

# Unannounced Care Inspection Report 25 March 2019



## **The Gateway Social Investment Ltd T/A Flourish Care**

**Type of Service: Domiciliary Care Agency**

**Address: Site 9, Unit 6, Pennybridge Industrial Estate, Ballymena,  
Antrim, BT42 3HB**

**Tel No: 028 256 65864**

**Inspector: Jim McBride**

**User Consultation Officer: Clair Mc Connell (UCO)**

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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**

The Gateway Social Investment Ltd/ TA Flourish Care Ltd currently offers a seniors care and companionship service, available 365 days per year, which provides a range of services to enable adults to continue to live in their own home. This service takes into consideration all existing circumstances whether the client lives alone, are part of a married couple or if they live with other family members. They endeavor to do whatever it takes to ensure that clients are able to continue living independently in their own home, safely. Flourish Ltd also offers provides a wide range of personal care.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> The Gateway Social Investment Ltd T/A Flourish Care <b>Responsible Individual:</b> Norma McKinney	<b>Registered Manager:</b> Norma McKinney
<b>Person in charge at the time of inspection:</b> Norma McKinney	<b>Date manager registered:</b> 19 April 2018

### 4.0 Inspection summary

An announced inspection took place on 25 March 2019 from 08.50 to 12.00.

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.

There were examples of good practice found throughout the inspection in relation to staff training, adult safeguarding and risk management. Care records were well maintained and informative. Communication between service users, agency staff and other key stakeholders was well maintained. Quality monitoring within the agency was comprehensive and highlighted reliable contact between the agency and service users. The culture and ethos of care in the agency promoted treating service users with dignity and respect whilst respecting individual choices. There were good governance and management arrangements in relation to the day to day operations of the service.

As part of the inspection the User Consultation Officer (UCO) spoke with three relatives, by telephone, on 26 March 2019 to obtain their views of the service. The service users receive block calls from the agency to assist with personal care, meal preparation and housework.

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.

### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with, Norma Mc Kinney registered manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

## 4.2 Action/enforcement taken following the most recent care inspection dated 13 March 2018.

No further actions were required to be taken following the most recent inspection on 13 March 2018.

## 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
- all correspondence received by RQIA since the previous inspection

The following records were examined during the inspection:

- six staff recruitment records
- staff induction and supervision records
- staff training records pertaining to :
  - safeguarding
  - fire safety
  - health and safety
  - infection control
  - moving and handling
  - medication
  - confidentiality
  - policy reading
  - data protection
  - challenging behaviour
  - records confirming registration of staff with the Northern Ireland Social Care Council (NISCC)
- six service user records regarding review, assessment, care planning and quality monitoring
- RQIA registration certificate
- complaints record
- Service user guide (2019)
- Statement of purpose (2019)
- annual quality assurance report (2019)
- quality monitoring contact records
- quality monitoring home visit records
- User Consultation report (UCO)

At the conclusion of the inspection a poster was left with the manager to encourage staff to contact RQIA via Survey Monkey to provide their views on the quality of this service. At the time of writing this report three staff responses had been returned to RQIA via Survey Monkey.

Staff survey results show that staff members were satisfied or very satisfied when asked the following:

- Do you feel satisfied that service users, are safe and protected from harm?
- Do you feel satisfied that all service users are treated with compassion?
- Do you feel satisfied that care delivered to service users is effective?
- Do you feel the service is managed well?

### Survey Comments:

- "A well-run company and we as staff go above and beyond."
- "I love my job."
- "Love my job."

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

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 13 March 2018

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

### 6.2 Review of areas for improvement from the last care inspection dated 13 March 2018

There were no areas for improvement made as a result of the last care inspection.

## 6.3 Inspection findings

### 6.4 Is care safe?

**Avoiding and preventing harm to service users from the care, treatment and support that is intended to help them.**

The UCO was advised by all of the relatives interviewed that there were no concerns regarding the safety of care being provided by Flourish Care. Care is being provided by teams of consistent carers so they are familiar with the care required by the service users. No issues regarding the carers' training were raised with the UCO by the relatives; examples given included manual handling, management of medication and working with people with dementia. All of the relatives interviewed confirmed that they could approach the carers and office staff if they had any concerns.

Examples of some of the comments made by the relatives are listed below:

- "They're really good."
- "Have got to know XXX."
- "Two good girls. They're very understanding as XXX is hard to work with."

At the time of the inspection, the agency had a manager in post, who managed the agency with the support of a team of 13 care staff. The agency's staffing arrangements were discussed and the manager advised that they felt there were sufficient staff employed, to meet the current level of care and support provision. It was noted that individual service times were in place to meet the needs of service users.

A review of recruitment records indicated that all pre-employment information had been completed and verified satisfactorily. There was a system in place to ensure that all staff were registered with The Northern Ireland Social Care Council (NISCC) and to identify when staff are due to renew their registrations.

