

Postflux Limited

# North Star Foundation

## Inspection report

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

North Star Foundation Limited is a domiciliary care service. It is registered to provide personal care to people with learning disabilities living in their own homes. There were 19 people using the service on the day of our inspection.

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 this service and what we found

People and their relatives provided accounts of how the management and staff team were skilled in providing compassionate and thoughtful support for people. There was a strong culture of valuing and celebrating people's diverse needs which made people feel they mattered. People expressed joy and pride when relaying how they had achieved certain goals which they may not have done without the caring and 'can do' attitudes of staff.

Lots of thought had gone into developing small staff teams to support each person. Staff knew people well and strong bonds had developed which helped people achieve positive outcomes. Respect for equality, diversity and inclusion was fully embedded within people's care and support.

Without exception the management and staff team worked in a way, which put the needs of people first. Support plans were written in an extremely sensitive and thoughtful way to reflect people's life history and likes and dislikes in detail. Each person's communication preferences were considered, and this was reflected in people's knowing their plans and diaries which they truly owned. From the provider to their staff team there was a real sense of going over and above to promote people's social inclusion.

There was strong leadership with the provider and their management team holding exceptionally strong values of inclusion and equality for people with learning disabilities. Staff were highly motivated and proud to work for the provider. People felt in control of their own care, listened to and their opinions valued. Family members spoke very highly of the management team. The provider ensured people were equal partners in their care and supported them to experience and achieve positive outcomes. The registered manager's oversight and governance assisted in ensuring high quality care was provided and people received safe care and treatment.

People were supported by enough staff to safely meet their needs. Staff were aware of the risks to people and supported them in a way which minimised those risks. Staff understood how to keep people safe from the risk of abuse and avoidable harm. They were confident to report any concerns they may have about people's safety. People's medicines were managed safely where assistance was required, and good infection control practices were used by staff.

People were assisted by well trained staff who promoted people's health and made sure they had access to health and social care services. Staff worked with a range of health professionals to ensure they knew and could support people's care needs. People were assisted to maintain good nutrition. 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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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

The last rating for this service was Good (published 31 August 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our reinspection 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?

The service was safe.

Details are in our safe 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 exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

### Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

### Is the service well-led?

The service was exceptionally well-led.

Details are in our Well-Led findings below.

Outstanding ☆

# North Star Foundation

## 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 Care Act 2014.

#### Inspection team

One inspector carried out this inspection.

#### Service and service type

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

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

#### 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.

Inspection activity started on 12 March 2020 and ended on 02 April 2020. We visited the office location on 12 March 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 asked the local authority and Healthwatch for any information they had which would aid our inspection. Local authorities together with other agencies may have responsibility for funding people who used the

service and monitoring its quality. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

#### During the inspection

We met and spoke with four people who used the service, some in more detail than others, about their experience of the care provided. We spoke with the management team including the nominated individual and provider. The nominated individual is responsible for supervising the management of the service on behalf of the provider. In addition, we met and talked with six staff members who provided care and support to people.

We looked at a range of records. This included three people's care records and medication records. In addition, we viewed a variety of records relating to the management of the service, including information the registered manager had left for the inspector, four staff recruitment files and quality checks such as, incident monitoring and analysing records.

#### After the inspection

We continued to seek clarification from the registered manager and provider to validate evidence found. We looked at the compliments received about people's support and the written accounts from four staff members about the support they provided. We spoke with three relatives about their experiences of the support provided. Three community professionals sent written feedback.

# 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.

### Assessing risk, safety monitoring and management

- People received safe support to meet their needs. They told us staff knew them well and they felt safe with the support they provided.
- Relatives were also confident their family members needs were met safely due to staff knowing people well and their skilful support.
- Staff were trained and had a good understanding of how to support people to promote their independence whilst minimising risks. For example, a person told us how over time, their independence had increased when using public transport independently.
- People's needs were thoroughly assessed, and detailed plans were in place to guide staff on how to safely support each person.

