



The Regulation and  
Quality Improvement  
Authority

Down Community Care  
RQIA ID: 10766  
46 / 48 Kildare Street  
Ardglass  
BT30 7TR

Inspector: Caroline Rix  
Inspection ID: IN021308

Tel: 02844842606  
Email: [downcommunitycare@myrainbowmail.com](mailto:downcommunitycare@myrainbowmail.com)

---

**Unannounced Care Inspection  
of  
Down Community Care  
13 April 2015**

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](http://www.rqia.org.uk)

## 1. Summary of Inspection

An unannounced care inspection took place on **13 April 2015** from 09.30 to 15.45. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

### 1.1 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.

### 1.2 Actions/Enforcement Resulting from this Inspection

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

### 1.3 Inspection Outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Down Community Care/Susan Virginia Ward	<b>Registered Manager:</b> Sammie-Jo Ward
<b>Person in Charge of the Home at the Time of Inspection:</b> Sammie-Jo Ward	<b>Date Registered:</b> 04/02/2009
<b>Number of service users in receipt of a service on the day of Inspection:</b> 164	

## 3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following themes have been met:

- Theme 1 - The views of service users and their carers / representatives shape the quality of services provided by the agency
- Theme 2 – Management systems and arrangements are in place that support and promote the quality of care services

## 4. Methods/Process

Prior to inspection the following records were analysed:

- Previous inspection report
- Previous returned quality improvement plan
- Records of notifiable events
- User Consultation Officer (UCO) report

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

- Discussion with the registered manager
- Examination of records
- Consultation with staff
- File audits
- Evaluation and feedback.

As part of the inspection the User Consultation Officer (UCO) spoke with seven relatives on 8 and 9 April 2015 to obtain their views of the service being provided by Down Community Care. The service users interviewed have been using the agency for a period of time ranging from approximately three months to three years, and receive personal care or respite at least once per week from the agency. The findings from their feedback have been included within the body of this report.

During the inspection the inspector met with two care staff.

The following records were examined during the inspection:

- Four care plans and risk assessments
- HSC Trust referrals with timetables of services
- Service user agreements
- Care review, quality monitoring visit/ survey feedback records
- Four service user contact logs
- Monthly monitoring reports for December 2014, January and February 2015
- Annual quality review report for 2014
- Compliments log and records for 2014/2015
- Complaints log and records for 2014/2015
- Notification of incidents log and record for 2014/2015
- Staff meeting minutes for January and February 2015
- Staff handbook
- On-call communication record
- Staff duty rota for week commencing 13 April 2015
- Staff training records
- Three staff monitoring/supervision records

## **5. The Inspection**

Down Community Care is a conventional domiciliary care agency situated in Ardglass, Co.Down. The agency is managed on a day-to-day basis by Miss Sammie-Jo Ward, registered manager and office manager Mrs Anne Marie McIlhone. The agency provides care services to 164 service users by a team of 78 staff. The agency covers the geographical area of Co.Down. Services are provided to people in their own homes and include personal care and social support. Currently, all service users have been referred by the South Eastern Health and Social Care Trust and services are being provided to adults, children and young people. Referrals from private clients would be accepted.

### **Review of Requirements and Recommendations from Previous Inspection**

The previous inspection of the Down Community Care was an unannounced care inspection dated 12 May 2014. The completed QIP was returned and approved by the care inspector.

## 5.1 Review of Requirements and Recommendations from the last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b>  <b>Ref:</b> Regulation 13 Schedule 3	The registered manager must ensure that their staff recruitment procedure includes details under each section of their process including a statement by the registered person/manager that the applicant is mentally and physically fit for the work he is to perform.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed that the staff recruitment procedure had been revised in May 2014 and now includes all the required elements.	
Previous Inspection Recommendations		Validation of Compliance
<b>Recommendation 1</b>  <b>Ref:</b> Minimum Standard 8.1	The registered manager is recommended expand their statement of purpose to include the roles and responsibilities of senior staff.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The statement of purpose viewed had been expanded in May 2014 to include the specific roles and responsibilities of senior staff.	
<b>Recommendation 2</b>  <b>Ref:</b> Minimum Standard 13.3	The registered manager is recommended to ensure supervision of the office manager and coordinators are completed and recorded quarterly.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Records evidenced that supervision meetings had been completed and recorded three monthly with the office manager and coordinators.	

<p><b>Recommendation 3</b></p> <p>Ref: Minimum Standard 5.2 &amp; 5.6</p>	<p>The registered manager is recommended to ensure that full and accurate records are maintained consistently within service users daily records.</p>	<p><b>Met</b></p>
<p><b>Action taken as confirmed during the inspection:</b></p> <p>Records evidenced that a system is in place to monitor staff recording within daily log sheets, both during observations in service user's homes and auditing of returned recording sheets. Any identified practise issues have been addressed with care staff where applicable.</p>		
<p><b>Recommendation 4</b></p> <p>Ref: Minimum Standard 3.3</p>	<p>The registered manager is recommended to ensure individual care plans and risk assessments include specific management plans relating to the area of restraint.</p>	<p><b>Met</b></p>
<p><b>Action taken as confirmed during the inspection:</b></p> <p>Records evidenced that service user care plans/risk assessments have been revised, where applicable, to include details relating to restraint management.</p>		

## **5.2 Theme 1: The views of service users and their carers / representatives shape the quality of services provided by the agency**

### **Is Care Safe?**

Service user referral information received from HSC Trust care managers contained limited information regarding service user and/or representative's views. The referrals detailed the timetable of services being commissioned and relevant risk assessments. The agency care plans and risk assessments completed during their initial visit at service commencement contained evidence that service users and/or representative's views had been obtained and incorporated, where possible. This was discussed during the UCO interviews, some of the relatives confirmed that they had been involved in the initial planning of the care package. Two relatives requested male carers for their family member and this is accommodated where possible by the agency.

