



## **Secondary Unannounced Care Inspection**

**Name of Service and ID:** Guardian Residential Home (10736) and Jackie's Domiciliary Care Agency (10953)

**Date of Inspection:** 4 September 2014

**Inspectors' Names:** Bronagh Duggan & Amanda Jackson

**Inspection ID:** IN020431

**THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY**  
9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
Tel: 028 9051 7500 Fax: 028 9051 7501

## 1.0 General Information

<b>Name of Service:</b>	Guardian Residential Home (10736) Jackie's domiciliary care agency (10953)
<b>Address:</b>	28 Moor Road Coalisland Dungannon BT71 4QB
<b>Telephone Number:</b>	02887746361
<b>Email Address:</b>	<a href="mailto:guardiancentre@btconnect.com">guardiancentre@btconnect.com</a>
<b>Registered Organisation/ Registered Provider:</b>	Guardian Day Care and Residential Care
<b>Registered Manager:</b>	Jacqueline Ryan
<b>Person in Charge of the Home at the Time of Inspection:</b>	Jacqueline Ryan
<b>Categories of Care:</b>	RC-I, RC-PH/PH(E), RC-DE
<b>Number of Registered Places:</b>	5
<b>Number of Residents Accommodated on Day of Inspection:</b>	5
<b>Scale of Charges (per week):</b>	Trust Rates
<b>Date and Type of Previous Inspection:</b>	Primary Announced Inspection 6 November 2013 (Residential inspection) 16 September 2013 (Domiciliary care inspection)
<b>Date and Time of Inspection:</b>	4 September 2014 10:45am – 3:45pm
<b>Name of Inspectors:</b>	Bronagh Duggan and Amanda Jackson

## 2.0 Introduction

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect residential care homes. A minimum of two inspections per year are required.

This is a report of an unannounced secondary care inspection to assess the quality of services being provided. The report details the extent to which the standards measured during inspection were met.

## 3.0 Purpose of the inspection

The purpose of this unannounced inspection was to ensure that the service is compliant with relevant regulations and minimum standards and other good practice indicators and to consider whether the service provided to service users was in accordance with their assessed needs and preferences. This was achieved through a process of analysis and evaluation of available evidence.

RQIA not only seeks to ensure that compliance with regulations and standards is met but also aims to use inspection to support providers in improving the quality of services. For this reason, inspection involves in-depth examination of an identified number of aspects of service provision.

The aims of the inspection were to examine the policies, procedures, practices and monitoring arrangements for the provision of residential care, and domiciliary care and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Residential Care Homes Regulations (Northern Ireland) 2005
- The Department of Health, Social Services and Public Safety's (DHSSPS) Residential Care Homes Minimum Standards (2011)
- The Domiciliary Care Agencies Regulations (Northern Ireland) 2007
- The Department of Health, Social Services and Public Safety's (DHSSPS) Domiciliary Care Agencies Minimum Standards (2011)

Other published standards which guide best practice may also be referenced during the inspection process.

## 4.0 Methods/Process

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

- Discussion with the registered provider / registered manager
- Examination of records
- Discussion with staff
- Consultation with residents individually and with others in groups
- Inspection of the premises
- Evaluation of findings and feedback

## 5.0 Inspection Focus

This inspection was carried out in response to a complaint received by RQIA in relation to recruitment and induction practices at Guardian Day Centre, Residential Care Home and within Jackie's domiciliary care agency.

The inspection sought to review the home and agencies compliance with Legislation and Minimum standards.

The inspector has rated the home's Compliance Level against each criterion and also against the standard. The table below sets out the definitions that RQIA has used to categorise the home's performance:

<b>Guidance - Compliance Statements</b>		
<b>Compliance statement</b>	<b>Definition</b>	<b>Resulting Action in Inspection Report</b>
<b>0 - Not applicable</b>		A reason must be clearly stated in the assessment contained within the inspection report.
<b>1 - Unlikely to become compliant</b>		A reason must be clearly stated in the assessment contained within the inspection report.
<b>2 - Not compliant</b>	Compliance could not be demonstrated by the date of the inspection.	In most situations this will result in a requirement or recommendation being made within the inspection report.
<b>3 - Moving towards compliance</b>	Compliance could not be demonstrated by the date of the inspection. However, the service could demonstrate a convincing plan for full compliance by the end of the Inspection year.	In most situations this will result in a requirement or recommendation being made within the inspection report.
<b>4 - Substantially compliant</b>	Arrangements for compliance were demonstrated during the inspection. However, appropriate systems for regular monitoring, review and revision are not yet in place.	In most situations this will result in a recommendation, or in some circumstances a requirement, being made within the inspection report.
<b>5 - Compliant</b>	Arrangements for compliance were demonstrated during the inspection. There are appropriate systems in place for regular monitoring, review and any necessary revisions to be undertaken.	In most situations this will result in an area of good practice being identified and comment being made within the inspection report.

