



## Inspection Report on

**Miracle Workers Agency Ltd**

**Sterling House  
Lewis's Lane  
Abergavenny  
NP7 5BA**

## **Date Inspection Completed**

16 December 2020

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## About Miracle Workers Agency Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Miracle Workers Agency Ltd
Registered places	N/A as a Domiciliary Support Service
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	This was a focused inspection; we did not consider Welsh language provision on this occasion.

### Summary

Miracle Workers Agency Ltd is a domiciliary support service that provides a live-in care service to people throughout the United Kingdom who require care and support in their own homes. The agency introduces self-employed care workers to service users, where support is provided on a live-in basis. This was a focussed announced inspection.

People are happy with the care and support they receive and are very complimentary of the service provided. Care and support is designed in consultation with people using the service, which takes into account their needs, wishes and aspirations. Personal plans are in place although these are not revised in detail when required. Safeguarding concerns are taken seriously and dealt with appropriately. There is oversight of the service by the responsible individual (RI), however, quality assurance processes require strengthening. Supervisory arrangements for care workers are weak and training for care workers needs to be facilitated more frequently.

## Well-being

People receive good quality care and support from a service that promotes their participation in the service they receive. We received excellent feedback from relatives about the care and support delivery. Relatives told us they feel involved in the review of care and support and are fully informed. Personal plans are to a good standard with service user/relative participation evident, however, personal plans are not always revised as necessary. Care workers support people to access health professional advice and support in order to promote their well-being.

The service has a clear management structure, but support mechanism for care workers are poor. We saw quality assurance reports completed by the RI on a quarterly basis that detail an overview of the service and noted the RI has a consistent presence at the service. However, regulatory reports completed by the RI do not reflect service user or staff engagement. We received mixed feedback from care workers we spoke with; some told us they feel supported, whereas other care workers feel support is inadequate. Supervision arrangements for staff are ineffective, therefore we have issued a priority action notice and the provider must take immediate action to address this issue.

Systems to safeguard people are in place. Care workers confirm they complete an induction and training to help them understand their role in protecting and supporting vulnerable adults and records we saw reflect this. However, refresher training is not always completed in a timely manner. People we spoke with know whom to contact if they have any concerns and told us they feel fully informed by the service provider of matters of interest. Care practice is supported by key policies in place, however, some require further information. The RI has a sound understanding of safeguarding requirements and makes referrals to the local authority and CIW when appropriate.

## Care and Support

People's physical health and overall well-being is promoted. We spoke with 13 people and/or their relatives using the service and received exceptional feedback about the care and support they receive. Comments included, *"I would recommend them to anyone needing care;"* *"we have one carer who is excellent, she goes above and beyond;"* and *"the carers are top class."* Records reflect people receive support to access health professional advice and care workers we spoke with have a good understanding of people's health conditions and the support they require. Medication and food/fluid records are in place where required. However, fluid monitoring charts used to document someone's fluid intake did not have the 'Goals,' (fluid target) section completed. This meant that it is difficult to ascertain whether the person is meeting their specific target of fluid for that day. The RI provided reassurances they would take action to resolve this.

Care documentation set out how each individual's care and support needs will be met by care workers. Personal plans contain good detailed information to enable care workers to meet people's support needs. Individual wishes and preferences are taken into account and information includes their likes and dislikes. Records clearly reflect plans are co-produced with the person/and or their relative. However, plans are not always revised when changes occur, for example, we noted continence needs for one person had altered; however, this had not been updated within the personal plan.

People are protected from harm and abuse. Safeguarding training is provided to care workers and refresher training overseen by care managers. Care worker training in other areas such as fire safety and infection control requires updating more frequently. A record of safeguarding matters is maintained and the service provider communicates with relevant professionals regarding potential safeguarding incidents. Safeguarding and infection control policies are in place to support care practice, however, these policies require further detail including measures pertinent to the local authorities where the care worker is placed. The RI provided reassurance they will take action to resolve this.

## **Leadership and Management**

Systems in place to measure the performance of the service need to be more robust. The RI completes a report every three months that reflects they consider the performance of the service. However, records completed did not indicate the RI speaks to people using the service and care workers to measure their experience. The RI has put measures in place to improve this requirement. The service provider has not made provision for the quality of care to be reviewed on a six monthly basis. Systems for recording care delivery, medication administration and accidents are in place. However, the office oversight of key documentation requires strengthening to ensure tasks are completed and accidents audited to identify patterns. The service provider conducts safeguarding investigations and report matters of concern to CIW and relevant local authority. This includes referring to any relevant professional registration body as necessary, which supports timely intervention.

The service provider was unable to provide records to show they offer care workers regular supervision. Records we looked at show long gaps between supervision sessions, taking place. Some care workers we spoke with told us they receive support on a regular basis while others state they receive supervision infrequently and are not satisfied with the level of support given. We have issued a priority notice to the service provider and informed the RI this area requires immediate improvement. We received training statistics that indicate staff have completed mandatory training; however, the service provider does not encourage staff to refresh training in critical areas such as fire safety and infection control on a regular basis. We also noted the service provider is not facilitating mental capacity training for care workers.