### Systems and processes to safeguard people from the risk of abuse

- People were encouraged to speak up and talk freely about staying safe. Since the last inspection the management team had further developed easy read information to make sure people understood how to stay safe in a variety of situations in life.
- Staff had been trained and understood their responsibility to identify and report any safeguarding concerns.
- There had not been any safeguarding concerns raised. The provider had a policy and procedure setting out their approach to safeguarding and the management team understood what to do if any incidents occurred.

### Staffing and recruitment

- People and relatives highly valued how recruitment and staffing arrangements effectively supported people's needs.
- Staff worked in small teams and supported the same people on a consistent basis. Staff felt this worked effectively when supporting people, some of whom liked routines including familiar staff. This was a key factor in people and relatives rating their care service so highly. One relative told us, "They [staff team] have all bonded with [family member] who regularly supports them. [Family member] loves them all. It gives me peace of mind knowing [family member] is safe and happy with staff who care."
- People continued to be supported by staff who had been safely recruited. The provider and the registered manager made sure staff were suitable to work with people before they started in their supporting roles. For example, a variety of checks were completed including gaining references from former employers and police checks.

### Using medicines safely

- Where people required assistance with their medicines this was managed safely. People had medicine plans which detailed what medicines they were prescribed together with their preferences for the support they wanted.
- Staff had been trained and were assessed as competent to make sure they did this safely and in line with good practice guidance.
- Some medicines are prescribed to be taken only when needed. Staff had information to guide them on when and how much of these medicines to administer so people's safety was promoted.

### Preventing and controlling infection

- People were supported by staff to gain an understanding about the importance of effective food and hand hygiene.
- Staff had been provided with the appropriate training and equipment to support best practice in infection prevention and control.
- Staff told us they used personal protective equipment, such as gloves and aprons, to reduce the risk of spreading germs or healthcare related infections.

### Learning lessons when things go wrong

- The provider and registered manager had systems in place to review trends and identify actions to mitigate any future risks.
- Staff had opportunities to reflect on people's safety needs and risks at regular meetings. Staff were encouraged to let team leaders and the management team know if people's safety needs changed.



# 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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People continued to be provided with effective care which met their needs. People's needs were thoroughly assessed before they started using the service and detailed support plans had been put in place. This guided staff on what support was required and to effectively met people's individual needs and reflected their preferences.
- Staff worked closely with health and social care professionals to make sure the care and support they provided was effective and based on good practice guidance. One community professional said, "They [staff] have always been approachable and have followed suggestions and recommendations made."

Staff support: induction, training, skills and experience

- People were supported by experienced and skilful staff to meet their needs. One person said, "They [staff] are good." Another person told us, "I like my support."
- Relatives were complimentary about how staff utilised their knowledge and skills when supporting their family member's needs.
- New staff continued to complete an induction and a range of training and shadowed other more experienced staff to learn how best to support people. Staffs induction included the Care Certificate. This is a set of standards that health and social care workers can work in accordance with. It is the minimum standards that can be covered as part of the induction training of new care workers.
- Staff felt their training was centred around the needs of people they supported. Team leaders also supported staff by sharing their knowledge and good practice ideas.
- Regular supervisions [individual meetings with management and senior staff] were used to monitor staff's performance and focus on their wellbeing. One staff member said, "Supervisions are excellent, they are useful and supportive if any problems I can air these." Another staff member told us, "[The registered manager] is always there if I need support. Really nice company to work for."