A review of records confirmed that all staff had received a comprehensive structured induction programme in line with the timescales outlined within the regulations. It was good to note that staff inductions were in line with the (NISCC) induction Standards. There were systems in place to monitor staff performance and to ensure that they received support and guidance. Review of records confirmed that this included mentoring through formal supervision and appraisal meetings.

The manager advised that relevant staff had received a number of training sessions. A review of six staff training records evidenced that staff completed a post-training evaluation test to ensure that any learning had been embedded. The agency facilitates regular group staff meetings and some of the topics discussed include:

- training
- client updates
- time management
- policies and procedures
- complaints
- safeguarding
- confidentiality

Training was monitored by the manager, to ensure all staff were compliant with the mandatory training requirements.

Discussion with the manager evidenced that any potential safeguarding incidents would be managed appropriately. The role of the Adult Safeguarding Champion (ASC) was discussed during the inspection and the inspector was advised that the registered manager holds this responsibility and ensures that the agency's safeguarding activity is in accordance with the regional policy and procedures.

A review of the records identified that accidents or incidents were managed in accordance with local protocols. Oversight of the accidents and incidents has been included in the quality monitoring processes.

Records reviewed confirmed that risk assessments were completed for each service user and were reviewed on a regular basis.

The inspector observed the records of management arrangements within the agency, in respect of archived records, and concluded that the current arrangements were appropriate to ensure that data protection measures were being maintained.

### **Areas of good practice**

There were examples of good practice found throughout the inspection in relation to staff recruitment induction and training, adult safeguarding, record keeping and risk management.

### **Areas for improvement**

No areas for improvement were identified in this domain during the inspection.

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of areas for improvement</b>	0	0

## 6.5 Is care effective?

**The right care, at the right time in the right place with the best outcome.**

The UCO was informed by the relatives interviewed that there were no concerns regarding the carers' timekeeping, missed calls or that care has been rushed. Care is being provided by teams of carers who are familiar with the needs of the service users.

No issues regarding communication between the service users, relatives and staff from Flourish Care were raised with the UCO; however only one relative was able to confirm that home visits or phone calls have taken place to obtain their views on the service. Examples of some of the comments made by the relatives are listed below:

- "Couldn't recommend them highly enough."
- "It gives me peace of mind that someone calls regularly with XXX and will let me know if anything is wrong."

The full nature and range of service provision was detailed in the Statement of Purpose and Service User Guides (2019). The agency's arrangements for appropriately assessing and meeting the needs of the service users were examined during the inspection.

The inspector examined six service users' care records and found these to be detailed and reflective of the service users' needs. Service User Agreements were consistently provided to service users within the required timescale.

There were quality monitoring systems in place to audit and review the effectiveness and quality of care delivered to the service users. The review of the daily records from the service users' homes identified that they were well maintained.

Quality monitoring reports indicated consultation with a range of service users and relatives. There was evidence of effective communication with the service users and their representatives as required.

### Comments recorded in the Quality Monitoring reports included:

- "I'm contented with the care."
- "Everything is good."
- "All girls go above and beyond."
- "They are helpful and encourage independence."
- "Carers are helpful, friendly and supportive."
- "My \*\*\* is happy with the care."
- "The service provided is good."
- "The client is at the centre of what they do."
- "Carers are friendly and ask before carrying out tasks."

### Areas of good practice

There were examples of good practice found in relation to the review of care needs and the agency's engagement with the service users.

### Areas for improvement

No areas for improvement were identified in this domain during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

## 6.6 Is care compassionate?

**Service users are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.**

All of the relatives interviewed by the UCO felt that care was compassionate. The relatives advised that carers treat them with dignity and respect, and care has not been rushed. Service users, as far as possible, are given their choice in regards to meals and personal care. One relative was able to confirm that they have been contacted by the agency to provide feedback on the care.

Examples of some of the comments made by the relatives are listed below:

- “XXX looks forward to them coming.”
- “Loving, kind and caring.”

The agency carried out service user quality monitoring on an ongoing basis through home visits and monitoring visits which specifically ascertained and included the views of the service users and their representatives. Records reviewed during inspection support the ongoing review of service users’ needs.

Observation of staff practice carried out within service users’ homes on a regular basis was confirmed during inspection through records viewed in the agency office. Records reviewed by the inspector highlighted no concerns regarding staff practice during spot checks and this was confirmed by the manager. The inspector noted some of the comments made by the monitoring officer during checks:

- “Good communication between staff and client.”
- “Care given as per care plan.”
- “Client was offered choice.”
- “Good warm rapport.”

A review of the quality monitoring reports evidenced that the staff treated service users with respect and dignity.

