

Inspection Report

14 December 2023



Aspire Care Ireland

Type of service: Domiciliary Care Agency
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Applicant Provider: Aspire Care Ireland Limited Applicant Responsible Individual: Mrs Sinead Cox	Applicant Registered Manager: Mrs Deborah Hale
Person in charge at the time of inspection: Mrs Sinead Cox	
Brief description of how the service proposes to operate: Aspire Care Ireland Limited has applied to be registered as a domiciliary care agency. The agency's (applicant) responsible person advised of their plans to provide personal care and support to adults living in the Derry and Strabane area.	

2.0 Inspection summary

An announced pre-registration care inspection took place on 14 December 2023 from 9.30 a.m. to 14.15 p.m. Prior to the inspection a number of policies were submitted in support of the registration application. A number of the policies required re-submission to RQIA before they were deemed acceptable.

This inspection was underpinned by:

- The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005
- The Health and Personal Social Services (Quality, Improvement and Regulation) (2003 Order) (Commencement No. 4 and Transitional Provisions) Order (Northern Ireland) 2007
- The Regulation and Improvement Authority (Registration) (Amendment) Regulations (Northern Ireland) 2007
- The Regulation and Improvement Authority (Fees and Frequency of Inspections) (Amendment) Regulations (Northern Ireland) 2007
- The Domiciliary Care Agencies Regulations (Northern Ireland) 2007
- The Domiciliary Care Agencies Minimum Standards, revised 2021.

The inspection sought to assess an application submitted to RQIA for the registration of Aspire Care Ireland Ltd. as a domiciliary care agency.

An application was also submitted for the registration of Mrs Sinead Cox as the responsible individual and an application for Mrs Deborah Hale as the registered manager.

It was good to note the (applicant) responsible individual's commitment to ensuring a high quality and person centred service.

Areas for improvement were required in relation to the Statement of Purpose, the Notification of Changes policy, the Recruitment policy and the Staff Handbook.

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.

Information has been gathered throughout the registration process. Scrutiny of this information means that registration of this nursing agency is being considered from a care perspective.

3.0 How we inspect

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

- Statement of Purpose
- Service User Guide
- Application for registration as person responsible for carrying on an establishment or agency
- Application for registration as the manager of an establishment or agency.

The following records were examined during the inspection:

- Policy and procedure manual
- Insurance certificate of employers' liability
- Statement of purpose
- Service user guide
- Staff recruitment policy and procedure
- Induction policy and procedure
- Staff handbook
- Policy and procedure on Review and reassessment of staff (including supervision and appraisal)
- NISCC registration policy
- Training policy and procedure
- Staff discipline and grievance policy and procedure
- Adult safeguarding policy and procedure
- Child safeguarding policy and procedure
- Whistleblowing policy and procedure
- Confidentiality policy and procedure
- Data protection policy and procedure
- Management of records and information policy and procedure
- Complaints policy and procedure
- Quality monitoring policies and procedures
- Reporting notifiable events to RQIA policy and procedure.

The findings of the inspection were provided to Mrs Sinead Cox, applicant responsible individual and the applicant registered manager, at the conclusion of the inspection.

4.0 Inspection findings

4.1 Are there operational management systems and arrangements in place that support and promote the delivery of quality care services?

Review of the agency's Statement of Purpose was undertaken as part of the registration process which identified the agency proposed to provide personal care and support to adults living in the Derry and Strabane areas. Whilst the Statement of Purpose was generally satisfactory, an area for improvement has been identified to ensure that it includes the following information:

- The needs of the service users to include Autism, Mental Health, Frail elderly and Complex Care
- The details of the Patient Client Council, the Northern Ireland Public Services Ombudsman and the telephone number of RQIA
- The name of the Adult Safeguarding Champion and a brief summary of their role
- The annual quality monitoring process
- The monthly quality monitoring process
- Reference to the policies outlined in Appendix 1 of the Minimum Standards

Review of the service user guide confirmed that the guide contains information on how to access services and the general terms and conditions, the arrangements for the inspection of the agency and details of how to access RQIA inspection reports.

The agency's complaints policy and procedure was examined and was in accordance with the regulations and standards; a system for recording complaints had also been developed. The policy should include that indirect complaints made to the commissioning trust in reference to the agency, will be recorded under the agency's complaints process. This was discussed during the inspection and the applicant responsible individual agreed to include this in the policy.

The agency's arrangements for safeguarding service users were discussed and the agency's policy reflects the regional policy 'Adult Safeguarding Prevention and Protection in Partnership', 2015 and Co-operating to Safeguard Children and Young People in Northern Ireland 2016. Plans are in place to provide staff with training in adult safeguarding and child protection.

The proposed arrangements for quality assurance of the services provided by the agency were discussed with the applicant registered manager of the agency. These included registered person monthly monitoring of the service and an annual quality review process.

The Notification of Changes policy needs to be devised in accordance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007, Regulation 28. An area for improvement has been identified.

The Management of Records policy was reviewed and deemed to be satisfactory.

The agency's insurance indemnity certificate was reviewed during the inspection and found to be satisfactory.

4.2 Are there robust systems in place for the recruitment, training and development of staff?

The agency's recruitment of staff policy and procedure was examined and discussed during the inspection. While staff had not yet been recruited, the applicant registered manager demonstrated their knowledge of the regulations and standards with regard to the required pre-employment checks. However, the review of the re-submitted policy identified that it required clarity in relation to a number of areas. For example, the report needed to be explicit regarding the need for a Declaration of Physical Fitness needing to be signed by the registered manager. The policy also required a section to be included regarding the steps to be taken should something arise on the AccessNI check. The policy also required clarity in relation to when a Certificate of Good character should be sought. It is not acceptable to have this in lieu of being able to get two references. An area for improvement has been identified.

