



Announced Care Inspection Report 15 January 2021



HCNI Ltd t/a Caremark

Type of Service: Domiciliary Care Agency

**Address: Units 1a and 5e, North Down Development Organisation
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Inspector: Angela Graham

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

HCNI Ltd t/a Caremark is a domiciliary care agency based in Bangor. The agency currently provides care to 561 service users in their own homes, who require care and support due to a physical disability, learning disability, mental health care needs and older people. The agency provides services which incorporate both personal care, social and domestic support.

The agency has a current staff compliment of 224 staff that provides services commissioned by the South Eastern Health and Social Care Trust (SEHSCT) and Belfast Health and Social Care Trust (BHSCT).

3.0 Service details

Organisation/Registered Provider: HCNI Ltd	Registered Manager: Mrs Emily Magrath
Responsible Individual: Mr Richard Magrath	
Person in charge at the time of inspection: Mrs Emily Magrath	Date manager registered: 15 July 2014

4.0 Inspection summary

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.

The last care inspection was undertaken on 31 July 2019. Since the date of the last care inspection, a number of communications were received in respect of the agency relating to matters of service quality. RQIA was also informed as required of any notifiable incidents which had occurred within the agency.

In consideration of the agency's regulatory history, in addition to RQIA not being made aware of any specific risk to the service users within the agency, the decision was made to undertake a remote inspection approach, to reduce any risk in relation to the spread of Covid-19.

An announced remote inspection took place on 15 January 2021 from 10.00 to 14.35 hours.

This inspection was completed following a review of information requested to be submitted to RQIA prior to the inspection. During the inspection, we focused on discussing aspects of the submitted information, in order to substantiate the information. We also focused on contacting stakeholders to obtain their views in respect of the quality of service delivered by the agency.

We reviewed the dates that criminal records checks (AccessNI) had been completed to ensure that they were in place before staff visited service users. We checked that all staff were registered with the Northern Ireland Social Care Council (NISCC) and that there was a system in place for ongoing monitoring of staff registrations. Staff adherence to the Covid-19 Guidance was also reviewed through discussion with the manager, service users and service users' representatives. We also reviewed the list of all Covid-19 related information, disseminated to staff and verified staff understanding in the context of staff discussions during inspection.

Evidence of good practice was found in relation to recruitment practices and staff registrations with NISCC. Good practice was also found in relation to infection prevention and control, the use of personal protective equipment (PPE) and Covid-19 education.

All those spoken with indicated that they were generally happy with the care and support provided.

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.

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, 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.

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 Mrs Emily Magrath, manager, the care manager and the compliance and training manager, during the inspection and details 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 31 July 2019

No further actions were required to be taken following the most recent inspection on 31 July 2019.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA in relation to the agency. This included the previous inspection report and written and verbal communications received since the previous care inspection.

Following a review of the information submitted to RQIA, the inspection took place remotely, using video technology, with the manager, care manager and the compliance and training manager.

Following our inspection we focused on contacting the service users, service users' representatives, staff and Health and Social Care (HSC) professionals to obtain their views on the service. We spoke with three service users, three service users' representatives and four staff post inspection. We also obtained the views of two HSC professionals.

To ensure that the appropriate staff checks were in place before staff visited service users, we reviewed the following:

- Recruitment records specifically relating to Access NI and NISCC registrations.

We also reviewed infection prevention and control (IPC) procedures to ensure that they were compliant with the Covid-19: guidance for domiciliary care providers in Northern Ireland (updated December 2020).

We discussed any complaints and incidents during the inspection with the manager and we also reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in line with Regulation 23.

RQIA provided information to service users, staff and other stakeholders that will support feedback on the quality of service delivery. This included service users/relative questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA.

We would like to thank the manager, care manager and the compliance and training manager, HSC professionals, service users, service users' representatives and staff for their support and co-operation throughout the inspection process.

6.0 What people told us about this agency

The information received shows that people were generally satisfied with the current care and support. Eighteen staff questionnaires were received with varying responses to satisfaction levels in relation to the four domains of safe, effective, compassionate and well led care. A very small number of staff outlined they were dissatisfied with safe, effective, compassionate and well led care. Ten additional comments were provided and all comments were positive with the exception of one.

All questionnaire responses were shared with the manager following the inspection for further consideration and action, as appropriate.

During the inspection we spoke with the manager, care manager and the compliance and training manager. We also spoke with service users' representatives; service users and staff post inspection and obtained views from HSC professionals. All those spoken with indicated that that they were very happy with the care and support provided by the agency. Comments are detailed below:

Comments from staff included:

- “The agency offers good training and there is a requirement to do yearly mandatory training.”
- “I have done IPC training and we have had lots of information regarding Covid-19; information is emailed to us, often weekly.”
- “Fantastic company to work for as they are supportive and flexible.”
- “I have done all my mandatory training such as IPC, food safety and adult safeguarding.”
- “Very good induction. I had two full days training and had shadowing both on single and double runs.”
- “I have had adult safeguarding training and know what to do and who to report abuse to in the agency and outside organisations.”
- “I have never missed a call and would stay the time I am supposed to unless there is some type of emergency.”
- “I feel safe within my role and know that the clients receive a good quality of care. We are given PPE every week and any updates with information are shared. If I need help I contact the office and they get back to me.”
- “I have been working for Caremark for 6 years and have always felt the care was to a high standard and there is always lots of support from management.”

