importance of treating people with dignity and respect and ensuring people were involved in decisions about their care.

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

- There were effective systems in place to support people to make decisions about their care and express their views. The assessment and care planning process ensured people remained actively involved in decisions about how and when staff supported them.
- People found it easy to communicate with the staff. This helped to ensure people could express their views and ask for things to be done differently, when necessary. A relative commented, " They [staff] are very respectful when they are talking to [my relative]. They persevere when [my relative] is struggling to communicate or if [relative] is feeling anxious or distressed."

Respecting and promoting people's privacy, dignity and independence

- People told us staff were respectful of their belongings and property and supported them with dignity and kindness. They respected people's dignity and encouraged people to retain their independence.
- Staff worked in collaboration with people and their families to ensure good and consistent outcomes for people.

# 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

- People's needs were assessed before a service was provided. This was to ensure their needs could be met.
- People's care plans provided staff with the information they needed to support people to understand their preferences and choices.

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.

- Information about people's speech, visual, and hearing needs were recorded, which assisted staff in understanding people's preferred method of communication
- Relatives told us staff knew how to communicate with their family member and they tailored their approach to suit each person's needs. A relative commented, "They [staff] are lovely they talk to [my relative] in a respectful way. They [staff] are very caring."

Improving care quality in response to complaints or concerns

- People had access to information on how to raise concerns in line with the provider's policy and service users' guide.
- The registered manager said they would address any issues informally with each person if concerns were raised.
- Relatives knew how they or their family member could complain about the service. They told us they felt able to raise any issues or concerns with the staff and provider.

End of life care and support

- The provider had suitable systems in place to ensure they could support people at the end of their life to have a comfortable, dignified and pain-free death.

# 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 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, which achieves good outcomes for people; 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 service had a person-centred, caring culture and the care people received met their needs and outcomes. We received consistently positive feedback about people's experience of the service.
- Staff morale was positive. They told us they were treated well, and they enjoyed their jobs. Comments from staff included, "I love working here, it's good to help people," and "I feel really comfortable working here. The management listen to us. They are like family."
- The registered manager and staff were open, honest and transparent, in accordance with the duty of candour.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager and staff were motivated about their roles and understood their responsibilities. Staff displayed a clear desire to achieve good outcomes for people.
- There were systems in place to monitor how the service was being delivered, to help ensure people were receiving safe, good quality care. This included monitoring the timeliness of care visits, the duration of those visits and whether people were receiving the care they needed.
- Spot checks and competence evaluations were completed with staff regularly. This helped management to monitor the quality of care being provided and to understand where further training, mentoring and support was required.
- The registered manager was open to receiving feedback about the service and had a drive to continuously learn, improve and provide good quality care.

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

- People using the service and their relatives had opportunities to give feedback about the service. They were actively encouraged to do this via surveys and the complaints and compliments process. When people and relatives provided feedback, this had been shared with relevant staff members and acted on.
- Staff had regular opportunities to share their ideas about how to improve the service, via staff meetings and supervision sessions. Staff told us they were listened to, and they were confident the management team would deal appropriately with any concerns or issues they raised.

### Working in partnership with others

- The service worked in partnership with other agencies to review and address any changes in people's support requirements as required.