

Medacs Healthcare PLC

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Inspection report

12 Fusion Court
Aberford Road, Garforth
Leeds
West Yorkshire
LS25 2GH

Tel: 01138873800
Website: www.medacs.com

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06 December 2018

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service: Medacs Healthcare is registered as a domiciliary care agency providing the regulated activity 'personal care' to the people who live in their own homes. The service was providing personal care to 201 people aged 65 and over at the time of the inspection.

People's experience of using this service: The management of medicines had improved which ensured they were administered as prescribed and staff had guidance to do this safely. Risks to people were assessed and records contained clear guidance for staff to follow. Staff knew how to respond to possible harm and how to reduce risks to people.

The provider had embedded quality assurance systems to monitor the quality and safety of the care provided. People and relatives were asked for their views and their suggestions were used to improve the service.

People were safe and protected from avoidable harm as staff knew how to recognise and respond to concerns of ill-treatment and abuse. Lessons were learnt about accidents and incidents and these were shared with staff members to ensure changes were made to staff practice or the environment, to reduce the risk of further occurrences.

The provider followed effective infection prevention and control guidance when supporting people in their own homes. The equipment that people used was maintained and kept in safe working order and the provider undertook safety checks with people at their home addresses.

There were enough skilled and experienced staff to meet the needs of people who used the service. Recruitment checks were completed on new staff to ensure they were suitable to support people who used the service. A comprehensive induction and training programme was completed by all staff.

A detailed needs assessment was carried out to assess people's needs and preferences prior to them receiving a service. People's personal and health care needs were met and detailed care records guided staff in how to do this. Where staff noted a concern they quickly involved healthcare professionals.

Where required, people were supported to have sufficient to eat and drink and their health needs were regularly monitored. Staff followed the advice health care professionals gave them. Staff had guidance if they needed to provide people with end of life care.

Staff showed a genuine motivation to deliver care in a person centred way based on people's preferences and likes. People were observed to have good relationships with staff.

People told us they felt well cared for by staff who treated them with respect and dignity. People told us they were listened to and were involved in their care and what they did on a day to day basis. People's right to

privacy was maintained by the actions and care given by staff members.

Staff understood their responsibilities in relation to the Mental Capacity Act 2005. People told us they were involved in making every day decisions and choices about how they wanted to live their lives.

A complaints system was in place and there was information so people knew who to speak with if they had concerns.

More information is in the full report below.

Rating at last inspection: Requires Improvement (published 1 January 2018)

Why we inspected: This was a planned inspection based on the previous rating of requires improvement. The overall rating has improved to good.

Follow up: Going forward we will continue to monitor this service and plan to inspect in line with our re-inspection schedule for those services rated Good. If any concerning information is received we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our Well-Led findings below.

Good ●

Medacs Healthcare PLC

Detailed findings

Background to this inspection

The inspection: We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: The inspection team consisted of one inspector and one expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type: Medacs Healthcare is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: We gave the service 24 hours' notice of the inspection visit. We needed to be sure the registered manager would be available to facilitate this inspection.

Inspection site visit activity started on 22 November 2018 and ended on 29 November 2018. We visited the office location on 22, 27 and 29 November 2018. We visited people in their homes on 27 and 29 November 2018. On 6 December 2018, we spoke with people's relatives and staff by telephone.

What we did: We did not ask the service to complete a Provider Information Return before this inspection. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We looked at information we held about the service including notifications they had made to us about important events. We also reviewed all other information sent to us from other stakeholders for example the local authority and members of the public.

We spoke with ten people during our visit and five relatives, this included visiting people in their homes. We

also spoke with 12 staff and the registered manager during our visit. We received feedback from two health and social care professionals.

We reviewed 12 people's care records, policies and procedures, records relating to the management of the service, training records and the recruitment records of care workers.

Is the service safe?

Our findings

People were safe and protected from avoidable harm. Legal requirements were met.

Using medicines safely

- Medicines were safely received, stored, administered and destroyed for example, where people refused to take them or they were no longer required. People were encouraged to manage their own medicines where they had the ability to do so.
- Where errors were found during checks we saw they were investigated.
- People told us they were happy with the support they received to take their medicines.

