

Announced Inspection Report 28 March 2017



Angels Recruitment Agency Ltd

Type of service: Domiciliary Care Agency Address: 77 Creggan Road, Rosemount, Derry, BT48 9DA

Tel no: 02871377792 Inspector: Audrey Murphy

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced inspection of Angels Recruitment Agency Ltd took place on 28 March 2017 from 10:00 to 14:30.

The inspection sought to assess progress with any issues raised during and since the last inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

Is care safe?

The agency's arrangements for ensuring that care is safe were examined during the inspection and there were a number of areas for improvement identified. These related to recruitment practices, the induction and training of staff and to the provision of staff supervision.

Is care effective?

The delivery of effective care was not consistently evidenced during the inspection and the registered person's failure to maintain records in accordance with the regulation undermined any assurances in relation to the effectiveness of the care provided.

Is care compassionate?

The provision of compassionate care was explored during the inspection and following the inspection during a discussion with a service user. The agency has in place arrangements to ensure that care is provided in a person centred manner and a service user commented positively on their experience of receiving care and support from agency staff.

Is the service well led?

The registered person's system for evaluating the quality of the services provided was found to be inadequate and did not identify the areas for quality improvement that arose from the inspection findings.

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

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and	6	3
recommendations made at this inspection	ľ	3

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mr Daniel James Duddy, Registered Person, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action resulted from the findings of this inspection.

1.2 Actions/enforcement taken following the most recent inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent inspection on 04 September 2015.

2.0 Service details

Registered organisation/registered person: Angels Recruitment Agency Ltd/Mr Daniel James Duddy	Registered manager: Mr John Martin Jackson
Person in charge of the service at the time of inspection: Mr Daniel James Duddy	Date manager registered: 14 December 2015

3.0 Methods/processes

Prior to inspection the following records were analysed

- Previous inspection report
- Previous returned quality improvement plan
- Record of notifiable events for 2015/2016.

During the inspection the inspector met with the registered person and the agency's administrator.

The following records were examined during the inspection:

- Statement of Purpose
- One care record
- Recruitment policy
- Child protection policy
- Complaints policy
- Training records
- Training and development plan
- Induction policy
- · Staff incduction records
- Staff supervision policy
- Staff duty rotas
- Staff recruitment records
- Adult safeguarding policy
- Staff handbook
- Whistleblowing policy.

4.0 The inspection

Angels Recruitment Agency Ltd is domiciliary care agency providing personal care services to individuals residing in the Derry area. At the time of the inspection there were six staff providing personal care services to one service user.

4.2 Review of requirements and recommendations from the last inspection dated 04 September 2015

Last inspection statu	tory requirements	Validation of compliance
Requirement 1 Ref: Regulation 13 Stated: First time	The registered person shall ensure that no domiciliary care worker is supplied by the agency unless— (a) he is of integrity and good character; (b) he has the experience and skills necessary for the work that he is to perform; (c) he is physically and mentally fit for the purposes of the work which he is to perform; and (d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.	Not Met
	Action taken as confirmed during the inspection: The agency's recruitment records did not support compliance with this regulation and there were no recruitment records available for two staff who had been supplied to work with a service user.	
Requirement 2 Ref: Regulation 16 (5) (a) Stated: First 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;	
	Action taken as confirmed during the inspection: The agency's induction records did not support compliance with this regulation. Several staff induction records had not been fully completed and there were no records of induction for two staff.	Not Met
Requirement 3 Ref: Regulation 17	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.	

Stated: First time	 (2) The handbook prepared in accordance with paragraph (1) shall include a statement as to— (a) the conduct expected of members of staff, and disciplinary action which may be taken against them; (b) the role and responsibilities of domiciliary care workers and other staff; (c) record keeping requirements; (d) recruitment procedures; and (e) training and development requirements and opportunities. 	Partially Met
	Action taken as confirmed during the inspection: The agency's staff handbook was examined and requires further development to include information about record keeping requirements and training and development requirements and opportunities.	
Requirement 4 Ref: Regulation 16 (2)	(2) The registered person shall ensure that each employee of the agency—(a) receives training and appraisal which are appropriate to the work he is to perform;	
Stated: First time	Action taken as confirmed during the inspection: The agency's training records were examined and did not support compliance with this regulation. Agency staff had not yet completed an annual appraisal and the inspector was advised that the staff employed by the agency had not been in their positions for one year.	Not Met
Requirement 5 Ref: Regulation 26 (2) (b) Stated: First time	 (2) The registered person shall, if the Regulation and Improvement Authority so requests, provide the Regulation and Improvement Authority with such information and documents as it may require in order to consider the financial viability of the agency, including— (b) a certificate of insurance for the registered provider in respect of liability which may be incurred by him in relation to the agency in respect of death, injury, public liability, damage or other loss. 	Met
	Action taken as confirmed during the inspection: The agency's certificate of employers' liability insurance was submitted to RQIA following the previous inspection and was satisfactory.	

