

Starz Care Ltd

Prosper

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?	Requires Improvement ●

Summary of findings

Overall summary

About the service

Prosper is a domiciliary care agency and provides personal care to people living in their own houses and flats in the community. At the time of inspection four people were receiving support with personal care.

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

Systems were in place to monitor the quality and safety of the service however these were not always effective. Audits had not identified the concerns we found during our inspection and required improvement.

We have made a recommendation about quality monitoring and oversight of the service.

People received their prescribed medicines by trained staff however medication administration records were not always fully completed in line with current best practice.

We have made a recommendation about the management of medicines.

Risks to people had been assessed with guidance for staff to follow. However, improvements were required in terms of risk recording to make sure people's care records were up to date and reflective of their current needs.

We have made a recommendation the provider reviews their risk assessment and care planning processes to ensure a safe and consistent approach to risk management.

People felt safe using the service and appreciated they were supported by a consistent staff team. Staff had been safely recruited and were trained and supported to provide the best possible care which met people's individual care and support needs. We were assured staff were following good infection control practices. Systems were in place to safeguard people from the risk of abuse. Staff had received safeguarding training and were aware of their responsibilities to report concerns.

People and their relatives were complimentary about the kind, caring attitude of staff and were satisfied with the care and support they received. Staff treated people with dignity and respect and people's independence was promoted. Without exception people and relatives told us they would recommend the service to others.

People were consulted over their care and support needs and 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.

There was an effective complaints system in place. People told us where they had raised concerns these had been addressed in a timely way and, where necessary, apologies had been given.

The registered manager was committed to providing high quality care and was proactive at seeking the opinion of people and their relatives to drive improvements and ensure people were happy with the care they received. Staff felt valued and told us they were supported and listened to by the registered manager.

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

Rating at last inspection

This service was registered with us on 14 August 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the length of time the service was registered and when they commenced providing a regulated activity.

Follow up

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?

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 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 not always well-led.

Details are in our well-Led findings below.

Requires Improvement ●

Prosper

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

This 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 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

This inspection was announced. Due to the pandemic, we gave a short period notice of the inspection to enable us to collate as much information as possible virtually to minimise the time spent by the inspection team visiting the provider's office.

Inspection activity started on 19 February 2021 and ended on 4 March 2021. We visited the office location on 4 March 2021.

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.

During the inspection

We spoke with two people who used the service and three relatives by telephone about their experience of the care provided. We spoke with three members of care staff and the registered manager.

We reviewed a range of records. This included two people's care records and medication records. We looked at two staff files in relation to recruitment, training and supervision and the systems in place for quality monitoring.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Although staff knew people well, changes in people's care and support needs were not always updated in their care plans.
- Risks to people's home environment, health and wellbeing were considered, assessed and regularly reviewed. However, we found people's care records did not always clearly record all associated risks.
- The risk of harm to people due to poor recording practices was minimised because people were supported by a consistent team of staff who knew them well. We found no evidence of any negative impact on people.
- We discussed our findings with the registered manager who assured us this would be immediately addressed.

We recommend the provider review their risk assessment and care planning processes to ensure a safe and consistent approach to risk management.

- Staff were aware of how to report any changes about people's care and support needs.
- People and their relatives told us they felt safe when receiving care. One person said, "I feel safe when [staff] are here. I was very nervous to start with but they have been nothing but really friendly and they put me at ease all the time."

Using medicines safely

- Where required, people received their prescribed medicines by trained staff. However, people's medication administration record (MAR) had not always been fully completed in line with current best practice. For example, the specific dosage of people's medicine had not always been recorded on the MAR.
- The registered manager carried out regular audits of the medicine systems to ensure medicines were being managed safely. However, these had failed to identify the areas of concern found at inspection. We found no evidence of any negative impact on people due to the lack of poor recording. We discussed our concerns with the registered manager who assured us they would take immediate action.

