



The **Regulation** and
Quality Improvement
Authority

Inspector: **Joanne Faulkner**
Inspection ID: **IN023175**

Lydian Care Ltd
RQIA ID: 10697
33 Main Street
Newcastle
BT33 0AD
Tel: 02843725385
Email: fkane@lydiancare.com

Announced Care Inspection
of
Lydian Care Ltd
on
7 January 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced care inspection took place on 7 January 2016 from 11.00 to 14.00. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. The outcome of the inspection found no areas of concern. A Quality Improvement Plan (QIP) was not included in this report. This inspection was underpinned by The Nursing Agencies Regulations (Northern Ireland) 2005, and The DHSPSS The Nursing Agencies Minimum Standards (2008).

2. Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

3. Actions/Enforcement Resulting From This Inspection

Enforcement action did not result from the findings of this inspection.

4. Inspection Outcome

	Requirements	Recommendations
Total Requirements and Recommendations Made	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

5. Service Details

Registered Organisation/ Registered Provider Lydian Care Ltd/Pierre Gerard Burns	Registered Manager: Fiona Theresa Kane
Person in Charge of the Agency at the Time of Inspection: Fiona Theresa Kane	Date Registered: 9 October 2014
Number of Service Users in Receipt of a Service on the Day of Inspection: Four	Number of Registered Nurses, Health Visitors and Midwives on the Agency's Books: Two

6. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to establish the level of compliance achieved with respect to the following themes:

Theme 1: Nurse Training - The agency has procedures in place to ensure all nurses are appropriately trained and qualified for their roles.

Theme 2: Vulnerable adults and children are protected from abuse.

7. Methods/Process

Specific methods/processes used in this inspection include the following:

- Discussion with the responsible person, registered manager and training personnel
- Review of records
- Observation during inspection of the premises
- Evaluation and feedback

Prior to inspection the following records were examined:

- Previous care inspection report
- Notifiable events submitted since the previous care inspection
- Written and verbal communication received since the previous care inspection

The following records were examined during the inspection:

- Staff training and induction records
- Dates of staff supervision/appraisal
- Selected policies and procedures
- Accident and incident records
- Record of complaints
- Staff Handbook
- Quality monitoring feedback

Staff questionnaires were provided during the inspection. There have been no questionnaires returned to RQIA.

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

8. The Inspection

8.1 Review of Requirements and Recommendations from Previous Inspection Dated 18 December 2014

Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 3.5	It is recommended that the registered provider ensures information in the staff handbook is enhanced to reflect the principles of recording and reporting within NMC guidelines.	Met
	Action taken as confirmed during the inspection: It was identified that the agency's staff handbook contains details of the principles of recording and reporting within NMC guidelines. The registered manager stated that a face to face discussion is completed with all staff during induction in relation to recording and reporting.	
Recommendation 2 Ref: Standard 6.1	It is recommended that the registered provider ensures nurses verify their completion of induction and their reading and understanding of policies and procedures by signing the staff handbook.	Met
	Action taken as confirmed during the inspection: The inspector viewed the agency's staff handbook and noted that staff are required to sign to indicate that they have received and understood all information provided during their induction.	

8.2 Theme 1: Nurse Training - The agency has procedures in place to ensure all nurses are appropriately trained and qualified for their roles.

Is Care Safe?

The agency's training and development policy outlines the induction programme that staff are required to undertake prior to employment; it was noted that this was in accordance with RQIA guidance on mandatory training. It was identified that the agency develops an annual training schedule and has in place an electronic system for recording training provided and identifying when training updates are required. The manager stated that staff are provided with a staff handbook and confirmed that agency staff are not provided until all the necessary pre-employment checks and documentation relating to training have been received and verified.

Training records viewed indicate that staff have received the necessary mandatory training and in addition training specific to meet the needs of the service user. The registered manager could describe the procedure for informing staff when training updates are required and stated that staff are not provided to work if training updates have not been completed.

Staff are required to complete a number of training modules electronically and provide an evaluation of training provided; it was noted that staff must complete all sections of the training and competency assessments before progressing to the next level. The registered manager could describe instances when staff are required to complete specific training to meet the needs of individual clients. It was identified that staff receive quarterly face to face supervision.

The agency requests that service users complete a client survey in relation to staff provided; these were viewed by the inspector.

