

RQIA Inspection Report

20 July 2021



Medcom Personnel Ltd

Type of service: Domiciliary Care Agency

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

<p>Organisation/Registered Provider: Medcom Personnel Ltd</p> <p>Responsible Individual: Mrs Irene Mtisi</p>	<p>Registered Manager: Mrs Irene Mtisi (Registration pending)</p> <p>Date registered: Mrs Irene Mitisi – application received 22 July 2020 (pending review)</p>
<p>Person in charge at the time of inspection: Mrs Irene Mtisi</p>	
<p>Brief description of the accommodation/how the service operates: Medcom Personnel Ltd is a domiciliary care agency which provides personal care, practical and social support and sitting services to over 109 people living in their own homes. Service users have a range of needs including physical disabilities, learning disabilities, dementia and palliative care. The agency's office is located in Antrim.</p>	

2.0 Inspection summary

An announced inspection took place on 20 July 2021 between 10.00 am and 14.30 pm and was conducted by two care inspectors.

The Regulation and Quality Improvement Authority (RQIA) had completed an unannounced inspection on 23 March 2021. The outcome of the inspection resulted in a Failure to Comply (FTC) notice being issued. The FTC notice related to the agency's failure to recruit staff in keeping with the regulations and minimum standards.

The inspection sought to assess the level of compliance achieved in relation to the Failure to Comply (FTC) Notice issued on 14 April 2021:

Failure to Comply Notice

FTC Reference: FTC000142

The date of compliance with the notice was 15 July 2021.

Due to exceptional circumstances the inspection took place on 20 July rather than on the compliance date. During this inspection, evidence was available to validate compliance with the Failure to Comply Notice. Whilst the majority of areas for improvement made during the last care inspection were met, one area for improvement relating to short and overlapping calls was not met. This has been stated for the second time.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- the requirements as indicated in the failure to comply notice **FTC Ref: FTC000142**
- the registration status of the agency
- written and verbal communication received since the previous care inspection
- previous care inspection reports.

The following methods and processes used in this inspection include the following:

- a discussion with the manager and responsible individual
- review of information relating to the failure to comply notice
- review of information relating to the areas for improvement outlined in the previous quality improvement plan.

With the exception of one area for improvement being restated, all other areas for improvement identified at the last care inspection were met.

4.0 What people told us about the service

The information provided by service users and relatives identified that they were generally satisfied with the care and support provided by the agency. The following comments were received as part of the inspection process:

- "They are fine."
- "Great girls, I couldn't say a word about them."
- "No big concerns, just minor things really."
- "I am very happy, the girls are very good and (my relative) is very fond of them."
- "They are ok, they are fine."
- "I have no issues, nothing major. They are all very nice."
- "They are 100 percent, I couldn't say a word about them."
- "We have nothing to complain about."
- "The girls are fine, I can't complain."

However, a number of relatives spoken with commented in relation to varying call times. Whilst there was no evidence of any impact on service users, the comments made support the Inspection findings in this regard.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Significant concerns were identified during the last inspection undertaken on 23 March 2021. The concerns related to recruitment processes not being in keeping with the Regulations and Standards; and in relation to overlapping calls being identified. This suggested that the registered persons required training, to enable them to effectively evaluate the quality of service provision. As a consequence, RQIA held a meeting with the responsible individual, who is also the registered manager on 13 April 2021, with the intention of issuing three Failure to Comply (FTC) notices.

At the meeting, RQIA did not receive the all the necessary assurances provided regarding recruitment processes. It was therefore decided that the FTC notice would be issued in this regard, with the date of compliance to be achieved by 15 July 2021. Actions required to be taken were detailed in the FTC notice. For this reason, this was not included in the Quality Improvement Plan (QIP).

Following discussions at the meeting RQIA the decision was made not to serve the second FTC notice pertaining to the fitness of the responsible individual. However, following the meeting, new information and other anomalies were identified. The concerns related to the integrity of information provided to RQIA and the lack of governance and management oversight of the areas for improvement identified during the recent inspection. Consequently, RQIA held a meeting with the provider on 21 May 2021. At this meeting, the responsible individual provided a full account of the actions taken and planned to be taken to ensure the minimum improvements necessary to achieve full compliance with the regulations and standards. RQIA decided not to take any further action at that time. However, resubmission of a full and detailed action plan in respect of the areas of concern discussed was requested by 07 June 2021. RQIA were subsequently satisfied with the resubmitted action plan and associated documents.

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
<p>Area for improvement 1</p> <p>Ref: Regulation 23(2)(3)and (4)</p> <p>Stated: Third and final time</p>	<p>At the request of the Regulation and Improvement Authority, the registered person shall supply to it a report, based upon the system referred to in paragraph (1), which describes the extent to which, in the reasonable opinion of the registered person, the agency—</p> <p>(a) arranges the provision of good quality services for service users;</p> <p>(b) takes the views of service users and their representatives into account in deciding—</p> <p>(i) what services to offer to them, and</p> <p>(ii) the manner in which such services are to be provided; and</p> <p>(c) has responded to recommendations made or requirements imposed by the Regulation and Improvement Authority in relation to the agency over the period specified in the request.</p> <p>(3) The report referred to in paragraph (2) shall be supplied to the Regulation and Improvement Authority within one month of the receipt by the agency of the request referred to in that paragraph, and in the form and manner required by the Regulation and Improvement Authority.</p> <p>(4) The report shall also contain details of the measures that the registered person considers it necessary to take in order to improve the quality and delivery of the services which the agency arranges to be provided.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>Review of the monthly quality monitoring reports reflected effective governance and management oversight of the agency.</p>	