## 6.0 Profile of Services

Guardian Day Centre and Residential Care Home is situated in a rural location close to the village of Coalisland. The residential home is owned and operated by Mrs Jacqueline Ryan who is also the registered manager. Mrs Ryan is also the proprietor of Jackie's Domiciliary Care Agency which is based on the same site.

Accommodation for residents is provided in single rooms in a single story domestic type bungalow. Four of the bedrooms provide hand washing facilities, one of the bedrooms includes an en suite area.

The home consists of a communal lounge area which is situated at the centre of the home, a domestic style kitchen / dining area, visitors / quiet room , hairdressing salon, shower room, toilet's and office accommodation

The home is registered to provide care for a maximum of five residents and offers three day care places.

The home is registered to provide care under the following categories of care:

### Residential care

I	Old age not falling into any other category
DE	Dementia
PH	Physical disability other than sensory impairment
PH(E)	Physical disability other than sensory impairment - over 65 years

### Day care

As outlined in the condition of registration this residential care home is registered to provide day care services up to and including a maximum of three residents.

### Domiciliary Care

Jackie's Domiciliary Care Service offers care to service users, in their own homes, in the Coalisland area. Services provided include help with personal care, practical help and a service to give carer's respite for agreed periods each week. The service is tailored to meet each individual's needs, with the goal of maintaining and improving quality of life in the household. All current service users were organizing their care package via direct payments. The domiciliary service is managed and administered from an office located in the grounds of Guardian Residential and Day Care Services, which are affiliated businesses.

## 7.0 Summary of Inspection

This secondary unannounced care inspection of Guardian Day Centre, Guardian Residential home and Jackie's domiciliary care was undertaken by Bronagh Duggan and Amanda Jackson on 4 September 2014 between the hours of 10:45 am - 3:45pm. Mrs Jacqueline Ryan was available during the inspection and for verbal feedback at the conclusion of the inspection.

This inspection was undertaken in response to concerns raised with RQIA in relation to recruitment and induction practices of Guardian Daycentre, Residential Care Home and Jackie's domiciliary care agency. RQIA were informed about a situation where a new member of staff having completed a short period of induction and training was expected to take charge of night duty in the home unsupervised. The staff member was also asked to carry out domiciliary visits for Jackie's Domiciliary Care agency two days after having left employment at the home.

As the information received related to the practices of the residential care home and adjoining domiciliary care agency the findings from the inspection have been considered in relation to the Residential Care Homes Regulations (Northern Ireland) 2005 and The Domiciliary Care Agencies Regulations (Northern Ireland) 2007. Within this report Standard 19 Recruitment of Staff from the Residential Care Homes Minimum Standards (2011) and Standard 11 of the Domiciliary Care Agencies Minimum Standards (2011) and Regulation 13 and Schedule 3 of the Domiciliary Care Agencies Regulations were used as the template for reviewing recruitment practices.

During the inspection, inspectors viewed the files of six recently recruited members of staff, reviewed the recruitment processes within the home and domiciliary care agency, reviewed the orientation / induction periods for new staff members and also examined the content of the induction training.

Inspectors met with residents, spoke with one staff member on duty, and contacted another staff member via telephone to discuss the day to day arrangements in relation to the conduct of the home, and staff members experience of the recruitment and induction process. The inspectors also observed care practice, examined a selection of records and carried out a general inspection of the residential care home environment.

In discussion with residents they indicated that that they were happy and content with their life in the home, with the facilities and services provided and their relationship with staff.

The staff member who was on duty and the staff member contacted via telephone both indicated that they were supported in their roles. The staff members confirmed that they are provided with the relevant resources and training to undertake their respective duties. The recently recruited staff member who was contacted via telephone during the inspection confirmed to the inspector that they had shadowed other staff members for approximately one week upon commencement of employment. It was noted by inspectors that this information was not reflected in the staff members file.