Is Care Effective?

Prior to employment agency staff are required to complete required mandatory training provided by the agency; a record of training is maintained. Staff are provided with a handbook; it was identified that staff are required to sign that they have received a copy.

Staff are provided with quarterly supervision and annual appraisal. The registered manager stated that training and development needs are discussed during supervision and appraisal meetings and a plan developed to address identified training needs; they stated that staff are encouraged to liaise at any time with the manager in relation to training needs.

The registered manager stated that service users are informed of the process for contacting the agency for providing feedback and to discuss concerns in relation to the competency of staff provided. It was identified that the agency has a process for obtaining the views and comments of service users in relation to staff provided and for addressing competency issues with staff.

The registered manager stated that when concerns relating to a staff member are identified the agency will address the concerns with the individual immediately and whilst the process is ongoing the staff member would not be provided to work.

The manager stated that the agency has recently invested in a system to support all staff with the NMC revalidation process.

Is Care Compassionate?

The agency has a process for obtaining the views of service users; the registered manager described the process for engaging with the relevant service users in order to obtain feedback.

The registered manager stated that the agency incorporates feedback received in the agency's monthly quality monitoring report.

Areas for Improvement

There were no areas for improvement identified within Theme 1.

Number of Requirements	0	Number Recommendations:	0
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8.3 Theme 2: Vulnerable adults and children are protected from abuse.

Is Care Safe?

The inspector viewed the agency's policy for safeguarding of vulnerable adults and protection of children, October 2015. It outlines the procedures to be followed and makes relevant reference to current legislation and regional protocols issued by the Health and Social Services Board. It was identified that the agency is currently reviewing and updating their policy in line with recently issued DHSSPS guidance.

The manager stated that staff receive training in protection of vulnerable adults and safeguarding children during induction and in the annual training update that all staff are required to complete. The inspector viewed records of induction and training which indicated that staff have received appropriate training.

The agency's staff handbook details the necessary actions staff are required to take in the event of suspected, alleged or actual incidents of abuse being identified; the registered manager stated that staff have access to electronic copies of all policies and procedures.

The registered manager could describe the process for reporting of any incidents of suspected, alleged or actual abuse and the mechanism for liaising with the appropriate bodies in relation to any investigation they are required to be involved in.

Is Care Effective?

It was identified that staff are provided with safeguarding vulnerable adults training during induction; it includes information in relation to types and indicators of abuse and the agency's policy and procedures in relation to protection of vulnerable adults and children. A training update is provided for staff on an annual basis. Records viewed indicate that staff provided by the agency have received the relevant training.

The registered manager could describe the safeguards implemented by the agency to ensure vulnerable adults; children and young people are protected from abuse. These included the arrangements in place that ensure all necessary pre-employment checks are completed and considered, and that staff provided have received relevant training.

The registered manager described their role and responsibility regarding reporting and investigation in the event of an allegation of abuse being made and the processes for engaging with the health and social care trusts. It was identified from records viewed that there have been no safeguarding referrals made to date.

Is Care Compassionate?

The registered manager stated that, prior to placement, agency staff nurses were provided with the relevant information to ensure they are aware of the appropriate action to be taken in the event of a suspicion of, or actual abuse. Records viewed indicate that staff provided by the agency have received the relevant training and are required to complete a training competency evaluation electronically. In addition the manager stated that agency staff are shadowed on shift.

The agency has a process for recording of all incidents of suspected, alleged or actual abuse identified; records viewed indicate no incidents have occurred to date.

The agency's 'Whistleblowing Policy', October 2015, outlines the responsibility of staff in highlighting concerns or issues relating to poor practice and the procedures to be followed. It was identified that reference is made as to the role of RQIA in relation to whistleblowing.

Areas for Improvement

There were no areas for improvement identified within Theme 2.

Number of Requirements	0	Number Recommendations:	0
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No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Fiona Kane	Date Completed	07/03/2016
Registered Person	Pierre Burns	Date Approved	07/03/2016
RQIA Inspector Assessing Response	Joanne Faulkner	Date Approved	09/03/2016

Please provide any additional comments or observations you may wish to make below:

Please ensure this document is completed in full and returned to agencies.team@rqia.org.uk from the authorised email address

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.