

Announced Care Inspection Report 15 February 2018



Angels Recruitment Agency Ltd

Type of Service: Domiciliary Care Agency

Address: 77 Creggan Road, Rosemount, Derry, BT48 9DA

Tel No: 07587454047

Inspector: Amanda Jackson

www.rgia.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 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: Mr Daniel James Duddy	Date manager registered: 14 December 2015

4.0 Inspection summary

An announced inspection took place on 15 February 2018 from 10.45 to 13.45 hours.

This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to a number of records reviewed at inspection.

Three areas were identified for improvement and development. These relate to monthly monitoring of service quality in line with Regulation 23. Review of staff training records in accordance with Standard 12.7 and staff written statement of main terms and conditions as outlined in Standard 11.4.

The inspector was satisfied that the conditions imposed on the agency's registration on 7 August 2018 had been met and following the inspection supported the registered person to make application to have all three conditions removed.

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.

The inspector would like to thank the registered person and agency administrator for their warm welcome and full cooperation throughout the inspection process.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	3

Details of the Quality Improvement Plan (QIP) were discussed with Mr Daniel James Duddy, registered person, and the agency administrator as part of the inspection process. The timescales for completion commence from the date of inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 11 July 2017

No further actions were required to be taken following the most recent inspection on 11 July 2017.

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 dated 11 July 2017
- previous inspection report and QIP dated 09 May 2017
- record of notifiable events from the previous inspection
- record of complaints notified to the agency

The inspector spoke with the registered person and agency administrator during the inspection.

The following records were examined during the inspection:

- A range of policies and procedures relating to recruitment, induction and supervision.
- Two staff members' supervision and appraisal records.
- Two staff members' training records.
- Three monthly quality monitoring reports.
- Staff handbook.

No areas for improvement were identified at the last care inspection dated 11 July 2017.

Eight areas for improvement were identified at the previous care inspection dated 09 May 2017.

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

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 11 July 2017 and previous care inspection dated 09 May 2017

The most recent inspection of the agency dated 11 July 2017 was an announced care inspection. No areas for improvement were required.

The previous care inspection dated 09 May 2017 was an announced care inspection.

This QIP was validated by the care inspector during this inspection.

6.2 Review of areas for improvement from the previous care inspection dated 09 May 2017

There were eight areas for improvement made at the care inspection dated 09 May 2017 which resulted in enforcement action. In accordance with RQIA's Enforcement Policy and Procedures, three conditions were imposed on the registration of the agency:

Condition 1: Angels Recruitment Agency Ltd will not accept any new referrals for domiciliary care.

Condition 2: Angels Recruitment Agency Ltd will review the management and governance arrangements for all records held by the agency.

Condition 3: Angels Recruitment Agency Ltd must establish robust systems and processes for the selection and recruitment of domiciliary care workers.

6.2 Review of areas for improvement from the last care inspection dated 09 May 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
Requirement 1 Ref: Regulation 16 (5) (a) (b) Stated: Second time	(5) Where an agency is acting otherwise than as an employment agency, the registered person shall ensure that— (a) a new domiciliary care worker ("the new worker") is provided with appropriately structured induction training lasting a minimum of three full working days; and (b) during that induction training— (i) the new worker is not supplied to a service user unless accompanied by another domiciliary care worker who is a suitably qualified and competent person; (ii) a member of staff ("the staff member") who is suitably qualified and experienced, is appointed to supervise the new worker; (iii) the staff member (or another suitably qualified and competent person if the staff member is unavailable) will always be	Met

	<p>available to be consulted while the new worker is on duty; and</p> <p>(iv) subject to the consent of the service user, the staff member makes arrangements to observe, on at least one occasion, the new worker carrying out his duties.</p>	
<p>Requirement 2</p> <p>Ref: Regulation 21</p> <p>Stated: Second time</p>	<p>Action taken as confirmed during the inspection:</p> <p>Review of the agency induction policy dated April 2017 and updated during inspection on 15 February 2018 confirmed a robust procedure for staff induction. The agency have also developed a staff induction workbook which clearly outlines the areas for induction including mandatory training, introduction to the agency and shadowing elements of the induction process.</p> <p>As the agency has been unable to accept new referrals since the previous inspection (due to conditions on registration) the agency has not recruited new staff since the previous inspections. The inspector will review staff induction records at the next inspection.</p>	<p>Met</p>
	<p>21.—(1) The registered person shall ensure that the records specified in Schedule 4 are maintained, and that they are—</p> <p>(a) kept up to date, in good order and in a secure manner;</p> <p>(b) retained for a period of not less than eight years beginning on the date of the last entry; and</p> <p>(c) at all times available for inspection at the agency premises by any person authorized by the Regulation and Improvement Authority.</p>	
	<p>Action taken as confirmed during the inspection:</p> <p>Records requested for review during the inspection were made available by the registered person and agency administrator. The records were found to be in compliance with Regulations 21.</p>	