Records reviewed during the inspection showed that on at least three occasions staff had commenced employment prior to two satisfactory references being obtained in advance. Induction records were incomplete, induction training was noted to have been completed over one day on at least one occasion and did not include all relevant mandatory training as stipulated in RQIA Guidance on Mandatory Training for Service Providers (September 2012). The induction booklet was also reviewed this was found to contain limited information around a limited number of areas. NISCC registration was not confirmed for four new staff members employed to work in the residential care home, this is not a requirement for staff working within the domiciliary care agency.

The duty rota was also examined during the inspection; this was found to be confusing with a number of changes made to same. It was noted by inspectors that dates and staffing

levels did not match, the manager informed the inspectors that a staff member had recently reported sick however it was noted that with one staff member absent this did not explain the inconsistencies on the rota. Following this discussion the registered manager informed inspectors they had shown the wrong duty rota and provided a revised edition which continued to highlight inconsistencies.

Due to the issues which were identified during the inspection an urgent actions letter was left with the registered manager to address immediately the omissions in relation to the recruitment of staff. This included revision of the homes policies and procedures regarding recruitment, and the implementation of the revised procedures for all new staff recruited within the residential home, day care and domiciliary care services. A requirement was made that all staff should complete a full induction with appropriate records maintained, also the recruitment and induction records of the next six new staff employed by the home / agency should be forwarded to RQIA inspectors for review. The staff duty rotas for the month of September were also requested to be submitted to RQIA for review.

The findings from the inspection on 4 September 2014 substantiated the information that was made to RQIA in relation to recruitment and induction procedures at the home. Following the inspection an urgent actions letter was provided to Mrs Jacqueline Ryan registered provider / manager outlining the immediate action required ensuring the recruitment and induction practices at Guardian Day Centre and Residential Care Home, and Jackie's Domiciliary Care Agency complies with regulations and minimum standards.

One requirement made during the previous inspection on 6 November 2013 was also reviewed. The requirement stated that staff selected for appointment provide pre- employment evidence that the person is physically and mentally fit for the purposes of the work they have to perform in the home. Six files were viewed of recently recruited staff; five of these files contained a completed Health and Fitness Questionnaire which included a declaration that their GP can be contacted as necessary. The home was found to be substantially compliant in this regard.

Comments received from residents are included in section 10.0 of the main body of the report.

The areas of the environment viewed by the inspector presented as clean, organised, adequately heated and fresh smelling throughout. Décor and furnishings were found to be dated though fit for purpose.

Five requirements were made as a result of the secondary unannounced inspection, details can be found in the main body of the report and the attached Quality Improvement Plan (QIP).

The inspectors would like to thank the residents, registered manager / provider and staff for their assistance and co-operation throughout the inspection process.

### 8.0 Follow up from the previous inspection conducted on 6 November 2013

NO.	REGULATION REF.	REQUIREMENTS	ACTION TAKEN - AS CONFIRMED DURING THIS INSPECTION	INSPECTOR'S VALIDATION OF COMPLIANCE
1.	Regulation 21 Sch 2.7	<p><b><u>Physical and mental health assessment</u></b></p> <p>The registered is required to ensure selected staff for appointment seek pre- employment evidence that the person is physically and mentally fit for the purposes of the work they have to perform in the home,</p> <p>(Currently staff sign a declaration template which would be acceptable, in accordance with legislation, if it was impracticable to obtain the aforementioned evidence).</p>	Six files were viewed of recently recruited staff; five of these files contained completed Health and Fitness Questionnaires which included a declaration that individuals GP's could be contacted.	Substantially Compliant