Comments from service users' included:

- “Staff always have their PPE on and wash their hands.”
- “I get on great with the girls.”
- “Very nice staff; always courteous and pleasant.”
- “When staff are in the house they always wear their gloves, masks and aprons.”
- “I feel I am well cared for.”
- “I don't know what I would do without them.”
- “I feel with the pandemic and staff off sick the girls are put under pressure to do more; they work very hard.”

Comments from service users' representatives included:

- “Staff are very careful about protecting my parents and always wear their PPE.”
- “We are truly blessed with the care staff that come out; the girls are always courteous and respectful.”
- “I had an issue that I raised with the office staff and it was dealt with immediately. I was happy with the action taken. I feel confident if I had another issue to raise that it would be dealt with.”
- “They are very strict about wearing PPE to keep us all safe.”
- “I have been present when the supervisor has called to do a check on the staff.”
- “Very happy with everything; I'd be lost without them.”
- “They care for my husband really well and they always take time to have a chat with me too.”
- “Staff always wear their PPE in the house.”

Comments from HSC professionals included:

- “Communication from them re issues/concerns is speedy and factual, reportable incidents are forwarded in a timely fashion and if I feel the need to further explore/question I am confident that I can do so without judgement or defensiveness about their service being projected.”
- “My client was very happy with the service and had no concerns or issues.”
- “Changing needs of clients is very much understood and when able Caremark will adapt and change to ensure continuity of care for clients and families this can also be evidenced in their commitment to all of their clients throughout the (ongoing) Covid pandemic.”
- “Not aware of any late or missed calls.”
- “Good communication from the staff.”

6.2 Inspection findings**Recruitment**

The manager confirmed that the agency's staff recruitment policy and procedure details the system for ensuring that all the required staff pre-employment information has been obtained prior to commencement of employment. We viewed documentation that indicated there is a robust recruitment system in place to ensure all required checks have been satisfactorily completed prior to staff being provided into service users homes.

The NISCC matrix reviewed confirmed all staff are currently registered with NISCC. Information regarding registration details and renewal dates are monitored by the manager. The manager confirmed that all staff are aware that they are not permitted to work if their NISCC registration has lapsed. Discussion with staff confirmed that they were registered with NISCC.

Covid-19

We spoke with the manager, care manager, compliance and training manager and to four staff members, who were knowledgeable in relation to their responsibility related to Covid-19. Staff advised 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 guidance in relation to replacing PPE and how to appropriately dispose of used PPE. The staff members spoken with reported that there was an appropriate supply of PPE and PPE was of a good quality.

Service users and service users' representatives spoken with confirmed that staff wore PPE for activities that brought them within two metres of service users.

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

- dissemination of information to staff
- monitoring of staff practice
- infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19
- staff training and guidance in relation to infection prevention and control and the use of PPE, in line with guidance.

There was evidence that clear guidance with regards to infection prevention and control, donning (putting on) and doffing (taking off) of PPE was provided to staff. Staff confirmed they had completed training in relation to infection prevention and control and Covid-19 awareness training. This included training on the donning and doffing of PPE. All those consulted with described how their training included a video on the correct donning and doffing procedures. It was positive to note that the agency's training manager had recorded a video on the donning and doffing of PPE and this video was uploaded onto the agency's electronic system and accessible to all staff. The manager further described how a range of other Covid-19 related information was available for staff to read.

The procedures and guidance in place evidenced that:

- robust systems are in place to ensure that current infection prevention and control guidance is available and accessible to staff.
- there are effective systems in place to monitor staff compliance with good infection prevention and control practices.
- all staff working in the service are able to demonstrate their knowledge of infection prevention and control practice commensurate to their role and function in the service.

The manager provided a list to RQIA, by email, of the information shared with staff in relation to Covid-19. This included information related to:

- SEHSCT Contracts information regarding COVID
- NISCC Supporting good infection control digital learning
- DOH interim guidance in relation to COVID
- DOH PPE guidance update

- BHSCT PHA infection control information and poster
- COVID-19 Guidance for Domiciliary Care Providers NI
- NI COVID-19 regional surge plan for Domiciliary Care Sector November 2020

From 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. Staff 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.

Complaints and Compliments Record

A complaints and compliments record was maintained in the agency. The manager confirmed that a number of complaints were received since the date of the last inspection. We discussed the complaints that the agency had received and deemed that they had been managed appropriately. The manager confirmed that local resolution had been achieved in relation to these complaints with the exception of one complaint which was currently being investigated.

Samples of compliments were available for review and evidenced a high level of satisfaction with the service provided. Comments included “carers get on really well with Xxxx and do an amazing job, always going above and beyond” and “all the carers are brilliant who come to care for Xxxx and all have great patience for Xxxx and their work is outstanding”.

Monthly Quality Monitoring

We discussed the monitoring arrangements in compliance with Regulation 23 of The Domiciliary Care Agencies Regulations (Northern Ireland) 2007. The Regulation 23 quality monitoring visits had been undertaken monthly by the manager. A sample of reports viewed for September to November 2020 provided evidence that the monitoring process included engagement with service users, service users’ representatives and staff; a review on the conduct of the agency and development of action points.

Adult Safeguarding

The manager confirmed that the organisation’s adult safeguarding practices are directed by the regional Adult Safeguarding Prevention to Protection in Partnership, July 2015 and its associated Operational Procedures, September 2016. An Adult Safeguarding Champion (ASC) was identified for the service. Discussion with manager further confirmed that there was a clear pathway for staff to follow in relation to referring any safeguarding concerns to appropriate professionals. Discussion with staff established that they were aware of the roles and responsibilities in relation to reporting adult safeguarding concerns and maintaining safeguarding records. The manager advised that a number of adult safeguarding referrals were made since the previous inspection.

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.



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