

Inspection Report

12 April 2022



Kingdom Healthcare Ltd

Type of service: Domiciliary Care Agency
Address: 15 Stranmillis Road, Belfast, BT9 5AF
Telephone number: 028 9033 2190

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Kingdom Services Group Limited	Registered Manager: Ms Jane Montgomery
Responsible Individual: Ms Patricia Mary Casement	Date registered: 27 January 2022
Person in charge at the time of inspection: Ms Patricia Mary Casement	
Brief description of the accommodation/how the service operates:	
<p>Kingdom Healthcare Ltd is a domiciliary care agency which provides a range of personal care and social support services to 98 service users living in their own homes within the Northern Health and Social Care Trust (NHSCT) area. The agency also provides care and support services to 23 privately funded service users within the Belfast Health and Social Care Trust (BHSCT). Service users have a range of needs including physical disability, dementia, learning disability, mental health and elderly care needs. Service users are supported by 74 staff.</p>	

2.0 Inspection summary

An announced inspection was undertaken on 12 April 2022 between 10.15 a.m. and 5.00 p.m. This inspection was conducted by a care inspector.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2021.

During an inspection of the agency on 21 January 2022, serious concerns were identified in relation to a lack of robust managerial oversight and governance in respect of staff recruitment and selection; staff registrations with the Northern Ireland Social Care Council (NISCC); staff induction and shadowing; staff training and the process for safeguarding service users.

Following a meeting with the Responsible Individual, the following five FTC Notices were issued by RQIA on 10 February 2022:

FTC ref: FTC000174

FTC ref: FTC000175

FTC ref: FTC000176

FTC ref: FTC000177

FTC ref: FTC000178

The inspection sought to assess compliance with the actions detailed in the five Failure to Comply (FTC) Notices. The outcome of this inspection evidenced that management within the agency had taken appropriate actions to comply with the FTC notices.

No new areas for improvement were identified.

3.0 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 notices, FTC Ref: FTC000174, FTC000175, FTC000176, FTC000177 and FTC000178.
- All correspondence and information received by RQIA since the previous inspection.

During the inspection the inspector met with the registered person, the people operations manager and the administrative staff.

The following records were examined during the inspection:

- staff recruitment
- staff registration with NISCC
- staff induction and shadowing
- staff training
- adult safeguarding procedures.

The findings of the inspection were discussed with Patricia Casement, responsible individual, at the conclusion of the inspection.

4.0 The inspection

4.1 What has this service done to meet any areas for improvements identified at or since last inspection?

Areas for improvement from the last inspection on 21 January 2022

Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
Area for Improvement 1 Ref: Regulation 23 (1) (2) (a) (b) (i) (ii) (c), (3) (4) (5) Stated: First time	The Responsible Individual must ensure that all operational areas of the agency are scrutinised on a monthly basis; the reports of the monthly monitoring visits must include comments from staff, service users and consultation with professionals. The report must evidence a full and robust analysis of the operation of the agency and include	

	<p>monitoring of the staff registration with NISCC. Any comments which need to be addressed are included in the action plan and followed up in a timely manner. RQIA also requests that the reports are submitted to RQIA by the 5th day of each month.</p>	Met
	<p>Action taken as confirmed during the inspection: A review of the submitted monthly monitoring reports confirmed that the registered individual had implemented a robust system of analysis of the operation of the agency.</p>	
<p>Area for Improvement 2 Ref: Regulation 22 (6)(8) Stated: First time</p>	<p>The Responsible Individual ensure that every complaint made under the complaints procedure is fully investigated; records are maintained of each complaint, including details of the investigation made, the outcome and any action taken. The Responsible Individual must also ensure that there is a record to note if the outcome of the investigation was to the satisfaction of the complainant.</p>	Carried forward to the next inspection
	<p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2021		Validation of compliance
<p>Area for Improvement 1 Ref: Standard 12.4 Stated: First time</p>	<p>The Responsible Individual shall ensure that all staff undertake training in relation to the Deprivation of Liberty Safeguards (DoLS) and Dysphagia as relevant to their roles and responsibilities.</p>	Carried forward to the next inspection
	<p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	

5.0 Inspection findings

FTC ref: FTC000174

The Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation 13

The registered person shall ensure that no domiciliary care worker is supplied by the agency unless-

(d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.

Schedule 3:

(4) Two written references, relating to the person, including a reference from the person's present or most recent employer, if any.

(8) A full employment history, together with a satisfactory written explanation of any gaps in employment and details of any current employment other than for the purposes of the agency.

(10) A statement by the registered provider, or the registered manager, as the case may be, that the person is physically and mentally fit for the purposes of the work which he is to perform.