<b>STANDARD 19 Residential Care and Standard 11 Domiciliary Care - RECRUITMENT OF STAFF</b> <b>Staff are recruited and employed in accordance with relevant statutory employment legislation.</b>	
<b>Criterion Assessed:</b>	<b>COMPLIANCE LEVEL</b>
<p>19.1 The policy and procedures for staff recruitment detail the recruitment process and comply with legislative requirements and DHSSPS guidance.</p>	
<b>Inspection Findings:</b>	
<p>Inspectors viewed the policy and procedures in place for recruitment of staff. This was requested from the home following the receipt of information which raised concerns about the homes recruitment and induction procedures. A policy was provided to RQIA titled Guardian Day Centre and Residential Care Recruitment Selection Policy, another policy and procedure titled Jackie’s Domiciliary Care Recruitment of Staff Policy and Procedure dated 2012 was shared with the inspectors during the inspection. A review of the policies showed that they included information relating to the initial selection procedure, the interview process and offers of employment. The detail of information was noted to vary significantly between the two policies. Advice was given to the registered manager during the inspection on how to restructure the information and to develop one clear and comprehensive recruitment and selection policy which would meet the requirements set out in both the Residential Care Homes Regulations (Northern Ireland) 2005 and the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.</p> <p>A requirement was made in this regard, and was included in the urgent actions letter provided to the registered manager on the day of the inspection.</p>	<p>Moving towards compliance</p>

**STANDARD 19 Residential Care and Standard 11 Domiciliary Care - RECRUITMENT OF STAFF  
Staff are recruited and employed in accordance with relevant statutory employment legislation.**

<b>Criterion Assessed:</b>	<b>COMPLIANCE LEVEL</b>
<p>19.2 Before making an offer of employment: -</p> <ul style="list-style-type: none"> <li>• The applicant’s identity is confirmed</li> <li>• Two written references, linked to the requirements of the job are obtained, one of which is from the applicant’s present or most recent employer</li> <li>• Any gaps in an employment record are explored and explanations recorded</li> <li>• Protection of Children and Vulnerable Adults (POCVA) checks and police checks are carried out (where applicants come from countries outside the United Kingdom, pre-employment checks are carried out with the national agency in the country of origin)</li> <li>• Professional and vocational qualifications are confirmed</li> <li>• Registration status with relevant regulatory bodies is confirmed</li> <li>• A pre-employment health assessment is obtained</li> <li>• Current status of work permit/employment visa is confirmed.</li> </ul> <p><b>Inspection Findings:</b></p> <p>Inspectors viewed files for the six most recently recruited members of staff. A number of omissions were highlighted to the registered manager in relation to the recruitment documentation. It was noted from the six files which were reviewed that three staff members commenced employment at the home prior to two satisfactory references being obtained. One reference was found to have been provided six months after the staff member had commenced employment another reference available was not dated. One of the files viewed did not include proof of identity. NISCC registration confirmation was not available for four of the new staff members employed to work in the residential care home.</p> <p>The need to ensure all procedures are followed when recruiting new staff including receiving all appropriate information in advance of making an offer of employment was discussed with the registered manager. This was outlined in the urgent actions letter provided to the manager on the day of inspection. A requirement has been made that all appropriate information should be received by the employer prior to making an offer of employment.</p>	<p align="center">Not compliant</p>

<b>STANDARD 19 Residential Care and Standard 11 Domiciliary Care - RECRUITMENT OF STAFF</b> <b>Staff are recruited and employed in accordance with relevant statutory employment legislation..</b>	
<b>Criterion Assessed:</b>	<b>COMPLIANCE LEVEL</b>
19.3 Records are kept of all the documentation relating to the recruitment process. Details of information obtained as a result of a POCVA check should be handled as per paragraph 5.9 of DHSSPS guidance “Choosing to Protect”.	
<b>Inspection Findings:</b>	
<p>From the six files which were reviewed these were found to include relevant documentation relating to the recruitment process including completed application forms, interview questions, responses, and scoring information. Variations were noted in relation to the number of questions which were asked during interview, and also in relation to how many people were on the interview panels.</p> <p>Access NI certificate codes were available in five of the six files reviewed. During the inspection confirmation was sought directly from the Access NI department that the sixth Access NI enhanced disclosure check had been carried out as the staff members file did not include the relevant information. Confirmation that this had been carried out was given to the inspector.</p>	Moving towards compliance
<b>Criterion Assessed:</b>	<b>COMPLIANCE LEVEL</b>
19.4 Staff are issued with a written statement of main terms and conditions prior to employment and no later than thirteen weeks after appointment.	
<b>Inspection Findings:</b>	
Three of the staff files reviewed included copies of terms and conditions of employment which had been provided to staff members. One recently recruited staff member was contacted during the inspection via telephone. The staff member confirmed to the inspector that they had received a copy of their main terms and conditions.	Moving towards compliance