<p>Area for improvement 2</p> <p>Ref: Regulation 13 (e)</p> <p>Stated: First time</p>	<p>The registered person shall ensure that ensure that all staff are registered with the NISCC.</p> <hr/> <p>Action taken as confirmed during the inspection: There was a system in place to ensure that all staff were registered with NISCC.</p>	<p>Met</p>
<p>Area for improvement 3</p> <p>Ref: Regulation 5 (1)</p> <p>Stated: First time</p>	<p>The registered person shall further develop the statement of purpose to ensure that it clearly includes details relating to the agency's use of volunteers in the provision of personal care.</p> <hr/> <p>Action taken as confirmed during the inspection: Given that the agency had ceased using volunteers to deliver commissioned care, the Statement of Purpose no longer required to be updated.</p>	<p>Met</p>
<p>Area for improvement 4</p> <p>Ref: Regulation 6 (1)(b)</p> <p>Stated: First time</p>	<p>The registered person must review the service user guide (service user agreement) to ensure that it includes the terms and conditions in respect of the services to be provided to service users, including details as to the amount and method of payment of fees, if appropriate.</p> <p>This refers specifically to the agency's use of volunteers in the provision of personal care. New service user agreements, with this information, must be issued to all existing service users, whose personal care is provided by volunteers.</p> <hr/> <p>Action taken as confirmed during the inspection: Given that the agency had ceased using volunteers to deliver commissioned care, the Service User Agreement no longer required to be updated.</p>	<p>Met</p>

<p>Area for improvement 5</p> <p>Ref: Regulation 16 (5)(b)(i)(ii)(iv)</p> <p>Stated: First time</p>	<p>The registered person shall ensure that new domiciliary care workers (“the new worker”) are provided with appropriately structured induction training lasting a minimum of three full working days; and during that induction training, the new worker is not supplied to a service user unless accompanied by another domiciliary care worker who is a suitably qualified and competent person.</p> <p>Records of shadowing shifts for new staff employed must be clearly retained.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Review of the records confirmed that all staff had been provided with shadowing shifts.</p>		
<p>Area for improvement 6</p> <p>Ref: Regulation 15 (2) (a)(b)(c)</p> <p>Stated: First time</p>	<p>The registered person shall monitor carer’s call times, to ensure that the calls times are in accordance with the time specified in the individual service users’ care plans.</p>	<p>Not met</p>
<p>Action taken as confirmed during the inspection:</p> <p>Whilst RQIA acknowledges that a system had been introduced to identify deficits within the returned daily records, this system was not sufficiently robust, to ensure that short and overlapping calls were identified. Advice was given in relation to auditing the calls in run order, The manager welcomed this advice and agreed to develop this accordingly. This area for improvement has been stated for the second time.</p>		

5.2 Inspection outcome

5.2.1 Failure to Comply Notice

FTC Ref: FTC000142

Notice of failure to comply with The Domiciliary Care Agency Regulation (Northern Ireland) 2007

Regulation 13. —

The registered person shall ensure that no domiciliary care worker is supplied by the agency unless—

(d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.

In relation to the notice the following four actions were required to comply with this regulation.

The registered person must ensure that, at all times, staff are recruited and employed in accordance with statutory legislation and mandatory requirements. This includes the receipt of a satisfactory AccessNI Enhanced Disclosure check, full employment histories, explanations of any gaps in employment histories, and verification of work permit status, prior to the commencement of employment. Records must be kept of all documentation relating to the recruitment process.

The registered person must implement robust monitoring systems to ensure that the recruitment process is compliant with statutory legislation and mandatory requirements.

The registered person must ensure that an audit of all recruitment records are undertaken, to ensure that any deficits in the recruitment process are rectified.

The registered person must ensure that all staff involved in the recruitment process receive training or refresher training in recruitment and selection.

During this inspection, it was noted that volunteers continued to deliver personal care up to 10 May 2021, despite providing assurances both to the Northern Health and Social Care Trust (NHSCT) and to RQIA that this practice had ceased. However, since 10 May 2021, the records did not evidence the continued use of volunteers. Review of recruitment records identified that the staff had been recruited in keeping with the Regulations and Standards. The recruitment records had been audited by two staff in keeping with the agency's policy and procedures. Records reviewed identified that all staff involved in the recruitment process had received training in recruitment and selection.

6.0 Conclusion

Evidence was available to validate compliance with the Failure to Comply Notice. The area for improvement which has been restated related to the effective delivery of care.

7.0 Quality Improvement Plan/Areas for Improvement

An area for improvement was identified to ensure compliance with The Domiciliary Care Agency Regulation (Northern Ireland) 2007.

	Regulations	Standards
Total number of Areas for Improvement	*1	0

* The total number of areas for improvement includes one that has been stated for a second time.

The area for improvement and details of the Quality Improvement Plan were discussed with Mrs Irene Mitesi, manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Agencies Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 15 (2) (a)(b)(c) Stated: Second time To be completed by: Immediate from the date of the inspection	The registered person shall monitor carer's call times, to ensure that the calls times are in accordance with the time specified in the individual service users' care plans. Ref: 5.1 Response by registered person detailing the actions taken: A process has already been implemented and robust monitoring of a selection of daily records is carried out on a monthly basis by run order. This will ensure identification of any discrepancies in call times can be picked up and appropriate action taken. This is a continuing standing item on team meeting agendas to reinforce with staff the importance of adherence to run order, call times and spending allocated time with service users.

Please ensure this document is completed in full and returned via Web Portal



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