

Unannounced Care Inspection Report 5 December 2016











Medcom Personnel Ltd

Type of service: Domiciliary Care Agency

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Inspector: Caroline Rix

1.0 Summary

An unannounced inspection of Medcom Personnel Ltd took place on 5 December 2016 from 11.45 to 15.45 hours.

Information received by the Regulation and Quality Improvement Authority (RQIA) prior to this inspection included a report that domiciliary care workers have not received training in the use of moving and handling equipment or infection control training.

The inspection sought to examine the agency's staff training and monitoring processes in light of the concerning information received by RQIA.

On the day of inspection the agency was found to be in compliance with the required regulations.

This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and	0	1
recommendations made at this inspection	U	1

Details of the Quality Improvement Plan (QIP) within this report were discussed with Irene Mtisi responsible person/manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

1.2 Actions/enforcement taken following the most recent care inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent inspection on 30 June 2016.

2.0 Service details

Registered organisation/registered person: Medcom Personnel Ltd/Irene Mtisi	Registered manager: Irene Mtisi
Person in charge of the home at the time of inspection: Irene Mtisi	Date manager registered: 28 August 2015

3.0 Methods/processes

Prior to inspection the inspector analysed the following records:

- Previous inspection report
- Record of notifiable events for 2015/2016
- Intelligence received from our duty call system

Specific methods/processes used in this inspection include the following:

- Discussion with the registered person/manager
- Examination of records
- File audits
- Evaluation and feedback

The inspector met with the registered provider/manager, Irene Mtisi, and examined the following records during the inspection:

- Four staff induction programme records
- Staff training schedule and records
- Communication records
- One service user's care plan
- Policies and procedures relating to: staff supervision and induction

The inspector spoke, via telephone, to one domiciliary care worker following the inspection, to discuss induction training programme. Feedback from the domiciliary care worker is detailed in the body of this report.

4.0 The inspection

4.1 Review of requirements and recommendations from the last care inspection dated 30 June 2016

The requirements and recommendations from the last care inspection of 30 June 2016 were not reviewed during this inspection as the focus of this inspection related to matters of concern which were raised with RQIA by a representative of a service user. The agency's progress towards compliance with regulations and minimum standards identified on 30 June 2016 will be assessed at the next inspection.

4.2 Inspection Findings

Medcom Personnel Ltd domiciliary care agency became operational from 27 February 2016 with services being commissioned by the Northern Health and Social Care Trust.

The agency currently provides services to 33 service users living in their own homes and employs 24 domiciliary care workers.

The agency's policy and procedure on 'Staff Induction Training' was reviewed as satisfactory and found to be in line with regulations and minimum standards.

The inspector reviewed the staff induction training records for four of the 24 domiciliary care workers currently employed by the agency. These records evidenced that each domiciliary care worker had completed an induction training programme which included moving and handling of service users, use of equipment and infection control subjects.

The content of the moving and handling training was examined, with records viewed to verify that the theory, assessment and practical training had been included within their training sessions, and each domiciliary care worker had satisfactorily completed this training.

The training records reviewed evidenced that a competency assessment had been carried out for each new domiciliary care worker on completion of their induction training programme, which had been signed off as satisfactory by the registered provider/manager.

Following the inspection day, the inspector spoke to one of the domiciliary care workers whose training records had been reviewed during the inspection. The domiciliary care worker described the content and timescale of the induction training received from the agency which was in line with the agency's procedure. The full content of the moving and handling training session was described by the domiciliary care worker which correlated with the contents of the training certificate viewed by the inspector. The domiciliary care worker confirmed that training on infection control was received as part of her induction programme, along with other subjects prior to being introduced to service users.

The agency's policy and procedure on 'Supervision and Staff Support' was reviewed and was found to be in line with minimum standards. Records viewed within three of the four domiciliary care worker files confirmed that supervision and spot checks had been carried out by the registered provider/manager with no practice issues identified. The forth domiciliary care worker had commenced employment within the last two months and was in the process of completing the induction programme; therefore, on-going supervision records had not yet been completed.

On the day of inspection, the inspector requested a list of domiciliary care worker records for review. The inspector observed that these records were being held in a variety of places within their office and that the filing system was poorly organised. This had resulted in long delays locating the particular staff records requested. The inspector discussed the records management with the responsible person/manager who explained that they are currently experiencing some administrative staffing problems. The responsible person/manager is recommended to review their records management system to ensure that their records are available in the agency for inspection at all times.

Records were viewed by the inspector relating to the commissioned care provided to one service user. The service user's care plan contained details of the commissioned services to be provided along with particular care needs. The inspector viewed correspondence from and to the service user's social worker in relation to the care plan implementation and changes to the care plan requested to be reviewed. These records helped to demonstrate found that where changing care needs were identified, the agency had communicated these to the trust social worker for review. The records found that these matters had been appropriately managed and action had been taken with the relevant staff.

Areas for improvement

One area for quality improvement was identified during this inspection. The registered provider should review their records management system to ensure that the required records are available in the agency for inspection at all times.

Number of requirements:	Λ	Number of recommendations:	1
Number of requirements.	U	Number of recommendations.	Į.

5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Irene Mtisi responsible person/manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the domiciliary care agency. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and the Domiciliary Care Agencies Minimum Standards, 2011. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to **the web portal** for assessment by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan				
Recommendations				
Recommendation 1	The registered provider should review their records management system to ensure that the required records are available in the agency			
Ref: Standard 10.3	for inspection at all times.			
Stated: First time	Response by registered provider detailing the actions taken: 1- Within our organisaton we have a system of filing documents in an			
To be completed by:	orderly manner.			
immediately and on- going	2- We have employed an Administrator to assist with office admin work among others.			
	3- We have developed a classification of records or documents which need to be captured and filed accordingly and this will make it easy to access documents needed.			
	4- Data capture and storage electronically is in progress.			





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