

***We are the regulator:** Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

Satellite Consortium Limited

27b Clarendon Road, Hornsey, London, N8 0DD

Tel: 02088894541

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We inspected the following standards to check that action had been taken to meet them. This is what we found:

Supporting workers

✘ Action needed

Assessing and monitoring the quality of service provision

✘ Action needed

Details about this location

Registered Provider	Satellite Consortium Limited
Registered Manager	Mrs. Elizabeth Ramlal
Overview of the service	<p>Satellite Consortium is a domiciliary care agency that specialises in providing culturally specific care and support to people of ethnic minority backgrounds in the London Borough of Haringey.</p> <p>Satellite Consortium provides support for individuals living in their own homes. The service is provided to adults who need assistance due to age, ill health or disability.</p>
Type of service	Domiciliary care service
Regulated activity	Personal care

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Summary of this inspection

Why we carried out this inspection

We carried out this inspection to check whether Satellite Consortium Limited had taken action to meet the following essential standards:

- Supporting workers
- Assessing and monitoring the quality of service provision

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 7 March 2013 and 12 March 2013, checked how people were cared for at each stage of their treatment and care and talked with people who use the service. We talked with carers and / or family members and talked with staff.

What people told us and what we found

This inspection was undertaken to look at the progress Satellite Consortium Limited domiciliary care agency had made since we visited on 2 July 2012 and found that it was not meeting two standards. At a previous visit on 20 May 2011 the agency had also not been meeting these two standards. On this inspection, 8 and 12 March 2012, we found the agency was still not meeting these standards.

We spoke with four members of staff and three people or their relatives who were receiving care.

The people or their relatives told us that they felt the service was good and that the main carers they had were good. For example one person told us that they had a "quality service". However, two of the people we spoke with told us they had concerns that the staff providing care did not always turn up on time. One person also told us they felt that when staff were required to cover a shift because the normal carer was not unable to, they did not always have the necessary knowledge to do so.

Our inspection of 2 July 2012 found there was no evidence that all staff were receiving supervision. The provider also did not have a system in place to record the time elapsed since previous monitoring visits and ensure that monitoring visits were conducted to all people using the service. On our inspection of 8 and 12 March 2013 we found this was still the case. The provider did not have systems to ensure all staff were receiving supervision or that monitoring visits were taking place.

You can see our judgements on the front page of this report.

What we have told the provider to do

We have asked the provider to send us a report by 12 July 2013, setting out the action

they will take to meet the standards. We will check to make sure that this action is taken.

Where we have identified a breach of a regulation during inspection which is more serious, we will make sure action is taken. We will report on this when it is complete.

Where providers are not meeting essential standards, we have a range of enforcement powers we can use to protect the health, safety and welfare of people who use this service (and others, where appropriate). When we propose to take enforcement action, our decision is open to challenge by the provider through a variety of internal and external appeal processes. We will publish a further report on any action we take.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Supporting workers

✘ Action needed

Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Our judgement

The provider was not meeting this standard.

People were not cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was failing to meet regulation 23 (1) (a)

We have judged that this has a moderate impact on people who use the service, and have told the provider to take action. Please see the 'Action' section within this report.

Reasons for our judgement

Our inspection of 2 July 2012 found that there was no evidence that all staff were receiving supervision. The provider had not been to provide us with a list of when staff had received supervision or when they were next due to receive supervision. This meant the provider did not have suitable arrangements in place to ensure the staff were suitably supported to deliver care.

When we visited this time we looked at the personnel files for seven members of staff. Five of these files did not show any evidence that the person had received an individual supervision in the last year. There was evidence of individual supervisions being conducted following areas of concern being identified with staff competence. We looked at the log of the index of supervision for care workers this only recorded evidence that 12 members of staff had received individual supervisions out of a full workforce of 38.

There was evidence that group supervision had been undertaken by some staff. When we spoke to staff they told us the management were available to speak to if they had any concerns.

When we spoke with people or their relatives who were using the service, one person raised a concern that when staff were required to cover a shift because the normal carer was not unable to, they were not always supported to have the necessary knowledge to do so.

There was no evidence that all staff were receiving regular support and supervision. The provider did not have a clear list of when staff had received supervision and when they

were next due to receive supervision. This meant the provider did not yet able to demonstrate it had suitable arrangements in place to ensure the staff were suitably supported to deliver care.

Assessing and monitoring the quality of service provision

✘ Action needed

The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Our judgement

The provider was not meeting this standard.

The provider did not have an effective system to regularly assess and monitor the quality of service that people received.

There was limited evidence that Satellite Consortium Limited was carrying out regular, routine monitoring visits and spot check visits to people's homes.

The provider was failing to comply with regulation 10 - (1) (a) of the Health and Social Care Act 2008.

We have judged that this has a moderate impact on people who use the service. This is being followed up and we will report on any action when it is complete.

Reasons for our judgement

Our inspections of 20 May 2011 and 2 July 2012 found that Satellite Consortium Limited was not able to demonstrate that it was routinely assessing and managing risks to the safety of people who used services. This was because there was insufficient evidence that the provider had a system in place to ensure that all monitoring visits were conducted to the homes of people using the service to ensure staff were delivering safe and appropriate care.

During the inspection of 8 and 12 March 2013 we looked at the provider's records of announced monitoring visits and unannounced spot check visits to the homes of people who were using the service. This showed that since 01 May 2012, of the 42 people receiving care from the service, there was no evidence of an announced or unannounced monitoring visit being conducted by management to 11 people. We looked at the care files for all 11 of these people. Five of these showed evidence of visits that had been undertaken but not recorded. However, in six of the files there was no evidence of any visit having been conducted by management in the year previous to our inspection (12 March 2012). When we asked about this the manager told us they had contacted these people via phone. We did not see any evidence of this being recorded.

The provider did not have a system in place to record the time elapsed since previous monitoring visits and ensure that monitoring visits were conducted to all people using the service. This meant that the provider may not identify problems in a prompt manner. We had previously identified this as a concern in two inspections.

This section is primarily information for the provider

✘ Action we have told the provider to take

Compliance actions

The table below shows the essential standards of quality and safety that **were not being met**. The provider must send CQC a report that says what action they are going to take to meet these essential standards.

Regulated activity	Regulation
Personal care	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010 Supporting workers
	How the regulation was not being met: People were not cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard. The provider was failing to meet regulation 23 (1) (a)

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us by 12 July 2013.

CQC should be informed when compliance actions are complete.

We will check to make sure that action has been taken to meet the standards and will report on our judgements.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

Contact us

Phone: 03000 616161

Email: enquiries@ccq.org.uk

Write to us
at: Care Quality Commission
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Website: www.cqc.org.uk

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