We recommend the provider consider current guidance and take action to update their practice accordingly.

- Staff's ongoing competency was assessed to ensure they were continuing to administer medicines safely.

Staffing and recruitment

- Safe recruitment processes were in place to ensure people were protected against the employment of unsuitable staff. This included checks with the Disclosure and Barring Service (DBS). The DBS allows employers to check the criminal history of anyone applying for jobs in a care setting.
- We identified concerns with two members of staff's working permits. We have reported this to the Visa & Immigration service for further investigation.
- There were enough staff to ensure people were safe.
- People were supported by a consistent team of staff which ensured continuity of care.
- People and relatives told us they had not experienced any missed calls. Feedback included, "I have the same people come in. I have had no late or missed calls they are always on time. They are very good at accommodating me when I have doctor and hospital appointments." and, "Never had a missed call. Sometimes they are late due to unforeseen circumstances. Some things you cannot help but they are very prompt usually."

Systems and processes to safeguard people from the risk of abuse

- Systems and policies were in place to support staff with reporting any concerns about the people they were supporting.
- Staff had been trained in safeguarding and were aware of their responsibility to report any concerns.
- The registered manager was aware of their responsibilities for reporting concerns to the local authority and to CQC.

Preventing and controlling infection

- People were protected from the prevention and control of infection.
- Staff had access to personal protective equipment (PPE). Everyone we spoke with confirmed staff always wore appropriate PPE.
- The registered provider's infection prevention and control policy was up to date,
- The service was engaging with COVID-19 staff testing arrangements,

Learning lessons when things go wrong

- The registered manager informed us there had been no significant incidents since the service had become operational. They told us they would carry out an analysis of all accidents and incidents to consider lessons learned and would share these outcomes with staff to reduce the risk of reoccurrence.

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.

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

- People's care and support needs were assessed prior to them using the service to make sure they could be met.
- People's needs continued to be assessed and reviewed to ensure the care they received met their choices and needs, helped achieve good outcomes, and supported people to have a good quality life.
- People's relatives were positive about the care provided to their family members.

Staff support: induction, training, skills and experience

- Staff received an induction when they started work at the service.
- Staff completed the provider's mandatory training to fulfil their role and responsibilities. The registered manager told us should additional specialist training be required to meet individuals' needs they would ensure staff completed this.
- The registered manager carried out regular unannounced spot checks and supervision with staff.
- Staff told us they were well supported by the registered manager and could contact them at any time for guidance and support.
- People and relatives told us staff were skilled and knowledgeable. One relative said, "[Staff] are excellently trained. Sometimes we have another carer who is shadowing and learning how things are done. We have never had anybody who is not competent."

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

- Where required, people were supported with eating and drinking.
- Staff had been trained in food hygiene and nutrition and hydration.
- No one currently using the service was at risk of malnutrition or had any specific dietary requirements.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked with other healthcare professionals to help achieve good outcomes for people.
- The registered manager ensured care call visits were flexible to enable people to attend healthcare appointments.

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.

- People's consent to care and ability to make decisions was recorded within their care plans.
- People's right to make their own decisions was respected.
- Signed consent was obtained from people or their representatives.
- Staff understood the need to provide people choices and obtained their consent before providing support.
- The registered manager demonstrated a good understanding of the principles of the MCA.

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 were well treated and supported.
- People and their relatives spoke positively about the care and support provided to them by staff. One person said, "I think they are very good indeed. I couldn't choose better people. I cannot speak highly enough of them." A relative said, "The care is excellent. In the past [name] had other care agencies who were nowhere near as good. I would give them 12 out of 10." Another said, "They are very friendly. [Name] doesn't see many people and they look forward to seeing them. They do the extra things which makes [name] happy."
- Care plans recorded people's individual spiritual, cultural and sexuality needs.