**STANDARD 19 Residential Care and Standard 11 Domiciliary Care- RECRUITMENT OF STAFF**  
**Staff are recruited and employed in accordance with relevant statutory employment legislation..**

<b>Criterion Assessed:</b> 19.5 Job descriptions are issued to staff on appointment.	<b>COMPLIANCE LEVEL</b>
<b>Inspection Findings:</b> From the six staff members files which were reviewed four of these were found to contain job descriptions. Two job descriptions were signed by staff members the other two had not been signed by staff members.	Moving towards compliance
<b>Criterion Assessed:</b> 19.6 Residents, or where appropriate their representatives, are involved in the recruitment process where possible.	<b>COMPLIANCE LEVEL</b>
<b>Inspection Findings:</b> This criterion was not reviewed during this inspection.	Not Reviewed

<b>INSPECTOR'S OVERALL ASSESSMENT OF THE RESIDENTIAL HOME'S COMPLIANCE LEVEL AGAINST THE STANDARD ASSESSED</b>	<b>COMPLIANCE LEVEL</b>
	Moving towards compliance

## **10.0 Additional Areas Examined**

### **10.1 Staff Induction / Orientation**

Prior to the inspection RQIA had requested duty rotas from week beginning 28 July 2014 until week beginning 24 August 2014. This related to the time period when a new staff member was alleged to have been required to complete night duty without having received a proper induction to the service. Day and night duty rotas for this time period were reviewed these were found to include the names of three new staff members with designated orientation periods. According to information on the rota the orientation period for the new day staff members was carried out over a three day period and included the shadowing of other staff members. Information on the duty rotas also showed the orientation period for a new night duty staff member was two days in week one from 10am-2pm and 7pm- 9pm respectively, and 7pm - 9pm and 7am - 9am the following week. Following the orientation period the new staff member was on the rota to cover night duty alone. The induction and training records for the three newly appointed members of staff were also reviewed and showed that mandatory training as per RQIA guidance had not been completed, it was also noted that one staff member had not signed off their training records.

A review of training completed as part of the induction period showed that on one occasion a new staff member was recorded as having completed all mandatory training and read and understood the homes policy and procedure manual on the same day. Inspectors were not satisfied that this amount of information could be grasped in one day. Four other files reviewed showed that the induction training had been completed over 3-4 days.

An urgent actions letter was completed outlining the need to ensure all new staff complete a full induction period to ensure they have the necessary training to carry out the duties of the post. A requirement has been made in this regard.

### **10.2 Duty Rota**

The staff duty rota was reviewed during the inspection. At the time of the inspection the registered manager and deputy manager were on duty. It was noted that the information contained on the rota had been changed a number of times for the week. Review of the rota showed it to be confusing, the rota did not reflect the staff which were on duty for the week or who was on night duty on the date of the inspection. The manager informed the inspectors that a member of staff had reported sick, however it was noted that this did not account for all the inconsistencies on the rota. The manager then informed the inspectors that the wrong duty rota had been provided, and presented a revised edition which continued to show inconsistencies.

The need for the duty rota to be current, accurate and reflective of staffing levels in the home was discussed with the registered manager and outlined in the urgent actions letter which was given to the registered manager at the conclusion of the inspection. The inspectors also requested that the duty rotas for the remaining weeks of September be forwarded to RQIA for review. A requirement has been made in this regard.

### **10.3 Resident's consultation**

One of the inspectors' met with five residents individually and in groups. Residents were observed relaxing in the communal lounge area whilst others were resting in their bedrooms. In accordance with their capabilities, all residents indicated/expressed that they were happy and content with their life in the home, with the facilities and services provided and their relationship with staff. No concerns were expressed or indicated.

Comments received included:

"The girls are kind, I like having someone to talk to"

"I am happy here"

### **10.3 Staff consultation**

One inspector spoke with the staff member on duty, and one contacted a recently recruited member of staff via telephone during the inspection. Discussion with staff identified that they were supported in their respective roles. Staff confirmed that they are provided with the relevant resources to undertake their duties. The recently recruited staff member who was contacted via telephone during the inspection confirmed to the inspector that they had shadowed other staff members for approximately one week upon commencement of employment. It was noted by inspectors that this information was not reflected in the staff members file.

