

## Announced Care Inspection Report 6 February 2020



## **Angels Recruitment Agency Ltd**

Type of Service: Domiciliary Care Agency Address: 77 Creggan Road, Rosemount, Derry, BT48 9DA Tel No: 07587454047 Inspector: Fionnuala Breslin

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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

Angels Recruitment Agency Ltd operates from premises on the Creggan Road, Londonderry. The inspector was advised that the agency does not currently supply domiciliary care workers into service users own homes.

## 3.0 Service details

Organisation/Registered Provider: Angels Recruitment Agency Ltd Responsible Individual: Mr Daniel James Duddy	Registered Manager: Mr John Martin Jackson
Person in charge at the time of inspection:	Date manager registered:
Mr Daniel James Duddy	14 December 2015

### 4.0 Inspection summary

An announced inspection took place on 6 February 2020 from 11.00 to 13.30 hours. The agency received notice of the inspection prior to the inspection day, this was due to the fact the agency office is not staffed at all times due to the agency size.

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.

## 4.1 Inspection outcome

Details of the Quality Improvement Plan (QIP) dated 26 February 2019 was discussed with Mr Daniel Duddy, Registered Person, and the registered manager as part of the inspection process. The matters could not be reviewed at this inspection for compliance as the agency remains non-operational at this time. The inspector informed the registered person that should the agency become operational then all matters would be required to be in compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

Enforcement action did not result from this inspection.

	Regulations	Standards
Total number of areas for improvement	0	3

#### 4.2 Action/enforcement taken following the most recent care inspection dated 26 February 2019

As the agency had not been operational at inspection on 26 February 2019, the RQIA enforcement procedures were followed and a condition placed on the registration of the agency on 28 May 2019. This required the registered provider to notify RQIA eight weeks prior to the date the service proposed to become operational. At this point RQIA would undertake an inspection and seek assurances that the agency could provide a service that would comply with regulations and standards.

## 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- previous inspection report and QIP dated 26 February 2019
- details of enforcement following the last inspection

Areas for improvement identified at the last care inspection were not reviewed as part of this inspection due to the non-operational status of the agency and have been carried forward to the next care inspection.

The findings of the inspection were provided to the registered person at the conclusion of the inspection.

## 6.1 The Inspection

The most recent inspection of the agency was an announced care inspection.

This QIP will be validated by the care inspector at the next care inspection.

# 6.2 Review of areas for improvement from the last care inspection dated 26 February 2019

Areas for improvement from the last care inspection		
Action required to ensure Agencies Minimum Stand	e compliance with The Domiciliary Care dards, 2011	Validation of compliance
Area for improvement 1 Ref: Standard 12.7	A record is kept in the agency, for each member of staff, of all training, including induction, and professional development activities undertaken by staff. The record	
Stated: First time	<ul> <li>includes:</li> <li>the names and signatures of those attending the training event</li> </ul>	Carried forward to the next care
	Action taken as confirmed during the inspection: As the agency has not recruited new staff since the previous inspection (due to non- operational status) this area for improvement has been carried forward for review at the next inspection.	inspection
Area for improvement 2 Ref: Standard 11.4	The registered person should ensure that staff are issued with a written statement of main terms and conditions prior to employment and no later than thirteen weeks after appointment.	Carried forward to the next care inspection

Stated: Second time	Action taken as confirmed during the inspection: As the agency has not recruited new staff since the previous inspection (due to non- operational status) this area for improvement has been carried forward for review at the next inspection.	
Area for improvement 3 Ref: Standard 8.11	It is recommended that the registered person monitors the quality of services in accordance with the agency's written procedures and completes a monitoring report on a monthly	
Stated: Third time	basis. This report summarises any views of service users and/or their carers/representatives ascertained about the quality of the service provided, and any actions taken by the registered person or the registered manager to ensure that the organisation is being managed in accordance with minimum standards.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: As the agency has not recruited new staff since the previous inspection (due to non- operational status) this area for improvement has been carried forward for review at the next inspection.	

	Regulations	Standards
Total number of areas for improvement	0	3

## 6.3 Inspection findings

From discussions with the registered person, it was evident that at the time of the inspection and at the previous inspection, the agency was not supplying domiciliary care workers into service users own homes.

The registered person explained to the inspector that he was currently supplying band two and band three healthcare staff into hospital and residential settings; and he was supplying a band five senior care assistant to a residential setting; the registered person confirmed that he was not supplying any staff members to people in their own homes.

Therefore, all matters to be reviewed could not be progressed due to the non-operational status of the agency. The registered person was informed by the inspector that should the agency become operational again in the future that the matters previously stated will be reviewed to ensure compliance in accordance with the following documents: 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.

The inspector would like to thank the registered person for his support and co-operation throughout the inspection process.

## 7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and/or the Domiciliary Care Agencies Minimum Standards, 2011.

### 7.2 Actions to be taken by the service

As matters in the previous QIP were not reviewed no response is required at this time.

Quality Improvement Plan	
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011	
Area for improvement 1 Ref: Standard 12.7	A record is kept in the agency, for each member of staff, of all training, including induction, and professional development activities undertaken by staff. The record includes:
Stated: First time	• the names and signatures of those attending the training event
<b>To be completed by</b> : To commence at the time the agency becomes operational	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next inspection.
	Response by registered person detailing the actions taken: No response required at this time.
Area for improvement 2 Ref: Standard 11.4	The registered person should ensure that staff are issued with a written statement of main terms and conditions prior to employment and no later than thirteen weeks after appointment.
Stated: Second time To be completed by:	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next inspection.
To commence at the time the agency becomes operational	Response by registered person detailing the actions taken: No response required at this time.
Area for improvement 3 Ref: Standard 8.11	It is recommended that the registered person monitors the quality of services in accordance with the agency's written procedures and completes a monitoring report on a monthly basis. This report summarises any views of service users and/or their
Stated: Third time	carers/representatives ascertained about the quality of the service provided, and any actions taken by the registered person or the
To be completed by: To commence at the time	registered manager to ensure that the organisation is being managed in accordance with minimum standards.

the agency becomes operational	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next inspection.
	Response by registered person detailing the actions taken: No response required at this time.





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