Supporting people to eat and drink enough to maintain a balanced diet

- People's support plans detailed the care they required with eating and drinking. The support plans also reflected whether people had any cultural or specific dietary needs.
- People described how they were encouraged to choose what they ate and drank and be involved in shopping and preparing food where possible.
- Staff understood the links between nutritional health and well-being. For example, if people needed specific support with their diet because of underlying health conditions, such as diabetes.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live

healthier lives, access healthcare services and support

- People were supported to live healthily and receive medical attention when needed. Health and social care professionals provided positive feedback in relation to this. One community professional commented, "They [management and staff team] have always been approachable and have followed suggestions and recommendations made. The team have a good knowledge base and many are very experienced, especially in dealing with the needs of people with autism spectrum disorders."
- Relatives spoken with valued the management and staff approaches in working in partnership with them when their family members had healthcare appointments.
- People were supported in a variety of ways which met their individual needs to promote good healthcare including oral care. Staff understood the importance of oral hygiene and health.
- People had health action plans and hospital passports which were utilised as another form of communicating people's needs such as, health, interests, likes and dislikes and; preferred communication styles.

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 Act 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- When required, staff supported people with their decisions. Care documentation set out the support people needed with decision making.
- When people lacked mental capacity to make specific decisions, procedures were in place. This was to ensure these were made in the persons best interests and involved professionals and people important to the person.
- Staff worked in a way which respected people's wishes. People were supported to take positive risks which supported them to regain independence.

# 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.

At the last inspection this key question was rated as Outstanding. At this inspection this key question has remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- People and relatives continued to describe how exceptionally caring and supportive staff were. They told us their experiences of receiving care and support from staff had not dwindled since the last inspection. Staff continued to have an immensely positive effect on their wellbeing and happiness.
- People spoke about the way they were cared for and supported. One person described how staff had supported them in achieving a significant milestone of going to a day activity on their own. The person was supported by staff many times to practice the route they needed to walk being mindful of going at the person's own pace. Gradually staff with the inclusion of the person developed strategies to assist the person to become more confident. This included staff becoming further away from the person when they walked the route but near enough so staff could offer reassurance as needed. Every detail was focused on with the person including the possibility of road works and making sure the person was able to use their mobile telephone and this was charged. The person also had 'check in' call on arrival at their destination. The person glowed with joy when they told us about their achievement and said, "They [staff] are very kind." The person was only able to reach their goal because of the management and staff teams committed and shared enthusiasm to ensure people had full and respected lives. This was a massive achievement for the person and staff team.
- The management team recognised people needed to be supported by staff who they could build positive relationships with and whom they could trust. People gave us many examples of how they had been included in recruiting staff and had positive, caring relationships with consistent staff they knew well. One person described how he met potential staff and was enabled to ask them questions to see if they liked them and they would be good at supporting them. One relative told us their family member's support was enhanced because of the consistency in staff and their diverse life experiences.
- The provider received many compliments about the support they provided from people, relatives and professionals. These included; praising staff for their support when gaining benefits, providing care for the whole family and assisting people to gain independence. One relative said they were, "Over the moon with everything North Star Foundation are doing to support [their family member]." This included the support provided to apply for benefits with a positive outcome.
- Relatives expressed their deep appreciation for the care and support their family members received. One relative described how their family member had achieved a dream they had to continue their personal quest in gaining further qualifications. This was because of the registered manager's support and sheer determination. The registered manager led by example in their quest of people with learning disabilities being empowered to live the lives they chose. The registered manager said they, "Believed everyone has an equal right to fulfil their dreams."

- Another relative praised the staff for their exceptional caring ways. They said, "We know that you all [staff] have hearts of gold to be able to do the job you do as well as you do. [Family member] is starting to feel more secure in your company and as much as it breaks my heart this is very reassuring to me because I know you [staff] are all being good to [family member] and loving them like we do."
- Staff were extremely motivated to provide people with outstanding care which was driven by their compassion and 'can do' value-based attitudes. This was reflected in the moving spoken and written accounts staff provided in relation to the progression and achievements people had made in their lives. One staff member told us, "It really is a pleasure to be part of making this [person's] life so much better and I hope to keep achieving more with [the person] in the future!"