### **10.4 Environment**

One inspector viewed the home accompanied by Ms Mullen the deputy manager and alone and inspected a number of residents' bedrooms and communal areas. The areas of the environment viewed presented as clean, organised, adequately heated and fresh smelling throughout. Residents' bedrooms were observed to be homely and personalised. Décor and furnishings were found to be dated though fit for purpose.

## 12.0 Quality Improvement Plan

The details of the Quality Improvement Plan appended to this report were discussed with Jacqueline Ryan, as part of the inspection process.

The timescales for completion commence from the date of inspection.

The registered provider/manager is required to record comments on the Quality Improvement Plan.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

Enquiries relating to this report should be addressed to:

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**Bronagh Duggan**  
**The Regulation and Quality Improvement Authority**  
**9th Floor**  
**Riverside Tower**  
**5 Lanyon Place**  
**Belfast**  
**BT1 3BT**



## Quality Improvement Plan

### Secondary Unannounced Care Inspection

#### Guardian Day Centre and Residential Care / Jackie's Domiciliary Care

4 September 2014

The areas where the service needs to improve, as identified during this inspection visit, are detailed in the inspection report and Quality Improvement Plan.

The specific actions set out in the Quality Improvement Plan were discussed with Mrs Jacqueline Ryan either during or after the inspection visit.

Any matters that require completion within 28 days of the inspection visit have also been set out in separate correspondence to the registered persons.

**Registered providers / managers should note that failure to comply with regulations may lead to further enforcement and/ or prosecution action as set out in The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.**

It is the responsibility of the registered provider / manager to ensure that all requirements and recommendations contained within the Quality Improvement Plan 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.



**Statutory Requirements**

This section outlines the actions which must be taken so that the Registered Person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (NI) 2005 and The Domiciliary Care Agency Regulations (NI) 2007

No.	Regulation Reference	Requirements	Number Of Times Stated	Details Of Action Taken By Registered Person(S)	Timescale
1.	Regulation 13, Schedule 3, Standard 11 (Domiciliary Care) and Regulation 20, 21, Schedule 2, and Standard 19 (Residential Care)	The registered manager must revise the policy and procedures in relation to the recruitment of staff ensuring compliance with regulations and minimum standards in relation to the functioning of the residential care home, day care and domiciliary care services.	One	The recruitment policy and procedure has been revised and the updated policy has been placed in the policy and procedure manual.	2 October 2014
2.	Regulation 13, Schedule 3, Standard 11 (Domiciliary Care) and Regulation 20, 21, Schedule 2, and Standard 19 (Residential Care)	The registered manager must implement the revised procedures for all new staff recruited from 4 September 2014 within the residential home, day care and domiciliary care services.	One	The new policy and procedure has been implemented as of the 4 <sup>th</sup> September 2014.	2 October 2014

3.	Regulation 16(5), Standard 12 (Domiciliary Care) and Regulation 20, Schedule 2, and Standard 23 (Residential Care)	The registered manager must ensure all staff employed to work in the residential home, day care and domiciliary care services complete a full induction, including mandatory training, and are registered with the appropriate regulatory or occupational body.	One	All staff employed to work in the residential home, day care and domiciliary care services complete a full induction, which includes mandatory training, are scheduled for further training, appraisals and supervisions and are registered with NISCC where appropriate. The registered manager Jackie Ryan has also completed training in the induction of staff.	From the date of inspection and ongoing.
4.	Regulation 19 (2) Schedule 4 7 (Residential Care)	The registered manager must ensure that the staff duty rota is current, accurate and reflective of staffing levels at all times.	One	Staff Duty Rotas are current and accurate and reflective of staffing levels at all times and filed appropriately.	From the date of inspection and ongoing.
5.	Regulation 19 (2) Schedule 4 6 (Residential Care)	The registered manager must return the next six staff recruitment and induction records to RQIA for review. The registered manager must ensure this information is password protected.	One	The six staff recruited after 4 <sup>th</sup> September will have their folders, including record of induction, forwarded as requested and password protected.	From the date of inspection.

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:

<b>NAME OF REGISTERED MANAGER COMPLETING QIP</b>	Jackie Ryan
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	Jackie Ryan

<b>QIP Position Based on Comments from Registered Persons</b>	<b>Yes</b>	<b>Inspector</b>	<b>Date</b>
Response assessed by inspector as acceptable	Yes	Bronagh Duggan	30.1.15
Further information requested from provider			