

Star Care UK Ltd

Star Care UK Limited - 51-55 Fowler Road

Inspection report

51-55 Fowler Road Hainault Essex IG6 3XE

Tel: 02085026660

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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:

Star Care UK Limited provides personal care to people living in their own homes in different boroughs around the London area. CQC only inspects where people receive personal care. At the time of our visit, they were providing personal care to 232 people.

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

People and relatives told us that the service was good and that they could speak with the registered manager as and when they wanted. People who used the service were protected from the risk of abuse as the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. Staff knew of potential risks to people and ensured they were safe when carrying out any task. There were sufficient numbers of staff to meet people's needs. The provider had a robust staff recruitment system in place. People were protected from the risks associated with the spread of infection. The provider had suitable arrangements for the management of medicines.

There was an open and inclusive culture in the service, with staff, people, relatives and other external professionals encouraged to help improve the service provided to people. The provider had an on-going quality monitoring process to identify areas of improvement required within the service. Where improvements had been identified there were actions plans in place. The provider worked with a number of health and social care professionals to ensure people's needs were met.

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

Rating at last inspection

At the last inspection the service was rated Good (report published 17 May 2019).

Why we inspected

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

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.	
Details are in our Safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good



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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 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 one 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

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 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.

What we did before inspection

We reviewed information we had received about the service since the last inspection. 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 also reviewed notifications that the registered provider had sent to us since the last inspection. A notification is information about important events which the service is required to send us by law. We used all this information to plan our inspection.

During our inspection:

We spoke with the registered manager and the deputy manager. We reviewed a range of records. This included 10 people's care records, three staff files, training records, staff supervision records and medicine administration records. We also looked at audits and a variety of records relating to the management of the service, including policies and procedures.

Following the inspection, we spoke with 8 people who used the service and 4 relatives to seek their views of the service. We also contacted 5 members of staff to ask them questions about their roles and to confirm information we had received about the service during our inspection.



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 Good. At this inspection this key question has remained the same. 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 abuse or harm and staff understood how to keep them safe.
- People told us they felt safe when staff visited them. One person said, "I trust them with my life it's lovely." One relative told us, "They're [family member] safe when carers are there."
- Staff had received safeguarding training and were aware on how to escalate any concerns that they might have to external agencies. This helped to ensure staff had the skills and knowledge to help maintain people's safety and protect them from the risk of abuse.
- Staff were able to describe the action they would take if they witnessed or suspected any abusive or neglectful practice. One member of staff told us, "If there is any wrong, if someone is being abused, I will inform the manager."
- The provider had a whistleblowing policy and this gave guidance to staff on how they could raise concerns about any unsafe practice.

Assessing risk, safety monitoring and management

- People had risk assessments which explained possible risks and the actions staff needed to take to reduce them.
- Potential risks to people had been assessed so they could be supported to stay safe by avoiding unnecessary hazards without being restricted. Where people were identified at risk appropriate measures were put in place, for example, when people were at risk of falls.
- We found risk assessment around people's medical conditions could contain more personalised information. This was discussed with the registered manager who agreed to review them. We noted information about people's medical conditions was available to staff so that they were aware of actions to take in a medical emergency. However, not all the information was included in people's risk assessments. Staff told us what actions they would take to minimise risks in these areas. Risk assessments were reviewed regularly and updated as required.

Staffing and recruitment

- There were enough staff employed by the service to meet people's needs. The provider had an effective recruitment and selection processes in place.
- The service provided enough staff to ensure people were given safe care. People and their relatives told us the same staff or group of staff supported them. One person told us, "It's the same weekly carer but Sundays are different." Another person said, "I have regular carers who come." A relative told us, "They [staff] phone if they're going to be late."
- From staff rotas we found people were allocated the same care staff so they were familiar to them. This

helped with consistency and continuity of care as staff were aware of the needs of people they were caring for.

