

Announced Care Inspection Report 26 February 2021



M Care Ltd

Type of Service: Domiciliary Care Agency

**Address: Graham House, Knockbracken Healthcare Park, Saintfield
Road, Belfast, BT8 8BH**

Tel No: 028 9070 3703

Inspector: Corrie Visser

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

M Care Ltd is a domiciliary care agency based in Knockbracken Healthcare Park, Saintfield Road, Belfast. The agency provides domiciliary care provision to approximately 754 service users living in their own homes. The agency has a current staff complement of 333 domiciliary care workers offering services which incorporate both personal care and domestic support. The main service user category is within the older people programmes of care, with a smaller engagement across physical disabilities, learning disabilities and mental health care programmes. The services are commissioned by the Belfast Health and Social Care Trust (BHSCT) and the South Eastern Health and Social Care Trust (SEHSCT).

3.0 Service details

Organisation/Registered Provider: M Care Ltd Responsible Individual: Mr Patrick John Miskelly	Registered Manager: Ms Deborah Lynn
Person in charge at the time of inspection: Ms Deborah Lynn	Date manager registered: Deborah Lynn - application received 12/3/2020 - "registration pending".

4.0 Inspection summary

An announced inspection took place on 26 February 2021 from 9.30 until 12.20 hours.

Due to the coronavirus (COVID-19) pandemic the Department of Health (DOH) directed RQIA to continue to respond to ongoing areas of risk identified in services. Whilst RQIA was not aware that there was any specific risk to the service users a decision was made to undertake an on-site inspection adhering to social distancing guidance.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011 and The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

The agency's provision for the welfare, care and protection of service users was reviewed. We viewed the procedures maintained by the agency in relation to the safeguarding of adults (2016) as outlined within the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' July 2015. There had been 11 incidents referred to adult safeguarding since the date of the last care inspection. Arrangements in place operationalise the regional operational safeguarding policy and procedure into practice.

The agency maintains and implements a policy relating to complaints. On the day of the inspection it was noted that the agency had received four complaints since the last inspection. The complaints reviewed were dealt with satisfactorily that show positive outcomes for the complainants.

No areas of improvement were identified from this inspection.

Evidence of good practice was found in relation to Access NI, staff registrations with NISCC, recruitment and governance processes.

Good practice was also found in relation to all current Covid-19 guidance and the use of personal protective equipment (PPE) guidelines, Covid-19 education and management including infection prevention and control (IPC) measures.

The findings of this report will provide the agency with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the manager, as part of the inspection process and can be found in the main body of the report.

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

4.2 Action/enforcement taken following the most recent care inspection dated 5 September 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 5 September 2021.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this agency. This included the previous inspection report, the returned quality improvement plan (QIP), notifiable events, and written and verbal communication received since the previous care inspection.

Following our inspection we focused on contacting the service users, their relatives, staff and professionals to obtain their views on the service.

We ensured that the appropriate staff checks were in place before staff visited service users and reviewed the following areas:

- Recruitment records specifically relating to Access NI and NISCC registration.
- Covid-19: guidance for domiciliary care providers in Northern Ireland.

RQIA provided information to service users, staff and other stakeholders that will support feedback on the quality of service delivery. This included service user/relative questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA. No service user/relative questionnaires were received and four staff responses were received. The information received via telephone consultation shows that people were satisfied with the current care and support. Comments received are included within the report.

Following the inspection we communicated with two staff members, four service users, two service users' relatives and three professionals.

We would like to thank the manager, service users, service user's relatives, staff and professionals for their support and co-operation throughout the inspection process.

6.0 The inspection

Areas for improvement from the last care inspection dated 5 September 2019		
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 13 (d) Schedule 3 Stated: First time	The registered person shall ensure that no domiciliary care worker is supplied by the agency unless full and satisfactory information is available in relation to each of the matters specified in schedule 3. This refers specifically to the procedure for processing Access NI checks, the accessibility of records and the appropriateness of references.	Met
	Action taken as confirmed during the inspection: We reviewed four staff recruitment files and assessed that the agency is now compliant with this regulation as all pre-employment checks were completed before the staff member commenced employment. Appropriate references were sought in compliance with schedule 3 and Access NI checks were progressed including checking the Barred List through Access NI.	
Area for improvement 2 Ref: Regulation 14 (a)(b)(d) Stated: First time	The registered person shall ensure that there is governance and management oversight of the recruitment practices in place, to ensure the safety and wellbeing of service users.	Met
	Action taken as confirmed during the inspection: We noted that the recruitment files had been audited and signed by the registered person to ensure recruitment practices were robust.	

6.1 Inspection findings

The review of the agency's staff recruitment records confirmed that recruitment was managed in accordance with the regulations and minimum standards before staff members commence employment and visit service users. This ensures that the staff employed are appropriate to have direct engagement with service users.