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

- People chose to come into the office to meet with the inspector which was achieved because of staff's commitment to the value of inclusion and respecting people's wishes. There were many examples of people directing their own care, no matter what their abilities were and valued staff assisting them to do this.
- The management team and staff were creative in supporting people to communicate their needs and wishes. Each person was empowered to contribute to making decisions and to give their views about how they wanted their care. For example, people who met with us at the office each relayed their own individual goals which they wanted to achieve. One person told us, staff had already supported them to achieve some of their goals which they were delighted about.
- The management and staff team knew people well which made a difference to people's wellbeing. They told us they continued to initiate new ways of supporting people to feel involved in their care and make decisions. For example, staff utilised picture books and electronic applications to support people in having their say and be part of their own support.
- People's rights were respected and protected with established links with advocacy services and support for people to use these.
- The management and staff team were also strong personal advocates for people. They all worked as a team to provide effective support. This helped to make sure people had any equipment they needed or were assessed by healthcare professionals when necessary.

Respecting and promoting people's privacy, dignity and independence

- People's dignity and independence was respected and supported. There was a culture and sense of celebrating what people could do, rather than focusing on what they could not do. Staff encouraged people to develop their skills where they could. For example, one person described how staff were there if they needed them when having a shower but only assisted if the person experienced any difficulties. This meant a lot to the person.
- Staff gave us examples which reflected how they respected people's privacy whilst continuing to involve them in their support. One staff member confirmed, "I do this by making sure to involve [each person], asking them first if it is okay for us to help, closing doors and being discreet when out in public."
- People were free to express their views, with support when needed, from an inclusive and accepting staff and management team. Staff were polite and respectful and ensured people's human rights were upheld. There was a strong ethos of inclusiveness whilst supporting people with celebrations of cultures, religions, LGBT+ lives and people's histories. People trusted and felt comfortable with staff to talk about these important aspects of their lives.
- People's confidentiality was respected. Their personal, confidential information was protected and kept secure in line with current data protection.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has now improved to Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were provided with exceptionally personalised support in a way which met people's individual needs. Without exception people who met and spoke with us, were enthusiastic about showing us their written accounts of their individual aspirations which staff were enabling them to achieve. It was evident people 'owned' their individual support plans and diaries.
- Without exception relatives felt staff had an excellent understanding of their family member's needs. One relative said, "The support is so good. I am very very impressed."
- The provider and management team understood people's differing needs and provided care and support in a way which met these and promoted equality. Support planning was highly individualised to each person which meant people's support plans were unique to each person. For example, people's individual communication preferences had been considered when developing their support plans, so they held meaning.
- Staff were passionate about supporting people with personalised care responsive not only to their specific needs and preferences but considered people's unique beliefs and life histories. The attention given to people's individual needs and wishes showed how exceptional staff were at going above and beyond what was expected of them. For example, with careful planning, reviewing and the 'step by step' attitude of a staff member a person was now able to access and experience different community venues in a dignified manner which in turn has enhanced the person's quality of life. The result being the person now enjoys new life experiences including sitting independently in chairs to eat meals when out. A staff member commented on this by stating, "This to me was giving [the person] that independence and giving [the person] dignity to eat out just the way that we all do." This has been an outstanding triumph for the person whose physical abilities have increased due to the personalised support provided and the staff team.
- Another person was supported by staff to access an organisation which provided them with an outlet for their feelings and a way of keeping someone close to their heart. All examples reflected how staff's responsiveness had made positive impacts on people's lives.
- The provider went above their role as a domiciliary care provider and worked closely with other organisations to identify and support people with learning disabilities through transitions in their lives. For example, assisting people to gain their own accommodation and continuation of support thereafter to support changes and adaptations in people's lives. People described how this had inspired them to plan additional goals. For example, to successfully gain additional independent living skills all because of the management and staff teams ongoing support.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The management and staff team were creative in supporting people to not only communicate their wants and wishes but to realise their aspirations. Staff had accessed a variety of resources to support people. For example, a person's picture book was utilised to support the person in realising their goal.
- Staff were skilful in how they supported another person to achieve their educational goals by realising the person's individual communication needs could be enhanced by the use of an electronic application.
- People benefitted from the proactive approach of staff liaising with speech and language therapists. This supported people in gaining advice and guidance in relation to their communication needs.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to maintain important relationships. Relatives spoke about how they greatly valued being part of their family member's lives. They considered themselves as partners in their family members care which staff successfully supported.
- One relative described, how staff made sure their family member was reassured about their relation during the current location in the world. Staff made this happen by using an electronic application where the person was able to see their family member and 'wave' which they enjoyed doing.
- People described to us how with staff members support they were able to follow their interests which they valued. One person told us how they were supported by staff to continue to follow their religion. We heard examples of how staff went out of their way to make sure the person was able to do this. This included staff listening to the person reading the bible as the person was trying to develop their reading skills. One staff member told us, "Faith and the opportunity to worship are very important to [the person]. All of [the person's staff] team, regardless of belief, ensure that [the person] is able to do this."
- The provider, management team and staff held the value nothing was too much trouble when supporting people with opportunities to live as full a life as possible. One person had been supported whilst completing a course and taking part in a play which had a massive impact on their confidence. One staff member told us, "[The person] loved every minute of [the course] you could see how the course empowered them right from the first day."
- People, relatives, staff and the management team gave us many examples where people's lives were being enhanced through social inclusion based on the value of empowerment. One person was an author of a book and staff accompanied them to the House of Lords. The relative told us, "Staff had the biggest smiles."