- The provider used a new system to monitor if people had been visited when they were scheduled to. Staff had to log in and out on an application on their smart phones when they arrived and left a person's home. The system was monitored by a dedicated member of staff in the office and this helped to avoid any missed visits to people.
- People were protected by appropriate recruitment processes. The provider ensured appropriate checks had been carried out such as criminal records check before staff were employed and started work. This helped to ensure people were not exposed to staff who were not suitable to work with people using care services. \Box

Using medicines safely

- The provider had system to ensure people received their medicines on time and as prescribed.
- People were supported to take their medicines by staff who were trained to do so safely. Most people we spoke with administered their own medicines or their relatives helped them. One relative commented that staff helped their family member to take their medicines on time, otherwise they might forget.
- From records, we saw people received their medicines as prescribed and staff had signed them to indicate people had taken their medicines.

Preventing and controlling infection

- The provider had systems in place to prevent the spread of infection and ensure people as well as staff were safe.
- Staff had personal protective equipment (PPE) such as gloves and aprons available to them to protect the spread of infection. They also had received training in this subject and were aware of their responsibilities. One person told us, "They [staff] wear gloves and masks always."
- The provider had policies and procedures regarding the prevention and control of infection and they kept staff up to date with relevant national guidance.

Learning lessons when things go wrong

- Records showed that accidents and incidents were recorded and these were investigated by the registered manager to prevent or minimise them from happening again. This helped to ensure people remained as safe as possible and where necessary, measures were put in place to avoid any repeat events.
- There was an on-call system in place where a member of the management team was available for staff if they needed any advice. Procedures were in place for staff to follow in an emergency.



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 Good. At this inspection, this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People and relatives told us that the service was good and that they could speak with the registered manager or their deputy as and when they wanted. One person told us, "I wouldn't have had them [service] for 8 years if I was unhappy."
- The registered manager understood what their roles and responsibilities were. They kept CQC up to date with any changes that happened at the service and provided us with information promptly when we had requested them.
- We had received notifications from the provider about certain changes, events and incidents that affect their service or the people who use it, as required under our regulations.
- The management team operated an open and transparent culture and responded to any issues raised. They had a good relationship with staff, people, their representatives and other professionals.
- Staff were aware of who they were accountable to and understood their roles and responsibilities in ensuring people's needs were met.
- There was a range of policies and procedures in place that gave staff guidance about how to carry out their role safely.
- Staff told us the service was a good place to work for. One member of staff said, "The manager is always very supportive. I can talk to them or any staff in the office, they are very helpful."

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

- The management team and staff promoted the equality and diversity of people who used the service. They ensured people had equal opportunities, regardless of their abilities, their background or their lifestyle.
- The registered manager had regular contact with people and staff where they could discuss any issues. They also contacted the relatives to update them on the care needs of their family members.
- There were regular staff meetings where staff were able to share their views and any concerns they might have. Staff told us they were encouraged to share ideas during these meetings, and they felt listen to by the management team. They also mentioned those meetings were helpful to them as they were kept informed of people's needs and any changes happening with the service.

Continuous learning and improving care

• The provider had a range of monitoring and audit tools to assess and monitor the delivery of care and

support to people.

- We saw there were systems in place for people and their relatives to give feedback on the quality of the service being provided. These were gained through the use of satisfaction surveys. The provider analysed and acted on the feedbacks to improve the quality of the service provided. One person told us, "I receive regular surveys from Star Care." Another person said, "They [a member of the management team] phone up to see if the girls [carers] are working ok."
- The provider had systems to assess and monitor the delivery of care and support. These included audits of training, medicine management and health and safety. Where shortfalls had been identified, we found that actions had been taken to address the shortfalls.
- The management team carried out regular spot check when staff visited people to ensure people received the care and support as they had requested or wished. They also checked if staff arrived on time and wore the correct PPEs.

Working in partnership with others

- The management team worked closely with other health and social care professionals to ensure the people received the care and support they needed. One person told us, "They [a member of the management team] contacted the doctor on my behalf about having my COVID jab."
- The registered manager kept themselves up to date with best practice on health and social care. They recognised the importance of developing close ongoing professional relationship with individual professionals.