Assessing risk, safety monitoring and management

- Risk assessments were reviewed regularly and when people's needs changed.
- Risk management plans were individualised and contained clear guidance for staff to follow. For example, how to use equipment associated with people's mobility needs.

Preventing and controlling infection

- Staff described the importance of the management and prevention of infection within the service and stated they had completed training.
- Staff had access to personal protective equipment (PPE) which included disposable gloves and aprons used when undertaking personal care tasks.

Learning lessons when things go wrong

- Accident and incident analysis was carried out regularly by the registered manager to identify any causes or contributory factors and corrective actions took place.
- Staff were aware of the reporting procedures for accidents and incidents.

Staffing levels

- There were sufficient numbers of staff to meet the needs of people using the service.
- The majority of people and their relatives told us they received care from the same team of staff. Some people told us that staff changes were not always communicated to them. This had not led to any delays or missed calls but people said they liked to know the names of staff who would be providing their care. We reported this to the registered manager who told us they would address this.
- The provider had robust recruitment procedures which ensured suitable people were employed.

Safeguarding systems and processes

- The provider had a safeguarding policy and staff were suitably trained to identify and respond to any safeguarding concerns. Staff demonstrated a good awareness of safeguarding procedures and knew who to inform if they witnessed or had an allegation of abuse reported to them.
- People told us they felt safe. Comments included, "Yes, I feel safe with staff" and "Totally safe. Staff make sure I get safely onto my wheelchair and my bed, and that I am comfortable."

Is the service effective?

Our findings

People's outcomes were consistently good, and people's feedback confirmed this.

At the last inspection in October 2017, the provider had not followed the principles of the Mental Capacity Act 2005. This was a breach of Regulation 11 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Sufficient improvements had been made at this inspection and the provider was no longer in breach of Regulation 11.

- We checked whether the service was working within the principles of the Mental Capacity Act (MCA), whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. The registered manager told us they had not needed to make any applications to the Court of Protection.
- Care records showed that people had consented to their care and our discussions with the registered manager and staff showed they understood the requirements of the MCA.

Staff skills, knowledge and experience

- Staff were competent, knowledgeable and skilled; and carried out their roles effectively.
- Staff completed an induction before they started working with people. A full package of training was completed by staff during their induction and then refreshed annually. Supervision and appraisals were completed in line with the provider's policy.
- The provider offered additional training to staff. This included dementia care, end of life and emotional wellbeing.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed prior to their service starting to ensure their specific needs and requirements could be met. For example, assessments identified people's preferred methods of communication and staff were provided with guidance on how to effectively communicate with people.
- People were involved in making every day decisions and choices about how they wanted to live their lives.

Supporting people to eat and drink enough with choice in a balanced diet

- Staff assisted people to eat and drink whenever this was required.
- Guidance from health care professionals was used to develop care plans for people. Each person's care plan detailed any particular likes or dislikes and these were respected by staff who also understood the importance of offering people choice in what they had to eat and drink.

Staff providing consistent, effective, timely care within and across organisations

- People were supported to access and receive healthcare services. Care records contained evidence of visits to and from external specialists including GP's, occupational therapists and district nurses.

Supporting people to live healthier lives, access healthcare services and support

- Staff told us they liaised with health and social care professionals and gave examples of how they had informed them of changes in people's needs where appropriate.
- A relative told us, "The staff helped me by contacting the district nurse for my relative. They helped me to get continence pads, and also helped to arrange a wheelchair assessment via physiotherapy."

Is the service caring?

Our findings

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- Positive feedback was received from people regarding staff approach. People told us staff treated them well. Also, that staff showed respect for their home and belongings. Comments included, "My carer is wonderful. She does everything for me and I would never be without her. We always have a good chat and a laugh. She is like family."
- When we visited people in their homes we saw that staff delivered care in a sensitive and caring way. It was clear staff had developed good relationships with people and knew them well.

