

# Unannounced Care Follow Up Inspection Report 29 May 2019



## Care Plus (N.I.) Ltd

Type of Service: Domiciliary Care Agency

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Tel No: 02881670232

Inspector: Kieran Murray

[www.rqia.org.uk](http://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

Care Plus is a domiciliary care agency which is based in Castlederg and supplies staff to people living in the Castlederg, Drumquin, Newtownstewart and Killen areas. Service users have a range of needs including dementia, learning disability and frailty relating to old age. The agency provides care and support to 109 individuals living in their own homes whose care and services are commissioned by the Western Health and Social Care Trust (WHSCCT).

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Care Plus  <b>Responsible Individual:</b> Jacqueline Maguire	<b>Registered Manager:</b> Janette Rolston
<b>Person in charge at the time of inspection:</b> Senior Co-Ordinator	<b>Date manager registered:</b> Janette Rolston – 28 July 2011

### 4.0 Inspection summary

An unannounced inspection took place on 29 May 2019 from 09.45 to 12.00.

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 from an anonymous source by RQIA in relation to staff recruitment.

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

The inspector spoke with one staff member during the inspection who stated:

- "I got an induction lasting three days in Enniskillen."
- (Agency) "They do checks on you."
- "No staff can start working without an induction."
- "I got training."

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 the manager and senior co-ordinator as part of the inspection process and can be found in the main body of the report.

## 5.0 How we inspect

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

- information received by RQIA
- previous inspection report

The following records were examined during the inspection:

- recruitment records relating to a number of staff
- induction records
- Northern Ireland Social Care Council (NISCC) details
- Access NI records

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

## 6.0 The inspection

### 6.1 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 and senior co-ordinator indicated that they had a clear understanding of the recruitment process and the need for robust systems to be in place. They stated that staff are not provided for work in the homes of service users until all required checks have been satisfactorily completed. It was identified that the agency's staff recruitment process is managed by the organisation's recruitment department in conjunction with the registered manager, manager and senior co-ordinators.

During the inspection the inspector reviewed the individual staff personnel records relating to two staff employed by the agency since 1 February 2019. 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.

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 inspector was informed post inspection that the agency should clearly record that this responsibility has been delegated to the senior co-ordinator for the agency.

Discussions with staff and records viewed indicated that the agency's induction programme is in accordance with the three day timescale as required within the domiciliary care agencies regulations.

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. 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 following their induction period.

Staff talked positively about their induction and indicated that it had provided them with the knowledge and skills to meet the needs of service users. They also spoke positively about the support they receive from management to enable them to provide safe and effective care to service users.

Records viewed on the date of inspection indicated that the organisation's recruitment systems are effective for ensuring that staff are not provided for work until all required checks have been satisfactorily completed. It was identified that one of the new staff members is in the process of being supported by the agency to register with NISCC; this was clearly within the timeframe outlined within NISCC procedures.

### **Areas of good practice**

Areas of good practice were identified in relation to the agency's staff recruitment processes including relevant pre-employment checks and induction records.

### **Areas for improvement**

No areas for improvement were identified 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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