

# Announced Care Inspection Report 21 March 2019



## Unique Homecare NI Ltd

**Type of Service: Domiciliary Care Agency**  
**Address: 38 Ravara Road, Ballygowan, Newtownards,  
BT23 6NW**  
**Tel No: 028 9752 8855**  
**Inspector: Jim McBride**  
**User Consultation Officer: Clair McConnell (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

Unique Home Care NI Ltd Domiciliary Agency endeavors to provide a high level of person centered care in a safe, domestic environment. Their objective is to provide care in line with individual care plans to enable service users to continue to live supported in their own homes. The care plans take account of individual physical, psychological, social, and, spiritual, needs and ensure family and community links are maintained where possible.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Unique Homecare NI Ltd	<b>Registered Manager:</b> Debra Walton
<b>Responsible Individual:</b> Debra Walton	
<b>Person in charge at the time of inspection:</b> Debra Walton	<b>Date manager registered:</b> 4 March 2018

### 4.0 Inspection summary

An announced inspection took place on 21 March 2019 from 09.30 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.

Area for improvement: The agency should consolidate their systems of quality monitoring relating to Regulation 23 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

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>	1	0

Details of the Quality Improvement Plan (QIP) were discussed with Debra Walton registered 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.

#### **4.2 Action/enforcement taken following the most recent care inspection dated 6 March 2018**

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

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

The following records were examined during the inspection:

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• six staff recruitment records</li> <li>• staff induction and supervision records</li> <li>• staff training records pertaining to :             <ul style="list-style-type: none"> <li>• safeguarding</li> <li>• fire safety</li> <li>• infection control</li> <li>• GDPR</li> <li>• food hygiene</li> <li>• medication</li> </ul> </li> <li>• records confirming registration of staff with the Northern Ireland Social Care Council (NISCC)</li> <li>• six service user records regarding review, assessment, care planning and quality monitoring</li> </ul> | <ul style="list-style-type: none"> <li>• RQIA registration certificate</li> <li>• complaints record</li> <li>• Service User Guide (2018)</li> <li>• Statement of Purpose (2018)</li> <li>• annual quality assurance report (2018)</li> <li>• quality monitoring telephone contact records</li> <li>• quality monitoring home visit records</li> <li>• User Consultation Officer (UCO) report</li> </ul> |
|---|---|

As part of the inspection the UCO spoke with seven relatives, by telephone, on 25 and 26 March 2019 to obtain their views of the service. Two of the relatives were unable to complete the interview but confirmed satisfaction with the service. The service users interviewed are receiving assistance with the following:

- Management of medication
- Personal care
- Meals

- Sitting service
- Housework

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 fourteen 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:**

- “Loving the new job and the fact that you really get to know the clients with the luxury of most calls being no less than an hour each, real quality time”.
- “I am proud to be a part of Unique. I have the opportunity to provide a high standard of care with the best support network possible”.
- “Excellent company to work for, very well run”.
- “Amazing company who actually care about providing good quality, high standard care.”
- “Excellent company to work for and the wellbeing of all clients is our top focus.”

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 6 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 6 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 the majority of the relatives interviewed that there were no concerns regarding the safety of care being provided by Unique Homecare. Care is being provided by a small team and new carers are introduced to the service user; this was felt to be important both in terms of the service user's security and that the new carer had knowledge of the required care.

All of the relatives interviewed confirmed that they could approach the registered manager if they had any concerns. Examples of some of the comments made by the relatives are listed below:

- "More than happy."
- "Gives me peace of mind that the carers are looking after XXX and will contact me if necessary."
- "First class."

At the time of the inspection, the agency had a manager in post, who managed the agency with the support of a team of 20 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.

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 Northern Ireland Social Care Council (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 additional training in medication support. 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 inspector noted some of the comments made by staff following training evaluation:

- "I'm more aware of medication issues."
- "I will now have a better understanding of infection control."

- “Training will help with my practice.”
- “Training was very enjoyable.”

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

Discussion with the manager evidenced that 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 management of records 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.

	Regulations	Standards
<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 small teams and service users are usually introduced to new carers by a regular carer or the registered manager.

No issues regarding communication between the service users, relatives and staff from Unique Homecare were raised with the UCO. The relatives advised that home visits and 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:

- “Continuity is great. Have got to know them.”
- “Would be lost without them.”
- “Absolutely fantastic.”

The full nature and range of service provision was detailed in the Statement of Purpose and Service User Guides (2018). 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 returned 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:**

- “The service is working extremely well.”
- “All is going in the right direction.”
- “We are very happy with the care we get.”
- “Very good girls.”
- “We could not do without them.”
- “No problems at all.”
- “The very best bunch of girls.”

#### **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**

The agency should consolidate their systems of quality monitoring relating to Regulation 23.

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of areas for improvement</b>	1	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 the service users with dignity and respect, and care has not been rushed. Views of service users and relatives have been sought through home visits and phone calls to ensure satisfaction with the care that has been provided by Unique Homecare. Examples of some of the comments made by the relatives are listed below:

- “Very thoughtful and caring.”
- “Would recommend them.”
- “Couldn’t speak more highly about them.”

The agency carried out service user quality monitoring on an ongoing basis through home visits, telephone contact 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.

A review of the quality monitoring reports evidenced that the staff treated service users with respect and dignity. A review of the compliments records available during the inspection included praise for the staff. The inspector noted some of the compliments received:

- “Thanks for all the help.”
- “Care in my home is wonderful.”
- “Thanks for all you do.”
- “I could not have managed without you.”

The review of the annual quality assurance report completed in (2018) evidenced that there was a high satisfaction rate in relation to the care and support provided. The majority of respondents indicated satisfaction relating to:

- Were happy with the service
- Staff provided effective care
- Staff are professional and well trained
- Family members needs are being met
- Would recommend this service.

## 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; it details lines of accountability. Discussion with 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, the following sample were reviewed in line with the minimum standards:

- Confidentiality (2018)
- Safeguarding (2018)
- Complaints (2018)
- Supervision (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 6 March 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 (2018).

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 suggested that the agency commence using the RQIA template to support all other quality monitoring processes, which were already in place. This will enable the agency to have improved management oversight of the processes in place.

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.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	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 Debra Walton, registered 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/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.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007</b>	
<p><b>Area for improvement 1</b>  <b>Ref:</b> Regulation 23  <b>Stated:</b> First time  <b>To be completed by:</b>            From inspection date.</p>	<p>The agency should consolidate their already wide ranging quality monitoring systems into the Regulation 23 quality monitoring visits. This area for improvement relates to the quality monitoring systems in place within the agency.</p> <p>Ref: 6.5</p>
	<p><b>Response by registered person detailing the actions taken:</b>            Following inspection separate Independent monitoring was undertaken on 29/3/2019 and 15/4/2019.</p> <p>The relevant paper work was completed and forwarded to RQIA inspector on 25/04/2019, This will remain in place on a monthly basis in order to ensure an independent over view of Unique Home Care services.</p> <p>Debra Walton 3/5/2019</p>



The Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT

**Tel** 028 9536 1111  
**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
**Twitter** @RQIANews