The review of the annual quality assurance report completed in (2019) evidenced that there was a high satisfaction rate in relation to the care and support provided. The majority of respondents indicated that they were happy with:

- The quality of service provided by Flourish Care
- Carer’s punctuality
- Carers staying their allocated time
- Carers always treat you with dignity and respect
- Care workers are friendly and polite
- How to contact the office with any queries
- Office staff approachable and helpful
- How to make a complaint

### **Some of the comments received:**

- ‘Very happy with the care provided on a daily basis’
- ‘The girls look after me very well and are flexible and accommodating’



- ‘I know I can go out anytime and not worry about what is happening at home. I know XXXXX is in good hands and being care for very well until I return. XXXXX very helpful at changing times if I have a situation to go to, thank you so much’
- ‘We found them extremely helpful when putting together a package for a respite weekend’
- ‘Would recommend this service to anyone all staff are polite and friendly’
- ‘They always try to accommodate any extra hours needed’
- ‘I have found Flourish Care to be a very excellent caring organisation putting the care of their clients first. We would have no hesitation in recommending their services’
- ‘The office staff, in particular, \*\*\*\*\* are always available and very helpful with accommodation and changes’
- ‘Everything depends upon the care, love and commitment of the carers. Each one would seem to possess the above qualities and display them in all aspects of their caring duties’
- ‘The girls who work for Flourish Care are a pleasure to have in your home. They work hard and are friendly and willing to help in any way they can’
- ‘Care time and patience given lovingly to our relative. Extended to ourselves who sometimes need it (a little) as well, thank you girls!’
- ‘Excellent service – couldn’t do without the breaks now’
- ‘They are flexible and able to meet our needs’
- ‘I have always found the service to be of the highest quality’
- ‘The ladies are always very friendly and helpful’

**Areas of good practice**

There were examples of good practice found throughout the inspection in relation to the provision of compassionate care and the involvement of service users. Discussions with the manager and compliments reviewed supported good practice in the area of compassionate care.

**Areas for improvement**

No areas for improvement were identified in this domain during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

## 6.7 Is the service well led?

**Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.**

All of the relatives interviewed by the UCO confirmed that they are aware of whom they should contact if they have any concerns regarding the service. No concerns regarding the management of the agency were raised during the interviews.

The organisational and management structure of the agency were outlined in the Statement of Purpose (2019), it details lines of accountability. Discussion the manager indicated she understood the organisational structure within the agency and her role and responsibilities.

The agency had a range of policies and procedures in place that were reviewed in line with the minimum standards:

### **Policies reviewed:**

- Confidentiality (2017)
- Safeguarding (2018)
- Complaints (2017)
- Supervision (2017)
- Risk management (2017)
- Incident reporting (2017)
- Whistleblowing (2017)
- Induction (2018)

There was a process in place to ensure that complaints were managed in line with the legislation and minimum standards. The inspector acknowledged that there were no complaints received by the agency since the Pre-registration inspection of (2018).

The inspector discussed arrangements in place that relate to the equality of opportunity for service users and the importance of the staff being aware of equality legislation whilst recognising and responding to the diverse needs of service users. The agency's position on promoting equality and diversity amongst service users was included in the Service User Guide (2019).

There was a process in place to ensure that quality monitoring visits were completed in accordance with Standard 8.11 of The Domiciliary Care Agencies Minimum Standards, 2011.

The inspector noted that the agency completed a staff quality audit in which staff were asked to comment on the following. This area of good practice is to be commended:

- Do you receive rotas in a timely manner?
- Do you feel we give enough time to travel between calls?
- Do you have good access to help and support?
- Do you receive regular supervisions?
- Do you have regular staff meetings and feel the content is relevant?
- Do you have good access to Personal protective Equipment (PPE)?
- Are you aware of the training that we offer?
- Is there any specific training you feel we need?
- How well do you feel our communication is?

- Are all queries dealt with effectively and promptly?
- How well do we alleviate people’s loneliness and isolation?
- Do you feel staff are valued by management?

**Some of the comments received from staff:**

- ‘Management values and promotes staff input with regards to work issues and ideas’
- ‘Always person centred and encouraged to do as much as possible where safe and able to do so to maintain as much independence’
- ‘Our training emphasises independence and management, staff meetings help us to discuss and ensure everyone understands how to promote and deliver the best level of independence to each client’
- ‘Companionship is our main goal’
- ‘I feel that’s how we differentiate from other carers as companionship is one of the main services we offer for our clients’
- ‘Very aware of needs of clients, person centred care and always looking for ways to improve the service’
- ‘Very caring of the clients needs’
- ‘Very good, there is always someone to contact’
- ‘Very effective’
- ‘We are well informed and kept up to date on all work-related matters’
- ‘Aware of training and kept informed for all training’
- ‘The office has an open door policy if you have any concerns a good support system in the office’

The registration certificate was up to date and displayed appropriately.

**Areas of good practice**

There were examples of good practice found throughout the inspection in relation to the governance and management arrangements. There was evidence of good working relationships with key stakeholders.

**Areas for improvement**

No areas for improvement were identified in this domain during the inspection.

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of areas for improvement</b>	0	0

**7.0 Quality improvement plan**

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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