A review of the records confirmed that all staff provided by the agency are currently registered with NISCC. It was discussed that staff registrations are checked on a daily basis by the manager and the operations manager. The manager and operations manager advised that staff are not permitted to work if their professional registration lapses. Staff were also aware of this requirement which was discussed during staff engagement.

Four staff responses were received via the electronic questionnaire. All respondents were either 'very satisfied' or 'satisfied' that the care being delivered is safe and well led. Three of the respondents were either 'very satisfied' or 'satisfied' that the care being delivered is compassionate and effective, and one respondent was 'neither satisfied nor unsatisfied' with this domain.

Comments included:

- "I am very happy working within this care company."
- "The majority of the staff are doing it to help the clients and form bonds."

Comments from service users included:

- "I'm very pleased."
- "I love them all."
- "Absolutely respectful."
- "I'm happy."
- "They are fabulous."
- "I call them my angels."
- "They are great."
- "They are good caring girls."
- "They wear full PPE."
- "They are the best carers."
- "I couldn't ask for better carers."
- "They are very friendly."
- "I can have banter and craic with them."
- "They do extra things for me if I need them to."
- "The boss is very good."
- "They are top class."

Comments from service users' relatives included:

- "They are very good."
- "We are very pleased with the care he is getting."
- "It is mostly the same folk and the call times are always the same."
- "They are very good with him."
- "They are excellent."
- "I am very very happy with the care."

Comments from care workers included:

- “The manager is very approachable.”
- “We get a sufficient supply of PPE.”
- “Spot checks are done regularly.”
- “Supervision is good, especially when I need help.”
- “I can lift the phone at any time and ask for help.”
- “More training has been added this week.”
- “It is a good company to work for.”
- “They try and crack down on training to it’s kept up to date.”
- “We got good guidance during the pandemic.”

Comments from professionals included:

- “The care provided by M Care has been very good.”
- “Any concerns raised are investigated in a timely manner.”
- “Any changes to a service user’s needs are reported by staff and staff are generally very adaptable and respond as quickly as possible.”
- “Communication is very good between M Care and the key worker.”
- “M Care will attend reviews face to face or provide views by phone if required due to Covid.”
- “I have found the communication with M Care to be very good, they would inform me about any issues or concerns either by phone or e-mail or would go through our Call Management team to forward onward referrals as necessary and then inform me of this having been done.”
- “Their services to my service users is of a very good standard and if there have been any issues or concerns raised these have been dealt with very efficiently.”
- “I have found M Care to be very helpful at arranging any increases required to a service user’s current package of care when needed even when required with immediate effect to minimise any risk to the service user and ensure their needs are met.”
- “If I am unsuccessful in reaching a staff member in M care on the phone at times, if I send an e-mail, I always receive a response in a timely manner.”
- “I have found communication from M Care to be honest and factual. Reportable incidents are forwarded in a timely fashion and if I feel the need to further explore or question how incidents were responded to, I can do so without defensiveness about their service or staff being projected.”
- “Changing needs of service users is very much understood and when able M Care will adapt and change to ensure continuity of care for service users and their families. Their commitment to all of their service users throughout the (ongoing) Covid pandemic cannot go unacknowledged.”
- “M Care did attend care plan reviews and will recommence doing so when these processes are up and running again.”

Covid-19

We spoke to the manager, operations manager and two staff members who were knowledgeable in relation to their responsibility in relation to Covid-19. Staff stated they were aware of the guidance in relation to the use of PPE for activities that brought them within two metres of service users. Staff were also aware of the need to replace PPE between service users and how to appropriately dispose of used PPE. There was evidence that staff had completed training with regards to IPC and they had been provided with clear guidance.

We reviewed the current practices relating to the following areas of guidance and good practice relating to Covid-19:

- dissemination of information to staff
- IPC policies and procedures have been updated to address all current guidance in relation to Covid-19
- PPE storage and disposal
- staff training and guidance on IPC and the use of PPE equipment in line with guidance.

The procedure and guidance in place show that:

- robust systems are in place to ensure that current IPC guidance is available and accessible to staff
- all staff working in the service are able to demonstrate their knowledge of IPC practice commensurate to their role and function in the service

Based on feedback it was positive to note that staff were working well together to support the best outcomes for service users, in a caring manner whilst being caring and compassionate to both service users and their relatives.

It was also noted that staff were committed to working in line with Covid-19 guidance to ensure that the impact of current measures, strikes the correct balance between keeping people safe and promoting a good quality of life, as highlighted by relatives in their comments. During discussion with staff it was positive to note that they are being vigilant in terms of monitoring people for symptoms and are adhering to the public health guidance in order to minimise the risk of introducing or spreading Covid-19. It was also positive to note that the staff were attuned to the needs of the service users, in particular their sensory needs with regards to the PPE and alternate methods were implemented.

Areas of good practice

Evidence of good practice was found in relation to Access NI, staff registrations with NISCC, recruitment and governance processes.

Good practice was also found in relation to all current Covid-19 guidance and the use of PPE guidelines, Covid-19 education and management including IPC measures.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)