(12) when Part V of the Police Act 1997 is commenced in Northern Ireland, either-

(a) where a certificate is required for a purpose which is prescribed by regulations under section 113B of that Act, an enhanced criminal record certificate issued under that section; or

(b) in any other case, a criminal record certificate issued under section 113A of that Act, and an application for either certificate shall be accompanied where applicable by an adult's suitability statement under section 113D of that Act.

In relation to this notice, the following actions were required to comply with the regulation:

The Registered Person must ensure that:

- at all times staff are recruited and employed in accordance with statutory legislation and that all necessary checks are carried out prior to an offer of employment being made
- all staff recruitment and selection records are reviewed to ensure that they contain all necessary information in keeping with statutory legislation and mandatory requirements
- AccessNI enhanced checks are completed, robustly scrutinised and the outcome recorded prior to an individual commencing employment with the agency
- all staff involved in the recruitment and selection of staff have received up to date training in recruitment and selection and that such training is periodically reviewed in keeping with best practice
- a policy is in place for staff recruitment and selection which clearly defines the roles and responsibilities of those involved in the process

During the inspection the records relating to five recently employed staff were reviewed. There was evidence that the necessary checks had been carried out prior to the offer of employment being made and the files reviewed contained all the necessary information in keeping with the statutory legislation and mandatory requirements. AccessNI enhanced checks had been completed and scrutinised with the outcome recorded.

All staff involved in recruitment and selection had received up to date training. A policy was in place for staff recruitment and selection, which clearly defined the roles and responsibilities of those involved in the process. The inspector spoke with the recruitment officer who could clearly articulate her role and responsibilities as they pertained to recruitment and selection. The registered individual reported that a monthly audit of the recruitment process was now discussed at the monthly senior management meeting; recruitment will also be included as part of the monthly monitoring visits to ensure compliance with the statutory legislation and mandatory requirements.

Evidence was reviewed that the five recently employed staff were not supplied to service users until all pre-employment checks had been completed and signed off by the registered person.

As all actions have been assessed as met, compliance has been achieved with this FTC notice.

FTC ref: FTC000175

The Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation 13

The registered person shall ensure that no domiciliary care worker is supplied by the agency unless-

(d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.

Schedule 3

(7) Details and documentary evidence of any relevant qualifications or accredited training

In relation to this notice, the following actions were required to comply with the regulation:

The Registered Person must ensure that:

- a robust system is devised to monitor staff registrations with NISCC on a monthly basis
- no staff member has any direct engagement with service users until appropriately registered with NISCC
- any conditions on a staff member's registration are appropriately explored and action is taken
- staff are directed to commence the registration process with NISCC at induction stage in order that they become registered in a timely manner
- staff contact NISCC and provide them with the details of their new employer once they have commenced with this agency
- staff become registered with NISCC six months from commencing employment with the agency
- compliance with NISCC regulations is reviewed as part of the monthly quality monitoring visits of the agency and overseen by the Responsible Individual.

During the inspection the records relating to staff registrations with NISCC were reviewed. A system for recording and tracking NISCC registrations had been developed. The inspector checked a random sample of staff members registrations against the live NISCC register and found that all staff was registered. The inspector also checked the live NISCC register for the five new staff members employed since the last inspection, which showed all five staff had been registered with NISCC.

The recruitment officer reported that NISCC registrations were now monitored on a monthly basis. In addition, all new staff members are guided through the NISCC application process following an offer of employment and during the induction training. A step-by-step guide to NISCC registration had been formulated by the agency. Documentary evidence was reviewed that staff members were prompted to update their new employment details with NISCC. No new staff members had been employed with conditions since the last inspection.

The agency had a robust system in place to ensure that no staff member had direct engagement with service users, until appropriately registered with NISCC. Furthermore, records reviewed indicated compliance with NISCC registration being reviewed as part of the monthly monitoring visit and overseen by the Responsible Individual.

As all actions have been assessed as met, compliance has been achieved with this FTC notice.

FTC ref: FTC000176

The Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation 16

(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; and

(b) during that induction training-

(i) the new worker is not supplied to a service user unless accompanied by another domiciliary care worker who is a suitably qualified and competent person;

(ii) a member of staff ("the staff member") who is suitably qualified and experienced, is appointed to supervise the new worker;

(iii) the staff member (or another suitably qualified and competent person if the staff member is unavailable) will always be available to be consulted while the new worker is on duty; and

(iv) subject to the consent of the service user, the staff member makes arrangements to observe, on at least one occasion, the new worker carrying out his duties.

In relation to this notice, the following actions were required to comply with the regulation:

The registered person must ensure that:

- new staff engage in a formal, structured induction lasting a minimum of three full working days and written records are maintained
- new staff undertake shadowing shifts with a more experienced staff member until competence is confirmed; written records of shadowing are maintained
- monitoring checks are undertaken to ensure new members of staff are carrying out their duties in a safe and effective manner

- all staff are assessed as being competent in undertaking their caring duties; if any areas for improvement are identified, further training is provided to ensure safe practice.