The agency's recruitment documentation supported compliance with the regulations and standards. The compulsory registration with the Northern Ireland Social Care Council (NISCC) was discussed and the applicant registered manager was knowledgeable in this regard. A system is in place to monitor registration status of all care workers on a monthly basis.

The agency's staff handbook was examined and found to be comprehensive outlining a range of information for staff in relation to their responsibilities. Whilst the policy referenced the No reply policy, it is important that the Staff Handbook contains a section on the procedure staff should follow in the event a service user does not appear to be at home. An area for improvement has been identified.

Staff training and induction arrangements were examined and the agency has in place a training and development plan which highlights a number of areas that are considered to be mandatory. The induction programme and associated documentation reflects the proposed delivery of a structured orientation and induction for newly appointed staff.

Staff supervision and appraisal arrangements were examined and the agency's policy sets out the frequency of formal supervision and the frequency of on-site spot checks. Staff appraisals will occur annually and documentation has been developed to record the delivery of supervision and appraisal.

The agency has developed contracts for staff and the applicant registered manager was aware of their responsibility to ensure that an index of staff and service users is maintained and updated as necessary.

The (applicant) Registered Individual, confirmed that the company has identified an Adult Safeguarding Champion (ASC) who plans to complete level 3 training in adult safeguarding and child protection.

4.3 Are there arrangements in place regarding the assessment and placement of staff?

The arrangements for providing service users with the details of staff being placed within a service were discussed. The agency's (applicant) manager advised of their plans to provide high quality, person centred services. The inspector was advised that service users will receive written information within their contract of placement that will identify their worker(s) and the relevant contacts within the agency.

The (applicant) responsible individual described the process for ensuring that a person-centred assessment of need is obtained prior to service commencement and highlighted their role in this process. The agency has a system which they plan on using to match the skills of staff to the requirements of placements.

4.4 Have the applicant registered persons demonstrated their fitness for their roles and responsibilities?

Providers of regulated establishments require to be registered with RQIA in accordance with Article 12 of The Health and Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, as it is an offence to carry on an establishment of any description without being registered in respect of it.

Mrs Sinead Cox submitted an application to RQIA to become the registered responsible individual of Aspire Care Ireland Ltd. The relevant information, supporting documentation and appropriate fees accompanied the application.

A fit person interview was undertaken on 21 November 2023 at the RQIA office. Discussion with Mrs Cox evidenced that she had a clear understanding of her role and responsibilities as a registered person under the relevant legislation and minimum standards. The following issues were discussed:

- the statement of purpose and service user guide
- the management of complaints
- notification of untoward events to RQIA and other relevant bodies
- quality assurance measures to monitor and improve practice as appropriate
- safeguarding adults
- responsibilities under the Domiciliary Care Agencies Regulations (Northern Ireland) 2007
- responsibilities under the Domiciliary Care Agencies Minimum Standards, 2011
- responsibilities under health and safety legislation
- adherence to professional codes of conduct

Registration of Mrs Sinead Cox with RQIA as responsible individual and Mrs Deborah Hale as registered manager is pending final approval by RQIA.

5.0 Conclusion

Four areas for improvement were identified.

6.0 Quality improvement plan

Areas for improvement have been identified where action is required to ensure compliance with Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

	Regulations	Standards
Total number of Areas for Improvement	1	3

6.1 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	
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007	
Area for improvement 1 Ref: Regulation 28 (a)(b)(c)(d)(e)(f)(g)(h) Stated: First time To be completed by: 15 January 2024	The registered person shall ensure that the Notification of Changes policy reflects the Domiciliary Care Agencies Regulations (Northern Ireland) 2007, Regulation 28. Ref: 4.1
	Response by registered person detailing the actions taken: Notification of change policy amended to reflect the Domiciliary Care agencies regulations Northern Ireland 2007
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards (revised) 2021	
Area for improvement 1 Ref: Standard 2 Stated: First time To be completed by: 15 January 2024	The Statement of Purpose shall be reviewed to ensure the following matters are included: <ul style="list-style-type: none"> • The needs of the service users to include Autism, Mental Health, Frail elderly and Complex Care • The details of the Patient Client Council, the Northern Ireland Public Services Ombudsman and the telephone number of RQIA • The name of the Adult Safeguarding Champion and a brief summary of their role • The annual quality monitoring process • The monthly quality monitoring process • Reference to the policies outlined in Appendix 1 of the Minimum Standards Ref: 4.1
	The registered person shall ensure that the Recruitment policy is further developed to ensure that it reflects the following: <ul style="list-style-type: none"> • The need for the registered manager to sign off a Declaration of Physical and Mental Fitness prior to staff being supplied • The steps to be taken should something be identified on the AccessNI check • The need to obtain a Certificate of Good Character should a staff member hail from a country that is not checked by AccessNI • The safeguards in place in the event that references are not obtained in keeping with regulation. Ref: 4.2
Area for improvement 2 Ref: Standard 11 Stated: First time To be completed by: 15 January 2024	

	Response by registered person detailing the actions taken: Statement of Purpose and Recruitment Policy amended to meet the areas of improvement, 2 and 3.
Area for improvement 3 Ref: Standard 12 Stated: First time To be completed by: 15 January 2024	The registered person shall ensure that the staff handbook clearly outlines the process for staff to follow in the event that a service user does not appear to be at home. Ref: 4.2
	Response by registered person detailing the actions taken: Employee handbook amended to include the no reply procedure.

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



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