The service provider is clear about its aims and objectives. We viewed the statement of purpose (SOP). The SOP is fundamental in setting out the vision for the service and is a key document that should clearly demonstrate the range of health and care needs the service will provide support for, including any specialist service/care provision offered. The SOP provided an overall picture of the service offered and has been recently updated.

## **Environment**

This theme does not form part of the inspection remit for domiciliary support services. However, we found the service operated from secure premises with appropriate arrangements in place for risk management.

### Areas for improvement and action at the previous inspection

This is the first inspection of the service provider under Regulation and Inspection of Social Care Act 2016 (RISCA).		
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### Areas where immediate action is required

The service provider must ensure that any person working at the service receives regular and appropriate supervision.	36(2)(c)
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We found that care worker supervision is not taking place as required, which can impact on their motivation and assurance that they have the required skills and knowledge to carry out their duties and meet people's needs. There is a potential minor/moderate impact on or risk to individual's well-being using the service due to an insufficient commitment from the service provider to address this issue identified. Therefore, we have issued a priority action notice and expect the provider to take immediate steps to address this and make improvements.

### Areas where improvement is required

The Responsible Individual must ensure they meet with staff and people using the service every three months and record this contact made.	73(3)
The service provider must ensure the provision of quality of care and support is reviewed every six months.	80(2)
The service provider must ensure people working at the service receive core training appropriate to the work they are to perform and that this is refreshed at regular intervals.	36(2)(d)
The service provider must ensure individual personal plans are revised as necessary.	16(5)

We have not issued a priority action (non-compliance) notice on this occasion. This is because there is no immediate or significant risk to or poor outcomes for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection





## **Care Inspectorate Wales**

### **Regulation and Inspection of Social Care (Wales) Act 2016**

## **Non Compliance Notice**

### **Domiciliary Support Service**

This notice sets out where your service is not compliant with the regulations. You, as the registered person, are required to take action to ensure compliance is achieved in the timescales specified.

**The issuing of this notice is a serious matter. Failure to achieve compliance will result in Care Inspectorate Wales taking action in line with its enforcement policy.**

Further advice and information is available on our website  
[www.careinspectorate.wales](http://www.careinspectorate.wales)

**Miracle Workers Agency Ltd**

Abergavenny

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<b>Leadership and Management</b>	<b>Our Ref: NONCO-00010047-LSSQ</b>
<b>Non-compliance identified at this inspection</b>	
<b>Timescale for completion</b>	<b>05/04/21</b>
<b>Evidence</b>	
<p>This is because the service provider does not have robust systems and processes in place to provide appropriate and regular supervision to any person working at the service.</p> <p>An unannounced inspection was carried out by CIW on 16.10.2017 and the evidence of non-compliance was based on the following findings:</p> <p>We found care workers had not been afforded the opportunity to discuss their work, talk about any issues they may have and identify learning and development needs.</p> <p>An unannounced inspection was carried out by CIW on 25.07.2018 and the evidence of non-compliance was based on the following findings:</p> <p>We found care workers did not receive regular formal supervision that they can rely upon. We were told by care workers we spoke with that they cannot always rely upon support, guidance and advice.</p> <p>We informed the registered provider that they continue not to meet the legal requirements in relation to providing supervision for staff. They advised CIW that they were working to identify a model of supervision that will enable them to support people across the United Kingdom and are committed to complete this as soon as possible.</p> <p>An unannounced inspection was carried out by CIW on 19.11.2020 and the evidence of non-compliance was based on the following findings:</p> <p>We viewed a supervision log for seven care workers. We saw there had been lengthy gaps between supervision sessions taking place for the majority of care workers. Supervision records revealed that four staff had one recorded supervision during a 12 month period and did not reflect that formal supervision was held on a three monthly basis. Formal supervision in this sense relates to a confidential, documented one-to-one discussion between a care worker and their line manager. It enables staff to reflect on their practice, the service providers' philosophy of care, discuss any issues and identify development goals.</p> <p>We reviewed the service provider's statement of purpose and this detailed the following</p>	
<b>Description of non-compliance/Action to be taken</b>	<b>Regulation number</b>
Supporting and developing staff (Regulation 36 (2) (c)): The service provider had not ensured that any person working at the service receives appropriate supervision.	36(2)(c)

statement:

*'Every two months Care Managers will arrange a formal supervision session by telephone with the carers of their clients. This session will be recorded on a Supervision Form, signed and dated and added to the carer's file. Care Managers keep in regular contact with carers via telephone and email to monitor them and to provide support. They aim to contact carers at least every 14 days.'*

We spoke with eight care workers and during our discussions, some care workers told us they felt supported by the service provider and were happy in their role, however, some care workers stated they did not feel adequately supported.

Comments from care workers included:

- *'Supervision is not helpful to me; it's more like ticking boxes.'*
- *'If we contact the office they will respond, however, if we do not contact them then support is limited.'*
- *'They could be better at picking up the phone, asking if you are okay, if I did not phone them I would not hear from them.'*

We found that care worker supervision was not taking place as required, which can impact on their motivation and assurance that they have the required skills and knowledge to carry out their duties and meet people's needs. There is a potential minor/moderate impact on or risk to individual's well-being using the service due to an insufficient commitment from the service provider to address this issue identified.