



Announced Enforcement Care Inspection Report

08 May 2018



TW Care Services Ltd

Type of Service: Domiciliary Care Agency
Address: 36A Warden Street, Ballymena, BT43 7DT
Tel No: 07450957712
Inspector: Aveen Donnelly

www.rqia.org.uk

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

TW Care Services Ltd is a domiciliary care agency which provides personal care and live-in support to people living in the Ballymena area.

3.0 Service details

| | |
|---|---|
| Organisation/Registered Provider: TW Care Services Ltd | Registered Manager: Ms Olipah Gahadza |
| Responsible Individual: Ms Olipah Gahadza | |
| Person in charge at the time of inspection: Ms Olipah Gahadza | Date manager registered: 24 August 2016 |

4.0 Inspection summary

An announced inspection took place on 08 May 2018 09.30 to 12.00 hours.

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

The inspection sought to assess the level of compliance achieved in relation to a Failure to Comply (FTC) Notice. The areas identified for improvement and compliance with the regulation were in relation to recruitment processes. The date of compliance with the notice was 7 May 2018.

The following FTC Notice was issued by RQIA:

FTC ref: FTC/DCA_CON/020203/2017-18/01 issued on 28 March 2018.

Evidence was available to validate compliance with the Failure to Comply Notice.

The inspection also assessed progress with any areas for improvement identified during and since the last care inspection.

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 |
|--|-------------|-----------|
| Total number of areas for improvement | 0 | 0 |

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

Further enforcement action did not result from the findings of this inspection.

5.0 How we inspect

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

- the requirements as indicated in the failure to comply notice **FTC Ref: FTC/DCA_CON/020203/2017-18/01**
- the registration status of the agency
- written and verbal communication received since the previous care inspection
- the previous care inspection report from the inspection dated 07 March 2018.

The following methods and processes used in this inspection include the following:

- a discussion with the manager
- one completed staff recruitment record and two records of staff who were in the process of being recruited
- review of a sample of staff duty rotas
- induction records
- supervision and appraisal records
- training records
- records relating to observation of staff practice
- monthly quality monitoring reports in accordance with Regulation 23 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007
- an alphabetical index of service users
- an alphabetical index of domiciliary care workers

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

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

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 7 March 2018

The most recent inspection of the agency was an announced care inspection. The inspection focused on the actions contained within the failure to comply notice issued on 28 March 2018; and also validated the areas for improvement made at the previous inspection dated 07 March 2018.

6.2 Review of areas for improvement from the last care inspection dated 07 March 2018

| 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 |
| Area for improvement 1 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; | Met |
| | Action taken as confirmed during the inspection: Discussion with the manager and a review of records confirmed that the induction process had been reviewed, following the last inspection. There was a clear process in place to ensure that new staff received a comprehensive induction, in line with regulation and minimum standards. | |
| Area for improvement 2 Ref: Regulation 21 (1) (c) Stated: First time | The registered person shall ensure that the records specified in Schedule 4 are maintained, and that they are— (c) at all times available for inspection at the agency premises by any person authorized by the Regulation and Improvement Authority. | Met |
| | Action taken as confirmed during the inspection: The inspector was satisfied that all requested records were available on the day of the inspection. | |
| Area for improvement 3 Ref: Regulation 23 (1) Stated: First time | The registered person shall establish and maintain a system for evaluating the quality of the services which the agency arranges to be provided. | Met |
| | Action taken as confirmed during the inspection: The agency had submitted the monthly quality monitoring reports to RQIA, from the date of the last inspection. The inspector advised that the reports should continue to be submitted | |

| | | |
|--|---|---------------------------------|
| | until further notice. | |
| Area for improvement 4 Ref: Regulation 11 (1) Stated: First time | <p>The registered provider and the registered manager shall, having regard to the size of the agency, the statement of purpose and the number and needs of the service users, carry on or (as the case may be) manage the agency with sufficient care, competence and skill.</p> <p>Action taken as confirmed during the inspection: The inspector was satisfied that improvements had been made in relation to the governance and management arrangements of the agency. There were improvements noted in quality monitoring, staff rostering, induction, supervision and appraisals, training and in relation to the manager's own knowledge of safe recruitment processes.</p> | Met |
| Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011 | | Validation of compliance |
| Area for improvement 1 Ref: Standard 16.3 Stated: Second time | <p>The registered person promotes safe and healthy working practices through the provision of information, training, supervision and monitoring of staff.</p> <p>Ref: Section 6.2</p> <p>Action taken as confirmed during the inspection: The inspector reviewed records, which confirmed that staff had received supervision and training. Records also evidenced regular spot checks in relation to the observation of staff practice; and this was monitored as part of the monthly quality monitoring process.</p> | Met |
| Area for improvement 2 Ref: Standard 4.2 Stated: First time | <p>The agreement between the service user and the service provider specifies:</p> <ul style="list-style-type: none"> • the duration if known and the arrival and departure times of staff • the arrangements for reviewing the agreement <p>Action taken as confirmed during the inspection: Discussion with the manager confirmed that the duration of calls; and the arrival and</p> | Met |

| | | |
|--|--|--|
| | <p>departure times of staff had been monitored by the manager and that there had been communication with the service users' representatives in relation to any proposed changes to the service user's agreement. The manager amended one service user agreement on the day of the inspection, to ensure compliance with this area for improvement.</p> | |
|--|--|--|

6.3 Inspection findings

FTC Ref: FTC/DCA_CON/020203/2017-18/01

Notice of failure to comply with regulation 13 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation 13. – Schedule 3

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.*

In relation to this notice the following three actions were required to comply with this regulation.

The registered person must ensure that, at all times, staff are recruited and employed in accordance with statutory legislation and mandatory requirements. This includes the receipt of a satisfactory Access NI Enhanced Disclosure check prior to the commencement of employment. Records must be kept of all documentation relating to the recruitment process.

The registered person must implement robust monitoring systems to ensure that the recruitment process is compliant with statutory legislation and mandatory requirements.

The registered person must ensure that all staff involved in the recruitment process receive training or refresher training in recruitment and selection.

The three actions were reviewed as part of this inspection.

A review of one staff recruitment record and records for two staff who were in the process of being recruited confirmed that satisfactory pre-employment checks had been undertaken. A robust monitoring system had been implemented to ensure that the recruitment processes were compliant with statutory legislation and mandatory requirements. The inspector was also satisfied that the manager had completed training in respect of safe recruitment and selection practices.

Areas for improvement

No areas for improvement were identified during the inspection.

| | Regulations | Standards |
|--|-------------|-----------|
| Number of areas for improvement | 0 | 0 |

6.4 Conclusion

Evidence was available to validate compliance with the Failure to Comply Notice and the Quality Improvement Plan.

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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