Improving care quality in response to complaints or concerns

- The provider and registered manager had created a culture of learning within the service. People were encouraged to provide their feedback in a number of different ways including verbally and by interpreting people's body language. People and relatives knew how to complain and felt able to do so. One relative told us, "I can't fault them on anything. If I did have a complaint, I feel confident they would put it right. I give them 100% and highly recommend."
- For some people they would need relatives and or staff support to do this. Staff we spoke with told us, they would have no qualms in supporting people to raise any complaints and or concerns they had.

End of life care and support

- No one was receiving end of life care at the time of our inspection. However, staff and the management team would have open discussions with people and relatives if they did support people who was at the end

of their life. All staff and the management team were aware of the importance of people being involved in their support planning and end of life care would be no exception to this.

- One person was supported to better cope with the death of their family member. This was because of staff members sensitivity and empathy and successful liaison with a community professional. The person was supported to choose their own clothing for their relative's funeral and purchased some flower seeds to put on their grave. This was exceptional considering the person's needs and was only made possible due to the sheer dedication of staff who went over and above to support the person's whole needs.



# 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 now improved to Outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider's vision was to empower people, enable their inclusion, and advocate strongly for people's rights and aspirations. This vision was embedded in the culture and formed a golden thread throughout the support and care people received.
- The management and staff team had a strong desire to provide the best possible support, so people were empowered to live as rich and rewarding a life as possible. Throughout our inspection, people and relatives gave many examples to reflect the "exceptional" service they received. One person said, "I love my support, they're [staff] all great to me." One relative said, "Its' a good organisation with a heart. Provision provided is outstanding."
- Staff had a passion, commitment and enthusiasm to provide exceptional outcomes for people. Staff spoke with confidence about providing the best care possible, being honest and promoting the provider's vision. One staff member said, "We are all very person centred, treating clients [people who used the service] very individually. [Person] can now hold a spoon and use it. Really proud of what we have done. [Person] has developed another skill."
- The registered manager was totally committed to providing high quality care to achieve the best possible outcomes for people. The management team provided exceptional leadership and had developed a dedicated staff team who were committed to the vision and values of the service. We reported on outstanding results achieved by the team as a result of excellent leadership in the caring and responsive sections of this report.

