

# Announced Care Inspection Report 16 July 2018



## Glen Caring Services

**Type of Service: Domiciliary Care Agency**  
**Address: 14 Mountjoy Road, Omagh BT79 7AD**  
**Tel No: 02882252666**  
**Inspector: Caroline Rix**

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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 from their responsibility for maintaining compliance with legislation, standards and best practice.

**1.0 What we look for**



**2.0 Profile of service**

Glen Caring Services Omagh is registered as a domiciliary care agency which may provide a range of personal care services to people living in their own homes. The agency has not been operational since April 2018.

### 3.0 Service details

<b>Registered organisation/registered person:</b> Glen Caring Services Ltd/Linda Florence Beckett	<b>Registered manager:</b> Linda Florence Beckett
<b>Person in charge of the home at the time of inspection:</b> Linda Florence Beckett	<b>Date manager registered:</b> 28 September 2009

### 4.0 Inspection summary

An announced inspection took place on 16 July 2018 from 09.00 to 10.30hours.

This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

The inspection assessed progress with any areas for improvement identified since the last care inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

The registered person/manager Linda Beckett advised the inspector that the agency, while registered as a domiciliary care agency, is not currently operating as such.

Areas requiring improvement were identified during the inspection in relation to the review of their recruitment procedure and statement of purpose.

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>	2	0

Details of the Quality Improvement Plan (QIP) were discussed with Linda Beckett, the registered person/manager as part of the inspection process. The timescales for completion commence from the date of inspection.

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

### 4.2 Action/enforcement taken following the most recent care inspection dated 29 March 2018

No further actions were required to be taken following the most recent inspection on 29 March 2018.

## 5.0 How we inspect

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

- Previous inspection report
- All communication with the agency

During the inspection the inspector spoke with the registered person/manager.

The following records were examined during the inspection:

- A range of policies and procedures relating to recruitment, complaints management and safeguarding
- Statement of purpose
- Service user guide

The findings of the inspection were provided to the registered person/manager at the conclusion of the inspection.

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 29 March 2018

The most recent inspection of the agency was an unannounced care inspection.

### 6.2 Review of areas for improvement from the last care inspection dated 29 March 2018

There were no areas for improvement made as a result of the last care inspection.

### 6.3 Inspection findings

From discussions with the registered person/manager, it was evident that at the time of the inspection the agency was not supplying domiciliary care workers into service users' homes.

The organisational and management structure of the agency are outlined in the Statement of Purpose; it details lines of accountability. However this document contains details of former employees and did not contain updated information regarding the Northern Ireland Public Services Ombudsman. This area was discussed with the registered person/manager as needing to be reviewed and an area for improvement has been made in this regard.

A range of policies and procedures were reviewed relating to staff recruitment, complaints management and safeguarding.

The inspector found the complaints management and safeguarding policies and procedures to be up to date and compliant with related regulations and standards. However, the staff recruitment procedure did not provide clear information in relation to obtaining two written references for prospective employees. This area was discussed with the registered person/manager and an area for improvement has been made in relating to updating their recruitment procedure in line with regulation 13.

The agency's complaints procedure viewed was found to be in line with regulations and standards.

The agency's policy and procedure in relation to safeguarding adults was reviewed. The 'Safeguarding Adults' policy and procedure provided information and guidance as required; and referenced the Department of Health, Social Services and Public Safety Northern Ireland (DHSSPSNI) guidance of July 2015 'Adult Safeguarding Prevention and Protection in Partnership'. The registered person/manager is named as the agency's Adult Safeguarding champion with key responsibilities detailed in their procedure in line with required guidance.

The agency's registered premises include a suite of offices and staff facilities which are suitable for the operation of the agency as set in the Statement of Purpose. Review of records management arrangements within the agency evidenced that appropriate storage and data protection measures were being maintained.

### **Areas for improvement**

Two areas for improvement have been identified in relating to updating their recruitment procedure in line with Regulation 13 and reviewing their Statement of Purpose.

## **7.0 Quality improvement plan**

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Linda Beckett, the registered person/manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP 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 the agency. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

## **7.1 Areas for improvement**

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

## 7.2 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.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007</b>	
<p><b>Area for improvement 1</b></p> <p>Ref: Regulation 7(a)</p> <p>Stated: First time</p> <p>To be completed by: 1 October 2018</p>	<p>The registered person shall keep under review and where appropriate revise the statement of purpose and the service user's guide.</p> <p>Ref: 6.3</p> <p><b>Response by registered person detailing the actions taken:</b> The service users guide is under review and will be published in October 2018</p>
<p><b>Area for improvement 2</b></p> <p>Ref: Regulation 13 Schedule 3 (4)</p> <p>Stated: First time</p> <p>To be completed by: 30 August 2018</p>	<p>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.</p> <p>Ref: 6.3</p> <p><b>Response by registered person detailing the actions taken:</b> The recruitment policy has been updated to reflect full and satisfactory information is available in relation to potential employees in respect of each of the matters specified in schedule 3</p>

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



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