Last inspection recor	nmendations	Validation of compliance
Recommendation 1 Ref: Standard 11.1	The policy and procedures for staff recruitment detail the recruitment process and comply with legislative requirements and DHSSPS guidance.	
Stated: First time	Action taken as confirmed during the inspection: The agency's recruitment policy was examined and was satisfactory.	Met
Recommendation 2 Ref: Standard 9.1 Stated: First time	Policies and procedures as identified in Appendix 1 are in place and in accordance with statutory requirements. This recommendation refers to the development of a policy on safeguarding children.	Met
	Action taken as confirmed during the inspection: A policy on safeguarding children had been developed since the previous inspection and was noted to be satisfactory.	
Recommendation 3 Ref: Standard 12.8 Stated: First time	There is a written training and development plan that is kept under review and is updated at least annually. It reflects the training needs of individual staff and the aims and objectives of the agency.	
	Action taken as confirmed during the inspection: The agency's training and development plan was examined and reflected a range of areas of training that are considered to be 'mandatory'.	Met
Recommendation 4 Ref: Standard 11.4	Staff are issued with a written statement of main terms and conditions prior to employment and no later than thirteen weeks after appointment.	
Stated: First time	Action taken as confirmed during the inspection: The registered person's arrangements for ensuring that staff are issued with a written statement of main terms and conditions were discussed and it was noted that not all staff had received this. It was concerning to note that documents reflecting staff terms and conditions examined during the inspection were out of date and did not reflect the nature of the service being provided, i.e. domiciliary care.	Not Met

Recommendation 5 Ref: Standard 15.4 Stated: First time	The complaints procedure includes a step-by-step guide to making a complaint, the timescales involved, an outline of the role and function of the Regulation and Quality Improvement Authority in dealing with complaints relating to the agency and contact details for the Authority.	Met
	Action taken as confirmed during the inspection: The agency's complaints procedures had been further developed since the previous inspection and were satisfactory.	
Recommendation 6 Ref: Standard 8.11 Stated: First time	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.	Not Met
	Action taken as confirmed during the inspection: The registered person's system for monitoring the quality of service provision was discussed during the inspection and it was conceming to note that a monitoring report had not been completed since the service became registered.	

4.3 Is care safe?

The agency's recruitment practices were examined and it was noted that six staff members are supplied on a regular basis to work with the agency's only service user. The recruitment records for the staff team were incomplete in so far as none of the contained a statement from the registered person or registered manager confirming the physical and mental fitness of the workers. Gaps in employment history were not explored in one member of staff's recruitment process and there were no recruitment records available for two members of staff who had been supplied to work with a service user.

Access NI checks at the enhanced level and appropriate references had been obtained however for the four staff who were being supplied along with photographic identification and confirmation of NISCC registration details.

The registered person's failure to ensure that all staff supplied to work with service users have been assessed appropriately in terms of their suitability and fitness has the potential to place service users at significant risk. The absence of an assurance that staff are physically and mentally fit for the work they are to undertake compromises the safety of the staff member and

the service user. The absence of any records of suitability or fitness of two members of staff is very concerning and provides no assurance of their suitability.

In accordance with RQIA's Enforcement Policy and Procedures, the registered person was advised of RQIA's intention to issue a failure to comply notice in relation to Regulation 13 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007. At a meeting at RQIA offices on 7 April 2017 the registered person provided satisfactory assurances in relation to the recruitment records of two staff who had been supplied to work with a service user. A failure to comply notice was not issued to the registered person however the agency's recruitment practices will remain under review.

The registered person's arrangements for providing staff with an appropriate induction were examined during the inspection and the agency's induction programme outlined a structured induction lasting at least three days. The induction policy however referred to nursing staff, rather than domiciliary care staff.

The staff induction records were examined and it was concerning to note that only one staff member's full induction records were available, the remainder had either no induction record or a record of a partially completed induction.

The absence of a structured three day induction has the potential to place service users and staff at significant harm.