Supporting people to express their views and be involved in making decisions about their care

- Information on how to access an advocacy service was available for people who wished to have additional support whilst making decisions about their care. An advocate is an independent person who supports someone so that their views are heard and their rights are upheld.
- People and their relatives told us they were asked for their views on their care. They also told us they had been involved in care plans and assessments. One person told us, "Yes, originally I talked through with them what I need, and it hasn't changed." A relative told us, "Yes, at the start we were involved. They (staff) came here to sort out the care plan."
- People and relatives gave feedback about the positive engagement they had with staff who worked at the office. People told us they were able to communicate openly with staff about any issues. Relatives said they had always been updated and informed of any issues reported by care staff.

Respecting and promoting people's privacy, dignity and independence

- Staff understood it is a person's human right to be treated with respect and dignity and to be able to express their views. We observed them putting this into practice during the inspection when we visited people in their homes. Staff were observed to offer people choices at mealtimes, asking for their opinions and any suggestions when preparing meals.
- People told us staff promoted their independence. One person told us, "The carers make sure I can get into my wheelchair, ask me if I need the toilet. I maintain my independence where I can. The carer is always on hand if I need them."

Is the service responsive?

Our findings

People's needs were met through good organisation and delivery.

Personalised care

- People's care records were person centred, which means the person was at the centre of any care or support plans and their individual wishes, needs and choices were taken into account.
- Staff were knowledgeable about people's needs and displayed a good understanding of their preferences and interests. This enabled them to provide personalised care. People and their relatives were invited to be involved in reviews of care. This ensured care plans reflected people's preferences as their needs changed.
- People had their needs assessed and staff demonstrated a good understanding of their individual needs. Assessments identified people's preferred methods of communication and staff were provided with guidance on how to effectively communicate with people.

Improving care quality in response to complaints or concerns

- The provider had a policy and procedure to guide staff in how to manage complaints. We looked at how the service had managed a recent concern they had received and saw it had been investigated and responded to appropriately.
- People and their relatives told us they felt able to speak with a member of staff if they were worried about anything.

End of life care and support

- The provider had an end of life policy which gave guidance to staff if they had to provide palliative care to a person. Staff were not providing end of life care to anyone at the time of our visit.
- Staff told us they had positive working relationships with external healthcare professionals and had previously worked closely with them when providing palliative care to people.

Is the service well-led?

Our findings

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong.

- The provider and registered manager were committed to providing good quality care to people. Since the last inspection, the provider had invested in additional staff training and the management of medicines. This had led to improvements in staff practice and a reduction in medication related incidents such as missed signatures on medication administration records.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The provider had a comprehensive quality assurance system in place. This enabled the registered manager to collate information on a daily basis to show how the service was performing.
- The registered manager was supported by a team of staff based at the office who coordinated care packages across Leeds and Barnsley. These staff were responsible for monitoring the quality of the care provided to people and they carried out spot checks, care reviews, supervision of staff and held team meetings.
- The provider had policies and procedures in place that considered guidance and best practice from expert and professional bodies and provided staff with clear instructions.
- The registered manager continued to notify the CQC of all significant events, changes or incidents which had occurred at the service in line with their legal responsibilities.

Engaging and involving people using the service, the public and staff

- The service had a positive culture that was person centred, open and inclusive. Staff we spoke with felt supported by the provider and the registered manager, and told us they were comfortable raising any concerns.
- Staff told us they were supported by the registered manager and gave examples of when they had been supported to work flexibly, or have breaks when their personal circumstances changed. One staff member told us, "The registered manager was like a friend to me when I had a difficult experience. She contacted me regularly to check I was ok, and to ask if there was anything else I needed from her. I felt very supported."

Continuous learning and improving care and working in partnership with others

- The registered manager demonstrated an open and positive approach to learning and development. Improvements had been made following our previous inspection to ensure regulatory requirements were met.
- The service continued to work closely with health care commissioners and other service providers. The registered manager told us that when there had been periods of bad weather and staff had found it difficult to travel, the service had worked collaboratively with other care services to ensure people received their care calls.

- Feedback we received from one external social care professional was positive. They said they felt the service had improved and continued to demonstrate a good level of openness and transparency when liaising with them as stakeholders. For example, when reporting incidents to safeguarding. They commented on the responsiveness of the registered manager and said feedback from people and relatives had been positive.