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

- People told us they were involved in decisions about how they were supported.
- People's views were gathered regularly to ensure they were happy with the care provided. One person said, "I have a care plan. [Registered manager] comes around every so often and chats with me to check everything is ok and whether I have any problems or concerns or anything which needs changing."
- People had copies of their care plans in their homes. These could be accessed by them at any time.

Respecting and promoting people's privacy, dignity and independence

- People and relatives' feedback told us people's privacy and dignity was always respected.
- Staff were committed to achieving good outcomes for people. One relative said, "We are very happy. There's an improvement in [name's] wellbeing. For example one of the carers plaits their hair. When they look in the mirror they are over the moon. The grandchildren come around and say 'your hair looks lovely' and [name's] eyes light up. They don't have to do these extra little things but it makes such a difference."
- Importance was placed by staff to encourage people to maintain their independence and do as much as they could for themselves. One member of staff said, "We speak to our clients and whatever we are doing we will involve them. It is important to encourage them to do things. Sometimes they don't feel up to it and other days they are. It is important to listen."

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 and their relatives were complimentary about the care and support provided to them by staff.
- People benefitted from having regular care staff to promote continuity of care.
- People and relatives were involved in care planning. The registered manager checked regularly to ensure care delivery was reflective of people's care and support needs.
- People had copies of their care plans in their homes. These could be accessed by them at any time.

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.

- People's care plans contained information on how best to communicate with people.
- The registered manager told us they would ensure people had access to the information they needed in a format they could understand.

Improving care quality in response to complaints or concerns

- Systems were in place to record and manage complaints.
- Records showed complaints had been responded to appropriately and in a timely way. Where necessary apologies had been given.
- A copy of the provider's complaints policy was held within people's care folders in their home. One person told us, "There is a client guide with phone numbers and what to do if there is a problem."
- People and relatives knew who to speak with if they had a complaint and felt confident their concerns would be listened to and acted upon.

End of life care and support

- At the time of our inspection no one was receiving end of life care.
- The registered manager told us they would work closely with other health care professionals to ensure people had a 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 requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Although the provider completed a number of audits to monitor the safety and quality of the service, these were not always robust enough and had not identified the concerns we found during our inspection. For example, when people's medicine administration record (MAR) had been audited, these checks had not always identified gaps or the omission of information in relation to the specific dosage required which could lead to staff making mistakes with medicines.

We recommend the provider reviews current best practice to ensure robust and effective quality and safety monitoring processes are in place.

- The registered manager was aware of their responsibilities in relation to the duty of candour and to submit relevant notifications to CQC and other authorities of important events which happen in the service.

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

- People and relatives described the registered manager as approachable and were complimentary of how the service was run. Without exception, people told us they would recommend the service to others.

- The registered manager kept a record of compliments they had received from people, and their relatives. Comments included, 'Your team are so motivating and have empathy' and, 'Your carers really are one in a million, kind, respectful and encouraging.'

- Staff felt well supported and valued. They told us they worked well together as a team and staff morale was high. The shared the registered manager's vision to provide person centred care. A member of staff told us, "We can count on each other. Morale is very positive. I have worked in quite a few places but this is one of the places where my opinions matter."

- The registered manager told us, "I think to be compassionate in what you are doing is the whole foundation for me. I started at the bottom and worked up to the top. I have learnt so much. It is important I have a relationship with my staff as it makes a difference."

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

- The registered manager encouraged feedback from people and their relatives. This included feedback

forms, carrying out regular reviews and visiting people in their homes to ask them about their experience. We saw samples of feedback form responses and these were positive.

- Staff spoke positively about working for the service. They told us they felt supported and listened to and were able to raise any concerns and contribute to how the service was run through supervision, team meetings and feedback forms.

Continuous learning and improving care; Working in partnership with others

- The registered manager was committed to continuous learning and improving care for people. They welcomed feedback and were open and transparent during our inspection of the service.

- Staff worked in partnership with other professionals to meet the needs of people. For example, the district nursing and hospital discharge teams.