In accordance with RQIA's Enforcement Policy and Procedures, the registered person was advised of RQIA's intention to issue a failure to comply notice in relation to Regulation 16 (5) of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007. At a meeting at RQIA offices on 7 April 2017 the registered person acknowledged that staff had been supplied prior to an appropriate induction being undertaken and a failure to comply notice was issued to the registered person on 11 April 2017.

The agency's training and development plan and training records were examined during the inspection. The agency does not have a system in place to assure the registered manager or registered person that training in the mandatory areas has been obtained by all staff. The agency's training policy identified the following areas as mandatory: first aid, manual handling, safeguarding, infection control, fire safety, medication training, challenging behaviour. It was concerning to note that several staff did not appear to have received training in adult safeguarding or in manual handling and there were no training records available for examination for two staff.

The absence of assurances relating to mandatory training is very concerning, particularly regarding training in manual handling and adult safeguarding. This has the potential to place service users and staff members at risk.

In accordance with RQIA's Enforcement Policy and Procedures, the registered person was advised of RQIA's intention to issue a failure to comply notice in relation to Regulation 16 (2) (a) of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007. At a meeting at RQIA offices on 07 April 2017 the registered person acknowledged that while the training records were not available during the inspection, staff had received training in the mandatory areas. Training records were presented to RQIA during the meeting and updated training for all staff had been scheduled to be completed on 8 April 2017.

A failure to comply notice was not issued to the registered person however the agency's recruitment practices will remain under review.

The agency's arrangements for staff supervision were discussed and a satisfactory policy on supervision was examined. It was noted however that records relating to supervision were not being consistently maintained and several staff did not appear to have had supervision in accordance with the frequency outlined in the agency's policy. The absence of appropriate supervision of staff has the potential to place staff and service users at risk of harm.

Areas for improvement

There were several areas for improvement noted in relation to:

- Recruitment practices
- Staff induction
- Staff training
- Staff supervision.

Number of requirements	3	Number of recommendations	1

4.4 Is care effective?

A range of records was examined during the inspection including a set of care records and records pertaining to the supply of staff. The care records examined included needs and risk assessments and records of evaluations and review of the care being provided. However, there were several records examined that were not dated or signed and it was not possible to determine which elements of the care plan had been discontinued.

It was concerning to note that the registered person has not maintained an alphabetical index of staff (as required in Regulation 21, Schedule 4) and the records of staff supply were incomplete and were not in good order. The duty rotas contained initials only and did not identify the times that staff were allocated to the service user. The absence of well-maintained and accurate records undermines any monitoring or quality assurance in relation to the appropriate supply of staff. This has the potential to place service users at risk and to lead to errors or service failures. These matters were discussed with the registered person at a meeting at RQIA offices on 11 April 2017 and satisfactory assurances were provided in relation to the maintenance of records.

Areas for improvement

There was one area for improvement identified and this relates to the agency's records.

Number of requirements	1	Number of recommendations	0
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4.5 Is care compassionate?

The care records examined contained evidence of a person centred approach to meeting the care and support needs of the service user. It was good to note that agency staff responded flexibly to the needs and preferences of the service user. The inspector was advised that a service user had consented to being contacted after the inspection by the inspector. The

service user spoke very positively about the quality of care they receive from agency staff and highlighted the flexibility of staffing and their good working relationship with staff.

The inspector also spoke with a HSC Trust member of staff who provided very positive feedback in relation to the quality of services provided by the agency and in relation to the person centred nature of care provision.

Areas for improvement

No areas for improvement were identified during the inspection.

	 		
Number of requirements	0	Number of recommendations	0

4.6 Is the service well led?

The inspector was advised that there is no system in place for evaluating the quality of services provided by the agency other than a written return that is sent to the agency by the service user on a monthly basis. Copies of these records were examined and reflected comments relating to satisfaction with services provided. There was no system in place to ensure areas previously identified by RQIA were being addressed or that recruitment practices, staff induction / training / supervision or recording practices were being monitored.

The registered person's failure to put in place a system for evaluating and assessing the quality of service provision has resulted in a range of regulatory breaches. Failure to identify poor recording and recruitment practices and weaknesses in arrangements for staff to have an adequate induction, training and supervision could result in poor outcomes for staff and service users.

In accordance with RQIA's Enforcement Policy and Procedures, the registered person was advised of RQIA's intention to issue a failure to comply notice in relation to Regulation 23 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007. At a meeting at RQIA offices on 07 April 2017 the registered person acknowledged the absence of a robust system for evaluating the quality of services provided and a failure to comply notice was issued to the registered person on 11 April 2017.

