

## Unannounced Care Follow Up Inspection Report 29 May 2019



# Care Plus (N.I.) Ltd

Type of Service: Domiciliary Care Agency Address: 3a Bankmore Business Park, Bankmore Road, Omagh, BT79 0BE Tel No: 028 82 249724 Inspector: Marie McCann

www.rqia.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 provider from their responsibility for maintaining compliance with legislation, standards and best practice.

#### 1.0 What we look for



## 2.0 Profile of service

Care Plus (N.I.) Ltd is a domiciliary care agency located in Omagh. The agency supplies staff to individuals living in the Omagh and surrounding areas. Service users have a range of needs related to conditions such as dementia, learning disability, physical disability and general frailty relating to their age.

The agency currently employs 50 domiciliary care workers to provide care and support to 154 individuals residing in their own homes; the care is commissioned by the Western Health and Social Care Trust (WHSCT).

## 3.0 Service details

Organisation/Registered Provider: Care Plus (N.I.) Ltd Responsible Individual: Jacqueline Mary Maguire	Registered Manager: Janette Rolston
Person in charge at the time of inspection:	Date manager registered:
Janette Rolston	2 January 2019

#### 4.0 Inspection summary

An unannounced inspection took place on 29 May 2019 from 09.15 to 12.10.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order. The Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

The inspection was 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 the agency's recruitment procedures.

The inspection was undertaken following receipt of information received by RQIA from an anonymous source in relation to staff recruitment and induction processes.

It is not the remit of RQIA to investigate complaints/whistleblowing/adult safeguarding concerns made by or on behalf of individuals, as this is the responsibility of the registered providers and the commissioners of care. However, if RQIA is notified of a potential breach of regulations or minimum standards, it will review the matter and take appropriate action as required; this may include an inspection of the agency.

The following areas were examined during the inspection:

- staffing lists
- induction records
- recruitment records

One area for improvement was identified during the inspection in regards to the induction process.

The inspector spoke with three care workers during the inspection who stated:

- "I love working for the company."
- "There is always someone there if you need them."
- "My induction was good, a lot was covered."
- "I have no concerns at all,"
- "You get update training every year."

- "They are very helpful with getting registered with Northern Ireland Social Care Council (NISCC)."
- "I'm happy with the support I receive."

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	1	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with the manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

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 agency was reviewed. This included the following:

- information recently received anonymously by RQIA
- previous pre registration inspection report dated 29 November 2018
- any correspondence or information received by RQIA since the previous inspection

The following records were examined during the inspection:

- recruitment records relating to four staff
- induction records relating to four staff
- records relating to staff registration with the (NISCC)
- alphabetical index of staff

During the inspection the inspector met with the registered manager, office manager and one care worker. In addition the inspector spoke to two care workers via telephone.

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

The inspector would like to thank the manager and staff for their support and co-operation throughout the inspection process.

#### 6.0 The inspection

#### 6.1 Review of areas for improvement from the most recent inspection dated 29 November 2018

The most recent inspection of the agency was an announced care pre-registration inspection. No areas for improvement were identified.

#### 6.2 Inspection findings

During the inspection the inspector reviewed the agency's systems in place to avoid and prevent harm to service users; this included a review of the agency's staff recruitment procedures.

Discussions with the manager evidenced that she was knowledgeable in relation to safe recruitment practices. The manager confirmed that staff are not permitted to work in the homes of service users until all required checks have been satisfactorily completed in line with the required regulations.

During the inspection the inspector reviewed the individual staff personnel records relating to four staff employed by the agency. The inspector noted that the agency's records relating to staff recruitment and induction were maintained in an organised manner and retained securely within the agency's office. The agency maintains a checklist detailing dates that relevant recruitment information has been requested and received. Documentation viewed included details of the agency's recruitment processes and evidence of all pre-employment checks completed that included appropriate Access NI checks and employment references. In addition, details of staff registration with NISCC were also evidenced.

A record of the induction programme provided to staff; was also retained; this evidenced that staff received training in addition to mandatory training requirements to ensure they had the necessary knowledge and skills to meet the needs of service users. This included training in areas such as, dementia awareness, communication and management of behaviours which challenge. It was good to note that staff completed an evaluation worksheet for each component of the induction training to evidence learning and understanding of training received.

A review of the agency's electronic system provided details of dates in which staff shadowed experienced staff for two of the four staff. The manager advised that two staff had not received shadowing in addition to the induction training programme as they had a number of years' experience in their previous employment. The inspector advised that all new staff should have access to shadowing as part of their induction process regardless of previous employment history. An area for improvement is made in this regard.

Discussions with staff on the day of inspection indicated that they had the appropriate knowledge and skills to fulfil the requirements of their job roles. They also spoke positively about the support they receive to enable them to provide safe and effective care to service users.

It was noted that the fitness of practice statement in accordance with regulation 13. (d) Schedule 3 had been signed by someone other than the registered person or the registered manager; the manager was informed post inspection that the agency should clearly record that this responsibility has been delegated to the office manager or senior co-ordinator for the agency.

Documentation viewed and discussions with the manager and staff indicated that the organisation's recruitment systems are effective for ensuring that staff are not provided for work until required checks have been satisfactorily completed.

### Areas of good practice

Areas of good practice were identified in relation to the agency's staff recruitment processes.

#### Areas for improvement

One area for improvement was identified during the inspection in regards to the induction process.

	Regulations	Standards
Total number of areas for improvement	1	0

#### 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with the manager, 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 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
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Action required to ensure compliance with The Demisilian Core Anonsice Demulations				
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007				
Area for improvement 1 Ref: Regulation 16 (5)(b)(i)	The registered person shall ensure that during induction training the new care worker is not supplied to a service user unless accompanied by another domiciliary care worker who is a suitably qualified and competent person.			
Stated: First time	Ref: 6.2			
<b>To be completed by:</b> Immediate and ongoing from the date of inspection	<b>Response by registered person detailing the actions taken:</b> This was an one off were experience carers came to work for Care Plus and was familiar with service users and did not carry out shadowing. We will ensure all staff experienced or not going forth from now is not supplied to a service user unless accompanied by another care worker who is suitably trained and competent before commencing employment.			

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





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