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

- The provider, registered manager and nominated individual were excellent role models in the provision of high care standards. There was a positive leadership style which focussed upon dignity, independence and empowerment for both people they supported and staff.
- The registered manager was respected, trusted and empowered to make decisions and implement change to improve the service. The management team recognised their roles and responsibilities and worked cohesively. The provider was receptive to new ideas and sought the registered manager's views and those of the wider team. This included exploring the idea of developing their own training programme or running sessions in-house with external trainers to ensure staff training was consistently of a high quality and based on the individual needs of people who used the service.
- Staff told us the registered manager, nominated individual and provider were 'hands on,' visibly available



for support and led their staff team by example. One staff member told us, "[The registered manager] is extremely passionate about her work. She cares deeply about providing the best service for everyone."

- People, relatives and community professionals confirmed they had received support from all the management team at varying times. One person showed happiness at the thought of the nominated individual providing support as they enjoyed their company. One relative also told us, "They all [staff and management] go above and beyond to make sure [family member is safe and happy. [Nominated individual's] life revolves around people with learning disabilities, they absolutely put themselves out for [family member]."
- Staff understood their roles and responsibilities. Without exception staff told us, they enjoyed their work with people and reflected how they kept people at the heart of their care. We heard many examples where people were supported to reach for their goals. One staff member described how a person with complex needs went on a zip wire and said, "Everyone was so amazed."
- The management team were aware of their regulatory responsibilities to report certain incidents and events to the Care Quality Commission.

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

- People were empowered and enabled to take control of shaping the service they received. People who came to meet with us at the office described how they were fully involved in their care and support. The registered manager had ensured people's individual communication preferences were upheld to empower and enabled people to make their views known. This reflected a commitment to working in partnership with people, and ensuring their views were valued. These approaches reflected the values and principles of Registering the Right Support and was a 'golden thread' through all people's care and support.
- The provider and management team showed they valued the rights of staff as well as people they supported. The provider and nominated individual confirmed the staff rotas had been improved upon as they recognised the importance of a balanced work and home life. Staff spoke about how they appreciated the changes made to the staff rotas.
- Staff consistently told us their views were sought and valued by the management team. One staff member described how the registered manager had supported them at a difficult time in their life. Another staff member said, "I really enjoy it here. We all help clients [people who used the service] develop their goals. Really nice company to work for."

Continuous learning and improving 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

- The management at all levels and team leaders completed a range of quality checks to ensure they provided an efficient service. These for example included, medication, care records and spot checks. When concerns were identified, staff were consulted with and action taken. This supported continual improvements to evolve and provide a good service for people.
- The registered manager had continued to bring improvements to life since our last inspection. For example, champion roles within each staff team have been developed to further enhance staff's expertise and the quality of the service provided.
- Another example we heard reflected how the quality assurance officer had supported the reporting of risk management and decision making. The registered manager and wider management team told us these approaches had been useful. This was in monitoring people's needs and obtaining additional support when talking with commissioners and social workers.
- The management team had ongoing plans which included developing a 'drop in' service to provide people with opportunities, such as healthy cooking, personal care and literacy. These areas of evolving improvements showed a commitment from the provider and management team to put people's individual

needs at the heart of how their support service was led.

- The registered manager investigated incidents fully and was open and honest with exploring any lessons to be learned. Where required/identified changes to practice were implemented to improve people's experiences of their care and support.
- The registered manager was passionate about working openly and honestly with relatives. They commented, "Transparency and openness extends to family working - we have always tried to nurture a co-caring approach with families for the benefit of the person using the service." Relatives we spoke with valued this approach and felt partnership working between themselves management and staff had been successful.

Working in partnership with others

- The management and staff team worked in partnership with other organisations to make sure they followed current practice, providing a quality service and people they supported were safe.
- The registered manager had liaised with health and social care professionals to ensure timely referrals were made and where necessary additional support had been sought. This ensured a multi-disciplinary approach had been taken to support care provision for people.
- Health and social care professionals provided their comments which confirmed the management team ensured people were at the centre of the care. One community professional told us they would be happy for a relative of theirs to receive a service. Another community professional commented, "My view is that North Star are an excellent provider, with lots of knowledge and experience in the specialist field of supporting people with learning disabilities."