Areas for improvement

There was one area for improvement identified and this relates to the registered person's arrangements for evaluating the quality of the services provided.

Number of requirements 1	Number of recommendations	0
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5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mr Daniel James Duddy, Registered Person, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of

the registered provider to ensure that all requirements and recommendations contained 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.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Domiciliary Care Agencies Minimum Standards, 2011. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions to be taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to RQIA's office (non-paperlite) for assessment by the inspector.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Statutory requirements

Requirement 1

Ref: Regulation 13

Stated: Second time

To be completed by: Immediate and ongoing

The registered person shall ensure that no domiciliary care worker is supplied by the agency

unless-

- (a) he is of integrity and good character;
- (b) he has the experience and skills necessary for the work that he is to perform;
- (c) he is physically and mentally fit for the purposes of the work which he is to perform; and
- (d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.

Response by registered provider detailing the actions taken:

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to report.

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Requirement 2

Ref: Regulation 16 (5) (a) (b)

Stated: Second time

To be completed by:
9 May 2017
(in accordance with the timescale outlined in Failure to Comply Notice:
FTC/DCA/020113/2017
-18/01)

- (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 available to be consulted while the new worker is on duty; and
- (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.

Response by registered provider detailing the actions taken:

3 day Induction up dotted and improved Conserv agreed each induction by Service User

Requirement 3

Ref: Regulation 21

Stated: First time

To be completed by: Immediate and ongoing 21.—(1) The registered person shall ensure that the records specified in Schedule 4 are

maintained, and that they are-

- (a) kept up to date, in good order and in a secure manner;
- (b) retained for a period of not less than eight years beginning on the date of the last entry; and
- (c) at all times available for inspection at the agency premises by any person authorized by the Regulation and Improvement Authority.

Response by registered provider detailing the actions taken:

A. Kept in locked Living Cebanet.

B. Maintaned & per Deta Robecton

Edig.

C. yes.

Requirement 4

Ref: Regulation 17

Stated: Second time

To be completed by: 20 June 2017

- 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.
- (2) The handbook prepared in accordance with paragraph (1) shall. include a statement as to-
- (a) the conduct expected of members of staff, and disciplinary action which may be taken against them:
- (b) the role and responsibilities of domiciliary care workers and other staff:
- (c) record keeping requirements:
- (d) recruitment procedures; and
- (e) training and development requirements and opportunities

Response by registered provider detailing the actions taken:

hand book up doted. Job discripton up deted

Requirement 5

Ref: Regulation 16 (2) (a)1

(2) The registered person shall ensure that each employee of the

(a) receives training and appraisal which are appropriate to the work he is to perform;

agency-

Stated: Second time

Response by registered provider detailing the actions taken:

To be completed by: 20 June 2017

Supersion, Approximent

Requirement 6

Ref: Regulation 23

Stated: First time

To be completed by: 6 June 2017 (in accordance with the timescale outlined in Failure to Comply Notice: FTC/DCA/020113/2017 -18/02)

- 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.
- (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
- (a) arranges the provision of good quality services for service users;
- (b) takes the views of service users and their representatives into account in deciding-
- (i) what services to offer to them, and
- (ii) the manner in which such services are to be provided; and
- (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.
- (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.
- (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.
- (5) The system referred to in paragraph (1) shall provide for consultation with service users and their representatives.

	Response by registered provider detailing the actions taken:
	Response by registered provider detailing the actions taken: Angels Recurried Agency has Co Monthly Monthship Usip! - Monday Quelity in a Domer liainy Case Agency Guidance + Jams via R.Q.I.A Web site.
Recommendations Recommendation 1 Ref: Standard 13.3 Stated: First time	Staff have recorded formal supervision meetings in accordance with the procedures. Response by registered provider detailing the actions taken:
To be completed by: Immediate and ongoing	Du skofy have regular Specimision (Same recorded d kept in skoff files.

Recommendation 2

Ref: Standard 11.4

Stated: Second time

To be completed by: 20 June 2017

Staff are issued with a written statement of main terms and conditions prior to employment and no later than thirteen weeks after appointment.

Response by registered provider detailing the actions taken:

Teems / Condutionie Convincer et Employment The description

Recommendation 3

Ref: Standard 8.11

Stated: Second time

To be completed by: 6 June 2017

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.

Response by registered provider detailing the actions taken:

Angels Rechart new Agency
has commenced Monthly

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Domiciliais Cae Agency: Guidance 4

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