The UCO was advised that new members of staff are introduced to service users by a regular carer; this was felt to be important both in terms of service user's security and the carer's knowledge of the required care.

The documentation reviewed during UCO home visits contained care plans and risk assessments. However two care plans were found to be out of date and the agency records verified that these revised care plans had just been received from the care manager. Records confirmed that care staff had been updated regarding the care plan changes, but the revised care plans had not yet been copied into the home files.

Example of a comment made by service users or their relatives listed below:

- "Like part of the family."

Staffs interviewed on day of inspection were able to describe aspects of care provision which reflected their understanding of service user's choice, dignity, and respect.

Overall on the day of the inspection we found the care to be safe.

### **Is Care Effective?**

It was good to note that the majority of the people interviewed had no concerns regarding the quality of care being provided by the staff from Down Community Care.

The UCO was advised that there were mixed results regarding the agency's management visiting to ensure satisfaction with the service or that observation of staff practice had taken place. The majority were able to confirm that they have received a questionnaire from the agency to obtain their views of the service.

Service user records viewed in the agency office evidenced regular visits and feedback received had been followed up. These records evidenced that the agency carries out care reviews with service users at least twice a year, and when changes to their needs were identified. The agency maintains a communication log for each service user where details of requests for changes are noted along with actions taken. Subsequent records viewed confirmed requests had been accommodated by the agency or forwarded to the care manager for their consideration.

Staff interviewed on the day of inspection confirmed that they were provided with details of care planned for each new service user. They provided examples to demonstrate how they promote service user independence, choices and respect.

All of the people interviewed were aware of whom they should contact if any issues arise regarding the service. Two relatives advised that they had made complaints to the agency. One had been addressed to their satisfaction; however one was ongoing and was discussed with the registered manager during the inspection.

The complaints records sampled during inspection were found to be appropriately detailed and demonstrated the actions taken to resolve the matters in a timely manner.

The compliments records reviewed during inspection contained extremely positive feedback regarding the care provided, and these had been shared with staff at team meetings and individually.

The most recent monthly monitoring reports reviewed evidenced working practises are being systematically reviewed.

Examples of some of the comments made by service users or their relatives are listed below:

- “Very happy with the carers.”
- “No complaints at all.”

Overall on the day of the inspection we found the care to be effective.

### **Is Care Compassionate?**

The UCO was advised that care is being provided by consistent carers; all of the people interviewed felt this was important as it allows a good relationship to develop between service users, family and carers. The UCO was informed that the service users are, as far as possible, are allowed to complete tasks themselves and given their choice in regards to outings. A number of service users experience confusion or mobility issues; the relatives confirmed that they felt that the staff are knowledgeable and well trained in working with service users with these conditions.

Examples of some of the comments made by service users or their relatives are listed below:

- “My XXX gets on so well with his carer and gets to choose what they do together.”
- “Don’t know what we would do without them.”

Both staff interviewed confirmed that service users’ views and experiences are taken into account in the way service is delivered.

Overall on the day of the inspection we found the care to be compassionate.

### **Areas for Improvement**

<b>Number of Requirements</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
-------------------------------	----------	-----------------------------------	----------



### 5.3 Theme 2: Management systems and arrangements are in place that support and promote the quality of care services

#### Is Care Safe?

A range of management systems, policies and processes relating to communication channels with service users and their relatives were viewed. These included daily contacts, on call arrangements and management of missed calls. Where relevant, records confirmed that information had been communicated to the commissioning trust via telephone calls and emails.

All of the people interviewed had no concerns regarding the timekeeping of the agency's staff and they would be contacted by the agency if their carer had been significantly delayed, this is good practice.

Overall on the day of the inspection we found the care to be safe.

#### Is Care Effective?

Management of missed calls and changes to service user needs were reviewed during inspection as taking place and had been evidenced as appropriately managed. Records evidenced that where missed calls or poor timekeeping had been identified, the staff involved had been appropriately managed through supervision and/or disciplinary action to address the issues. The registered manager confirmed that ongoing staff monitoring ensures these issues are not repeated.

The on-call log viewed evidenced that on occasions, calls were noted as 'missed' when in fact the service user had not been home, but the agency had not been informed by the trust care manager/ hospital social worker or family.

Staff interviewed confirmed that they felt supported by senior staff, demonstrated a clear understanding of their reporting processes if running late for next service user visit or were unable to gain access a service user's home.

Overall on the day of the inspection we found the care to be effective.

#### Is Care Compassionate?

During UCO contacts, no concerns were raised regarding the length of calls; none of the people interviewed felt that care was being rushed.

Overall on the day of the inspection we found the care to be compassionate.

#### Areas for Improvement

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
-------------------------------	----------	--------------------------------	----------

## 5.4 Additional Areas Examined

The inspector reviewed the agency's RQIA notification of incidents log, with one report received during the past year. Review of this incident confirmed appropriate recording and reporting to RQIA regarding the medication matter within appropriate timeframes.

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 Down Community Care agency. 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. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the Down Community Care.

**No requirements or recommendations resulted from this inspection.**

<b>I agree with the content of the report.</b>			
<b>Registered Manager</b>	Sammie Jo Ward	<b>Date Completed</b>	23.6.15
<b>Registered Person</b>	Susan Virginia Ward	<b>Date Approved</b>	23.6.15
<b>RQIA Inspector Assessing Response</b>	<b>Caroline Rix</b>	<b>Date Approved</b>	<b>23/06/15</b>

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

*\*Please complete in full and return to RQIA [Agencies.Team@rqia.org.uk](mailto:Agencies.Team@rqia.org.uk)*