During the inspection the records relating to five new staff member files were reviewed. There was written evidence to confirm these staff engaged in a formal, structured induction lasting a minimum of three full days. This included new staff members shadowing more experienced staff members and being signed off as competent by the senior staff member, manager and / or the responsible individual.

The responsible individual reported that if an induction period required an extension following assessment, additional training was completed before the staff member was signed off as competent. None of the five new staff members since the last inspection required additional training. Monitoring checks 'spot checks' were completed within the first month and the agency reported that yearly checks are completed thereafter on all staff. The responsible individual gave assurances that all staff are now assessed for competency in undertaking their caring duties through training, spot checks and through discussion with their manager in supervision and appraisal.

As all actions have been assessed as met, compliance has been achieved with this FTC notice.

FTC ref: FTC000177

The Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation 16

*(2) The registered person shall ensure that each employee of the agency-
(a) receives training and appraisal which are appropriate to the work he is to perform;*

In relation to this notice, the following actions were required to comply with the regulation:

Action required to comply with regulations:

The Registered Person must ensure that:

- a training matrix is developed to encompass all training that is considered mandatory by the agency, to ensure a composite record of staff training can be maintained
- all staff partake of the mandatory training programme and a record of such training is maintained to ensure that the care being delivered to service users is safe and effective
- training records are monitored frequently and if training has expired, the Registered Person also ensures the staff member is booked onto the next available training date and updates the records when the training has been successfully completed
- any areas for improvement identified during monitoring of practice and/or during supervision are acted upon immediately and the staff member is provided with refresher training to ensure their competence and skills are up to date.

During the inspection the records relating to staff training were reviewed. A training matrix had been developed encompassing all of the agency's mandatory training. The inspector also reviewed evidence of the agency's classroom training during staff induction. A new system of e-learning had been sourced and was in the process of being implemented and some staff had completed modules on this system. The responsible individual reported that all staff would migrate onto the new system for e-learning, alongside the in-house training provided by the agency. Staff training that was due to expire was now populated onto the manager's electronic dashboard and the staff member was informed that their training was due to expire. A date for this training was then booked.

The training matrix included yearly mandatory updates and staff whose training had expired were booked onto the next available training dates. There was evidence that training is discussed during supervision, appraisals and discussed as part of the monthly monitoring.

As all actions have been assessed as met, compliance has been achieved with this FTC notice.

FTC ref: FTC000178

The Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation 15

(6) The registered person shall ensure that where the agency arranges the provision of prescribed services to a service user, the arrangements shall-
(a) specify the procedure to be followed after an allegation of abuse, neglect or other harm has been made;

In relation to this notice, the following actions were required to comply with the regulation:

The Registered Person must ensure that:

- all staff are provided with adult safeguarding training and deemed competent in this regard
- there is an Adult Safeguarding Champion in the agency who is fully trained and their knowledge and skills are current
- all safeguarding allegations are referred to the relevant Trust team for screening in a timely manner
- there is a comprehensive written record of every safeguarding investigation and actions taken
- strategy meetings arranged by the relevant Trust are attended and a minute of the meeting is retained and any actions addressed
- the conclusion of any safeguarding investigation is accurately recorded
- the documentation relating to every safeguarding investigation is available for review by the RQIA.

During the inspection the records relating to adult safeguarding were reviewed. All staff are required to complete adult safeguarding training. Where staff had not yet completed this training, there was evidence that they had been booked on the next available training dates.

The responsible individual is the named Adult Safeguarding Champion and evidence was reviewed that they had received training pertaining to this role. The responsible individual

reported that they have joined the BHSCT Adult Safeguarding Champion Group and the next refresher training will be held in the next quarter of 2022.

The documentation relating to each safeguarding referral was available for review and evidenced that referrals were made to the relevant trust team in a timely manner and comprehensive records were retained.

As all actions have been assessed as met, compliance has been achieved with this FTC notice.

6.0 Conclusion

Evidence was available to validate compliance with the Failure to Comply Notices FTC000174, FTC000175, FTC000176, FTC000177 and FTC000178.

7.0 Quality Improvement Plan/Areas for Improvement

Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007	
Area for Improvement 1 Ref: Standard 12.4 Stated: First time	The Responsible Individual shall ensure that all staff undertake training in relation to the Deprivation of Liberty Safeguards (DoLS) and Dysphagia as relevant to their roles and responsibilities.
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2021	
Area for Improvement 2 Ref: Regulation 22 (6)(8) Stated: First time	The Responsible Individual ensure that every complaint made under the complaints procedure is fully investigated; records are maintained of each complaint, including details of the investigation made, the outcome and any action taken. The Responsible Individual must also ensure that there is a record to note if the outcome of the investigation was to the satisfaction of the complainant.
	Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.



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