

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

Lifestar Medical Limited

35 Penair View, Truro, TR1 1XR

Tel: 01872264842

Date of Publication: May 2013

We followed up on our inspection of 18 January 2013 to check that action had been taken to meet the following standard(s). We have not revisited Lifestar Medical Limited as part of this review because Lifestar Medical Limited were able to demonstrate that they were meeting the standards without the need for a visit. This is what we found:

| | |
|--|---------------------|
| Care and welfare of people who use services | ✓ Met this standard |
|--|---------------------|

| | |
|--|---------------------|
| Safeguarding people who use services from abuse | ✓ Met this standard |
|--|---------------------|

| | |
|-------------------|---------------------|
| Complaints | ✓ Met this standard |
|-------------------|---------------------|

Details about this location

| | |
|-------------------------|--|
| Registered Provider | Lifestar Medical Limited |
| Registered Manager | Mrs. Naomi Page |
| Overview of the service | Lifestar Medical Limited is an independent ambulance service. The service provides patient transport services, scheduled ambulance journeys and emergency and urgent response services for NHS Ambulance Trusts. |
| Type of service | Ambulance service |
| Regulated activities | Transport services, triage and medical advice provided remotely Treatment of disease, disorder or injury |

Contents

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'

| | Page |
|---|------|
| Summary of this follow up review: | |
| Why we carried out this review | 4 |
| How we carried out this review | 4 |
| What we found about the standards we followed up | 4 |
| More information about the provider | 4 |
| Our judgements for each standard reviewed: | |
| Care and welfare of people who use services | 6 |
| Safeguarding people who use services from abuse | 7 |
| Complaints | 8 |
| About CQC Inspections | 9 |
| How we define our judgements | 10 |
| Glossary of terms we use in this report | 12 |
| Contact us | 14 |

Summary of this follow up review

Why we carried out this review

We carried out an inspection on 18 January 2013 and published a report setting out our judgements. We asked the provider to send us a report of the changes they would make to comply with the standards they were not meeting.

We have followed up to make sure that the necessary changes have been made and found the provider is now meeting the standard(s) included within this report. This report should be read in conjunction with the full inspection report.

We have not revisited Lifestar Medical Limited as part of this review because Lifestar Medical Limited were able to demonstrate that they were meeting the standards without the need for a visit.

How we carried out this review

We looked at the personal care or treatment records of people who use the service and reviewed information we asked the provider to send to us.

We have not revisited Lifestar Medical Limited as part of this review.

What we found about the standards we followed up

We carried out a follow-up review of Lifestar Medical Ltd after our inspection on 18 January 2013 when we identified areas where the provider was not fully compliant.

The Commission had received an action plan from the provider, which detailed how they intended to address the areas of concern.

We asked the provider to tell us, with supporting evidence, how they had complied with the outcomes identified as non-compliant at the last inspection.

We did not visit the service or speak with people who used the service on this occasion.

We found, care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare.

People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

There was an effective complaints system available.

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

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 reviewed

Care and welfare of people who use services

✓ Met this standard

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare.

Reasons for our judgement

Our previous inspection found care and treatment was not planned and delivered in a way that was intended to ensure people's safety and welfare.

On 1 April 2013 the provider/registered manager submitted an action plan which detailed how they were going to ensure compliance. In addition to their action plan, we were supplied with information on 11 April 2013 to demonstrate their compliance.

Since our previous inspection the provider/registered manager had introduced a new 'booking form'. The booking form provided a template for information to be gathered about a person, which included a person's health, mobility and cognitive ability. The form also included a section relating to a person's mental capacity in line with obtaining consent. This information ensured care and treatment was planned and delivered to ensure people's safety and welfare.

The organisation had included information in their 'procedures manual vehicle information pack' which provided guidance to staff about what action to take if a patient was to become increasingly unwell whilst in transit. Information relating to long distance travel and the expectations of the organisation had also been clearly set out in this manual. This ensured that there were arrangements in place to deal with foreseeable emergencies.

People should be protected from abuse and staff should respect their human rights

Our judgement

The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Reasons for our judgement

Our previous inspection found people who used the service were not protected from the risk of abuse, because the provider had not taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

On 1 April 2013 the provider/registered manager submitted an action plan which detailed how they were going to ensure compliance. In addition to their action plan, we were supplied with information on 11 April 2013 to demonstrate their compliance.

Since our previous inspection the organisation had included the 'Alerters Guide' into their policy and procedures manual pack. The 'Alerters Guide' is the multi-agency approach to safeguarding within Cornwall, it is important staff are aware of this guidance to ensure any action taken is in line with local policy.

We saw certificates which confirmed staff had undertaken training in the safeguarding of vulnerable adults and the safeguarding of vulnerable children.

The Mental Capacity Act (MCA) and deprivation of liberty safeguards (DOLS) provide a legal framework that protects people who lack the mental ability to make decisions about their life and welfare. The provider/registered manager also provided us with copies of certificates to show staff had undertaken training in this area.

The provider had included information to employees in their 'procedures manual pack' about the MCA and 'consent' so staff had access at all times to information relating to these areas.

The provider/registered manager showed us competence regarding safeguarding and the MCA had been included on the organisations interview template. This enabled the organisation to source training as necessary for people when they joined the organisation.

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available.

Reasons for our judgement

Our previous inspection found the provider did not have a system in place for dealing with complaints.

A complaints process gives people who use the service guidance to comment and complain. It also ensures that complaints are listened to, acted on effectively and people know that they will not be discriminated against for making a complaint.

The recording of complaints is important as this demonstrates complaints have been responded to appropriately and resolved.

On 1 April 2013 the provider/registered manager submitted an action plan which detailed how they were going to ensure compliance. In addition to their action plan, we were supplied with information on 11 April 2013 to demonstrate their compliance.

We were provided with a copy of the organisations new complaints policy. The policy was detailed and provided people with information about their 'rights'.

The provider told us that the new complaints procedure would be included in the 'procedure manual information pack' which was kept on vehicles, so staff had access to the policy at all times to share with people who used the service. We were provided with a copy of the 'procedure manual' and saw that this was in place.

We were provided with a copy of a pictorial version of their complaints procedure. This demonstrated the provider/registered manager had considered the format of their complaints procedures to ensure everyone was able to understand how to make a complaint.

The provider/registered manager had taken into consideration the importance of learning from incidents and had introduced an 'incident form'. This form was used as a tool to highlight critical events which could be linked to complaints and to improve ongoing practice.

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 dentists and other services at least once every two years. 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 but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

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. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. 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

Copyright Copyright © (2011) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.