

Mercylink Care Services Ltd

Head Office

Inspection report

Jhumat House
160 London Road
Barking
Essex
IG11 8BB

Tel: 07984782116

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Ratings

Overall rating for this service	Inspected but not rated
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Is the service effective?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

This service is a domiciliary care agency and is based in the London Borough of Barking & Dagenham. The service provides personal care to adults in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

At the time of our inspection, the service provided personal care to four people.

People's experience of using this service and what we found

At our last inspection on 3 August 2020, we found training certificates for some staff were not genuine. The provider was not aware of this. This placed people at risk of harm as staff may not have been trained to perform their roles effectively. At this inspection, improvements had been made and we saw evidence that the provider had sourced accredited training providers to deliver training.

At our previous inspection of this service, we found risk assessments were not robust and did not identify risks to people around their health conditions. Robust pre-employment checks had not been carried out when recruiting staff and consent had not been sought from people to provide care and support. The quality assurance systems were not robust to identify these shortfalls, therefore placing people at risk of harm. At this inspection, improvements in these areas had been made and there were more effective quality assurance systems in place, which included auditing care plans and staff files.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The previous rating for this service was requires improvement (published 19 September 2020) and there were multiple breaches of regulation. We issued a warning notice for a breach of Regulation 17 (Good Governance) and Regulation 18 (Staffing). There were also requirement notices issued for Regulation 12 (Safe care and treatment) and Regulation 19 (Fit and proper persons) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We will assess this at the next comprehensive inspection of the service.

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection, enough improvement had been made and the service was compliant with the warning notice issued.

Why we inspected

We undertook this targeted inspection to check whether the warning notice we previously served had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on warning notices. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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 effective?

At our last inspection, we did not rate this key question. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Details are in our effective findings below.

Inspected but not rated

Is the service well-led?

At our last inspection, we rated this key question inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Details are in our well-led findings below.

Inspected but not rated

Head Office

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements of the warning notice in relation to Regulation 17 (Good Governance) and Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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

Notice of inspection

Our inspection was announced. We gave the service 24 hours' notice of the inspection. This was because it is a domiciliary service and we needed to be sure that a member of the management team was available to support us with the inspection.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make.

We reviewed the information we already held about this service. This included details of its registration, previous inspection reports, enforcements and any notifications of significant incidents the provider had sent us. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered manager, quality assurance manager and care manager. We reviewed

documents and records that related to people's care and the management of the service. We reviewed four care plans, which included risk assessments and consent forms and six staff files, which included pre-employment checks and training certificates. We looked at other documents such as quality assurance records.

After the inspection

We continued to seek validation about the service and spoke to two people that used the service, one relative of a person that used the service and three staff. We also contacted professionals involved with the service for their feedback.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as inspected but not rated. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key questions at the next comprehensive inspection of the service.

Staff support: training, skills and experience

At our last inspection, the provider had failed to ensure that staff had been trained to perform their roles effectively as we found that training certificates for some staff were not genuine. This was a breach of Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. As a result, we served a warning notice to ensure action was taken and improvements were made and set a timescale for compliance. Enough improvement had been made at this inspection and the service was no longer in breach of Regulation 18 and had complied with the warning notice in this area.

- Staff had been trained to perform their roles effectively.
- The registered manager showed us evidence that accredited training providers had been sourced to provide training to staff. She informed us that staff that had provided training certificates from their previous employer, had their certificates verified with the training provider, to ensure they were genuine. Staff would also receive refresher training from the service's own training provider. We checked the training provided to staff with the training provider, who confirmed that training was delivered by them. This gave us assurance the training certificates were genuine and the training was of a suitable standard.
- A training matrix was in place that showed mandatory training such as safeguarding, infection control and basic life support had been delivered. Staff confirmed that they received training. A staff member told us, "I get regular training, I just finished one last month. It is very helpful." Another staff member commented, "I do get training at Mercylink, it is very helpful, it helps with my knowledge." A person told us, "I am happy with them. I have no concerns." A relative commented, "I ask my [family member] every time if she is happy with the care and she is."

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people;

At our last inspection the provider had failed to take proper steps to ensure there were effective systems to assess, monitor and mitigate risks to the health and safety of people to improve the quality and safety of the services provided. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. As a result, we served a warning notice to ensure action was taken and improvements were made and set a timescale for compliance. Systems were not in place to ensure robust audits were carried out on medicine management, staff files and risk assessments. This was required to ensure high quality care was being delivered at all times and there was a culture of continuous improvement.

At this inspection we found enough improvement had been made and the service was no longer in breach of Regulation 17 and had complied with the warning notice in this area.

- During this inspection we found systems were in place for quality assurance of the service. Audits were being carried out on care plans, risk assessments, medicine and staff files. The registered manager told us the audits helped the service to identify any shortfalls and take prompt action. We found improvements had been made with risk assessments associated with people's circumstances and health conditions, consent and pre-employment checks such as completing criminal record checks.
- Personalised COVID-19 risk assessments had been completed to ensure risks of infections were minimised. Topical MAR charts had been introduced when staff applied prescribed body creams to people, which had not been in place at the last inspection. Medicine risk assessments had been completed to minimise risks associated with medicine management.
- Training records had been updated and systems had been put in place to ensure staff received mandatory training to perform their roles effectively. Additional training such as on epilepsy had also been delivered to ensure people's care needs were met. This was followed by up spot checks and medicine observations to ensure safe and effective care delivery.
- People, relatives and staff told us the service was well-led. A person told us, "I like my carers, the care agency is good." A relative commented, "[Registered manager] puts me at ease, she comes in once a week."

She is great. She is professional, very supportive." A staff member told us, "I like working for them. [Registered manager] is a good listener. She supports me."