

# Inspection Report on

**Five Star Home Care Limited** 

27 Richards Terrace Cardiff CF24 1RU

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

**Date Inspection Completed** 

03/11/2022



## **About Five Star Home Care Limited**

Type of care provided	Domiciliary Support Service
Registered Provider	Five Star Home Care Limited
Language of the service	Both
Previous Care Inspectorate Wales inspection	11 February 2020
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

## **Summary**

People are happy with the care they receive and speak highly of the care staff but add that care staff often arrive late. Continuity of care staff is very good, but travel time needs to be incorporated into staff rotas. Personal plans of care are in place, but the provider needs to ensure there is a process in place for reviewing the plans and ensuring they are kept up to date. The Responsible Individual (RI) is actively involved in the day to day running of the service and has good oversight. Quality assurance takes place regularly but reports need to include additional aggregated data. Care staff are happy working at Five Star Home Care Limited and tell us that they feel valued and supported. Care staff are recruited safely with pre-employments checks completed, but improvements are required to ensure Disclosure and Barring Service (DBS) certificates are kept within date. All staff training and supervisions are up to date. The service has policies and procedures in place for the running of the service and complaints are taken seriously. Safeguarding referrals are made when required but need to be stored centrally for monitoring. Improvements are needed to ensure notifications are made to Care Inspectorate Wales (CIW) when required.

## Well-being

People can be assured their voice is heard. People are included in care planning processes and choose what care they require and when the care is delivered; but improvements are required to ensure care is delivered at agreed times. Care documentation outlines people's abilities and how they prefer their care to be delivered. People are happy with the care they receive and speak positively about the staff who provide their care. The RI engages well with people who use the service and their views are sought as part of quality assurance processes. People are given written guidance about the service and information on how to complain if they are unhappy. Complaints to the service are responded to correctly.

People can be assured their care needs are understood but improvements are required to care documentation. Care staff understand the needs of the people they care for and have built good working relationships with people. Staff rotas indicate good continuity of staff which enables people to have their care delivered in their preferred way. Care staff receive training and feel well equipped to undertake their roles. The majority of staff are registered with Social Care Wales. Staff receive formal supervision and feel supported and valued. Personal plans of care require improvements to ensure they are always current and accurately outline the tasks that staff should complete. All plans should be reviewed every three months or sooner if required. The provider engages well with external professionals and has received positive feedback in regard to the care they provide.

People are protected from abuse and harm, but improvements to quality assurance monitoring, DBS renewals and notifications to CIW need to be made. Five Star Home Care Limited has a safeguarding policy in place and all staff receive training in the safeguarding of adults at risk of abuse. The manager liaises with the Local Authority safeguarding team and makes referrals when required, but referrals are not always stored centrally or monitored as part of quality assurance processes. Notifications are not being made to CIW in line with regulatory requirements. Staff recruitment is safe and robust with preemployment checks being completed, but DBS certificates should be renewed every three years before the existing certificate expires.

### **Care and Support**

People receive the right care, but improvements are required to delivery times and care documentation. People we spoke with said the care they receive is good and meets their needs, but people also told us that staff are often late. We examined a selection of staff rotas and found that no travel time is included for staff to travel to consecutive calls. We advised the provider that travel time must be included into the rotas and were given assurances that this would be added. We examined a selection of personal plans of care and found them generally satisfactory, but we found one plan required more detailed information and another plan did not contain specific information that staff required. We also found that there is no system in place for personal plans to be reviewed in line with regulatory requirements. Personal plans are important documents as they guide staff on how to care for people correctly. Without clear instructions staff are at risk of providing incorrect care. Whilst there has been no impact on people these are areas that need to be improved and we expect the provider to take action.

People are treated with dignity and respect. People receive an assessment of their needs prior to the service commencing and agree what tasks they would like assistance and at what time. People are provided with information about the service and details of how they can complain if they are not happy with the service. People we spoke with told us that they are happy with the service they receive and described the care staff as "marvellous, brilliant and lovely". People told us that staff are "kind, polite and very helpful", and always stay for the full duration of the allocated call. Personal plans of care include the views of the person being cared for and also highlights what tasks people can do independently as well as what tasks they require support with. There are risk assessments and accompanying information in place where required, but provider must ensure supporting documents are also reviewed and kept current. We saw evidence that referrals are made to health and social professionals when required and the provider has a good working relationship with external professionals.

### **Leadership and Management**

People benefit from the leadership and management in place. Five Star Home Care Limited benefits from an RI who works daily at the service and a manager who is registered with Social Care Wales, the workforce regulator. There are policies and procedures in place for the running of the service and complaints to the service are taken seriously. We saw a number of compliments recorded from people using the service and professionals who were happy with the service being delivered. Safeguarding referrals are made when required but improvements to the recording and storage of the referrals is required to ensure that they can be monitored for themes and trends of abuse. The provider ensures that quality assurance monitoring takes place as required, but we noted that improvements to the accompanying report are required to ensure they contain all required data as set out in the regulations. The provider must also ensure that CIW are notified of any incidents as set out within the regulations without delay. Whilst there has been no impact on people using the service these are areas for improvement and we expect the provider to take action.

People are supported by care staff who are trained and well supported. All staff receive an induction when they start working at the service and training appropriate to the roles they undertake. The majority of staff are registered with Social Care Wales, and the remaining staff are signed up and working toward registration. All staff have recently received a formal one to one supervision which is important as this is an opportunity to discuss practice issues or needs in a setting that is recorded. Staff we spoke with told us they are happy working at Five Star Home Care Limited and all said they feel well supported. One person said, "I love my job and the clients, I feel well looked after". We examined a selection of staff personnel files and found that they contain all required information. Pre-employment checks including references and DBS certificates are applied for before employment commences. However, we found there is a lack of system to renew DBS certificates which had resulted in some certificates being slightly out of date. We advised the provider that improvements are need to be made and were given assurances that the renewal applications have now been made and a system introduced to ensure renewals are applied for in a timely way.

Summary of Non-Compliance		
Status	What each means	
New	This non-compliance was identified at this inspection.	
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.	
Not Achieved	Compliance was tested at this inspection and was not achieved.	
Achieved	Compliance was tested at this inspection and was achieved.	

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement			
Regulation	Summary	Status	

15	Personal plans of care should contain detailed information on how to support the person.	New
16	There is no system in place to ensure that personal plans of care are reviewed every three months or sooner.	New
27	The provider needs to ensure that safeguarding referrals are recorded and stored centrally with outcomes.	New
35	The provider has not ensured that all Disclosure and Barring certificates are reviewed prior to the expiry date.	New
60	The provider has failed to notify us (CIW) of events set out in Schedule 3 part 1.	New
80	As part of the quality assurance monitoring, the provider has failed to include aggregated data in regard to complaints, notifications, incidents and safeguarding matters.	New

# **Date Published 13/12/2022**