<p>Requirement 3</p> <p>Ref: Regulation 17</p> <p>Stated: Second time</p>	<p>17.—(1) Where an agency is acting otherwise than as an employment agency, the registered person shall prepare a staff handbook and provide a copy to every member of staff.</p> <p>(2) The handbook prepared in accordance with paragraph (1) shall include a statement as to—</p> <p>(a) the conduct expected of members of staff, and disciplinary action which may be taken against them;</p> <p>(b) the role and responsibilities of domiciliary care workers and other staff;</p> <p>(c) record keeping requirements;</p> <p>(d) recruitment procedures; and</p> <p>(e) training and development requirements and opportunities</p> <p>Action taken as confirmed during the inspection:</p> <p>Review of the staff handbook dated for review in 2017 (but not reviewed) included a number of areas including staff roles and responsibilities and conduct but did not include the areas of:</p> <ul style="list-style-type: none"> • staff disciplinary procedures • record keeping requirements • training and development <p>The handbook was updated immediately post inspection and submitted to the inspector for review. The inspector confirmed that the updated handbook was confirmed as in accordance with Regulation 17 on 22 February 2018.</p>	<p>Met</p>
<p>Requirement 4</p> <p>Ref: Regulation 16 (2) (a)</p> <p>Stated: Second time</p>	<p>2) The registered person shall ensure that each employee of the agency—</p> <p>(a) receives training and appraisal which are appropriate to the work he is to perform;</p> <p>Action taken as confirmed during the inspection:</p> <p>Staff training reviewed for two staff members supported all areas of mandatory training had been undertaken however the records of training were not fully compliant with standard 12.7. An area for improvement has been stated.</p>	<p>Met</p>

<p>Requirement 5</p> <p>Ref: Regulation 23</p> <p>Stated: First time</p>	<p>23.—(1) The registered person shall establish and maintain a system for evaluating the quality of the services which the agency arranges to be provided.</p> <p>(2) At the request of the Regulation and Improvement Authority, the registered person shall supply to it a report, based upon the system referred to in paragraph (1), which describes the extent to which, in the reasonable opinion of the registered person, the agency—</p> <p>(a) arranges the provision of good quality services for service users;</p> <p>(b) takes the views of service users and their representatives into account in deciding—</p> <p>(i) what services to offer to them, and</p> <p>(ii) the manner in which such services are to be provided; and</p> <p>(c) has responded to recommendations made or requirements imposed by the Regulation and Improvement Authority in relation to the agency over the period specified in the request.</p> <p>(3) The report referred to in paragraph (2) shall be supplied to the Regulation and Improvement Authority within one month of the receipt by the agency of the request referred to in that paragraph, and in the form and manner required by the Regulation and Improvement Authority.</p> <p>(4) The report shall also contain details of the measures that the registered person considers it necessary to take in order to improve the quality and delivery of the services which the agency arranges to be provided.</p> <p>(5) The system referred to in paragraph (1) shall provide for consultation with service users and their representatives.</p> <p>Action taken as confirmed during the inspection:</p> <p>Quality monitoring for one service user (the only service user at the previous inspections) was undertaken following the previous inspection in May 2017. Review of this process confirmed compliance.</p> <p>Monthly monitoring reports were implemented following the inspection in July 2017. Review of three reports for July, August and September 2017 were limited in their content</p>	<p>Met</p>
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	in respect of stakeholder feedback. This area for improvement has been restated under Standard 8.11 detailed later in the report.	
Action required to ensure compliance with the Domiciliary Care Agencies Minimum Standards, 2011.		Validation of compliance
Recommendation 1 Ref: Standard 13.3 Stated: First time	The registered person should ensure that staff have recorded formal supervision meetings in accordance with the procedures.	Met
	Action taken as confirmed during the inspection: Review of the agency supervision policy dated November 2014 supported a structured process for staff supervision. The policy is stated for review in line with the three year timeframe under Standard 9.5. Supervisions reviewed for two staff members supported compliance with the agency policy.	
Recommendation 2 Ref: Standard 11.4 Stated: Second time	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
	Action taken as confirmed during the inspection: As the agency has not recruited new staff since the previous inspection (due to conditions on registration) this area for improvement has been carried forward for review at the next inspection.	
Recommendation 3 Ref: Standard 8.11 Stated: Second time	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 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.	Partially met
	Action taken as confirmed during the inspection: Monthly monitoring reports were implemented	

	following the inspection in July 2017. Review of three reports for July, August and September 2017 were limited in their content and did not include staff and professional feedback. This area for improvement has been restated at this inspection.	
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7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mr Daniel James Duddy, registered person, and the agency administrator as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the agency. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

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

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011	
Area for improvement 1 Ref: Standard 12.7 Stated: First time To be completed by: To commence at the time the agency becomes operational.	<p>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:</p> <ul style="list-style-type: none"> the names and signatures of those attending the training event <p>Response by registered person detailing the actions taken: Angels Recruitment Agency has commenced a log book to record all Training, date ,times. Name of accredited Trainer.Names of staff who complete training. 1. Date. 3.Name of course 2. Printed staff names 3.Signature of staff. 4 Certificates signed by the Trainer on the day and copy retained in staff personal file</p>
Area for improvement 2 Ref: Standard 11.4 Stated: Second time To be completed by: 15 May 2018	<p>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.</p> <p>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 care inspection.</p> <p>Response by registered person detailing the actions taken: Each member of staff have signed Main Contract /terms and conditions of employment. A copy is retained in back of personal staff file.</p>
Area for improvement 3 Ref: Standard 8.11 Stated: Third time To be completed by: From the date of inspection and ongoing	<p>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 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.</p> <p>Response by registered person detailing the actions taken: Mr D. Duddy completes a R.Q.I.A. monitoring form monthly after at time of visit to Hirers/ Service Users were appropriate . Same is retained in Monitoring file of inspection and Annual Audit.</p>

Please ensure this document is completed in full and returned via Web Portal



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