

# Unannounced Care Inspection Report 3 March 2020



## Abbots Court Supported Living Scheme

**Type of Service: Domiciliary Care Agency**  
**Address: 10 Abbots Court, Newtownabbey, BT37 9RL**  
**Tel No: 02890360690**  
**Inspector: Kieran Murray**

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

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

## 1.0 What we look for



## 2.0 Profile of service

Abbots Court Supported Living Scheme is a domiciliary care agency supported living type which provides services for up to 13 service users living in their own homes within the Northern Health and Social Care Trust (NHSCT) area. Service users require care and support for a range of needs relating to their learning disabilities. The service users are supported by 11 staff.

## 3.0 Service details

<p><b>Organisation/Registered Provider:</b> Northern Health and Social Care Trust</p>	<p><b>Registered Manager:</b> Mrs Rosemary Alida Wray</p>
<p><b>Responsible Individual:</b> Dr Anthony Baxter Stevens</p>	

<b>Person in charge at the time of inspection:</b> Deputy Manager	<b>Date manager registered:</b> 19 November 2012
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#### 4.0 Inspection summary

An unannounced inspection took place on 3 March 2020 from 13.10 to 17.30.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017 the Domiciliary Care Agencies Minimum Standards, 2011.

The inspection sought to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

All service users, relatives, NHSCT community professionals and staff spoken with said they were very happy with the care and support provided.

An area of concern was identified in relation to safe recruitment processes specifically relating to AccessNI. This concern has the potential to impact negatively on service users. An area requiring improvement was identified in relation to the completion of AccessNI checks for all staff before commencement of employment.

Evidence of good practice was found in relation to staff registrations with the Northern Ireland Social Care Council (NISCC) and the Nursing and Midwifery Council (NMC).

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>	1	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with the deputy 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 27 November 2018

No further actions were required to be taken following the most recent inspection on 27 November 2018.

## 5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this agency. This included the previous inspection report, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, their relatives and staff to obtain their views on the quality of the service provided. We also received email communication from NHSCT community professionals involved with the service.

We ensured that the appropriate staff checks were in place before staff visited service users.

- Recruitment records specifically relating to Access NI and NISCC/NMC registrations.

Ten questionnaires were provided for distribution to the service users and their relatives; eight responses were returned; analysis and comments are included within the report.

At the request of the inspector, the manager was asked to display a poster prominently within the agency's registered premises. The poster invited staff to give their views and provided staff with an electronic means of providing feedback to RQIA regarding the quality of service provision. Three responses were received prior to the issue of the report.

The inspector requested that the manager place a 'Have we missed you?' card in a prominent position in the agency to allow service users and family members who were not available on the day of the inspection to give feedback to RQIA regarding the quality of service provision. No responses were received prior to the issue of the report.

RQIA information leaflets 'How can I raise a concern about an independent health and social care service' were also provided to be displayed appropriately in the setting.

During the inspection the inspector met with three service users, the manager, deputy manager, three staff members, and spoke to three service users' relatives via telephone. On the day of the inspection one NHSCT community professional forwarded communication about the agency via email to the manager.

The inspector would like to thank the manager, deputy manager, service users, service user's relatives, NHSCT community professionals and staff for their support and co-operation throughout the inspection process.

The findings of the inspection were provided to the deputy manager at the conclusion of the inspection.

## 6.0 The inspection

There were no areas for improvement made as a result of the last care inspection 27 November 2018.

## 6.1 Inspection findings

The agency's staff recruitment processes were noted to be managed in conjunction with the organisation's Human Resources (HR) Department, located at the Business Services Organisation (BSO). The inspector noted that two AccessNI checks for staff recently recruited through the inter-trust process were not completed in accordance with Regulation 13, Schedule 3 and Standard 11. This was discussed with the person in charge and an area for improvement has been stated in this regard.

A review of 18 staff records confirmed that all staff were currently registered with NISCC and NMC as required. The inspector noted that the manager had a system in place each month for monitoring registration status of staff with the relevant regulatory body and confirmed that all staff are aware that they are not permitted to work if their NISCC or NMC registration had lapsed.

### Service user comments:

- "I can't think of anything wrong at present."
- "The staff are very good, kind thoughtful and caring."
- "I like my bungalow."
- "Staff support me a lot."
- "I watched River Dance at the Odyssey."
- "The staff are nice."
- "Happy with Abbots Court."
- "I love living in my own home."
- "Everyone is helpful and caring."
- "I am going to Larne for the pool competition and staying overnight."
- "I like using my ipad."
- "I have no complaints or worries."
- "I use my phone and telephone staff in the office if I need them."

The inspector spoke to three staff members, who were knowledgeable in relation to their responsibility in reporting concerns. The staff members spoken to were confident that management would take them seriously and act upon their concerns. Some comments received are detailed below:

### Staff comments:

- "We got an induction on the ethos of supported living."
- "We got a corporate and local induction."
- "Management listen to safeguarding concerns."
- "We have a new secretary and she is good at planning things."
- "Management are very obliging and flexible."
- "XXXX is always on the end of the phone."
- "There are no animosities in the team."

The inspector also spoke to three service users' relatives and received email communication from a NHSCT community professional. Some comments are detailed below:

**Relative’s comments:**

- “Staff encourages XXXX (service user) to participate.”
- “I have attended reviews and I find them helpful as you just talk through things.”
- “I am very involved in XXXX’s (service user) care with staff.”
- “There should be more places like Abbots Court.”
- “Staff are very compassionate and caring.”
- “They have XXXX’s (service user)best interests at heart.”

**NHSCT community professional’s email comments:**

- “Tenants and their families are listened to.”
- “Abbots Court have evidenced multidisciplinary team (MDT) working at its highest level particularly over the past few months with no challenge seen as too great.”
- “I am confident that Abbots Court as a staff team will face every challenge in a person centred way alongside the tenant, family and the community MDT.”
- “I think this service clearly shows any suggestions or improvements are taken on board in a practical way with safety and quality of life vital components.”

The returned questionnaires from service users/relatives indicated that they felt very satisfied that care was safe, effective and compassionate and that the service was well led.

The returned responses from staff indicated that they felt satisfied that care was safe, effective, and compassionate and that the service was well led.

**Areas of good practice**

Areas of good practice were identified in relation to staff registration with NISCC and the NMC.

**Areas for improvement**

An area for improvement was identified in relation to completion of AccessNI checks for all new staff.

	Regulations	Standards
<b>Total number of areas for improvement</b>	1	0

**7.0 Quality improvement plan**

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mrs Rosemary Wray, Registered 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.

### **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.

## Quality Improvement Plan

### Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007

<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 13 (d) Schedule 3</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate and ongoing</p>	<p>The registered person shall ensure that a robust system is in place to ensure that required AccessNI checks are completed for new staff members prior to the commencement of employment.</p> <p>This relates to all new staff including staff transferred from another area within the HSCT.</p> <p>Ref: 6.1</p>
	<p><b>Response by registered person detailing the actions taken:</b></p> <p>The Registered Manager had worked in accordance with HSC Cross Organisational Move Appointee Process enabling staff to commence in post while awaiting ANI.</p> <p>The Registered Manager will no longer work in accordance with this process and will wait until ANI checks are completed and available before agreeing a start date with the employee</p>





The **Regulation** and  
**Quality Improvement**  
Authority

The Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT

**Tel** 028 9536 1111  
**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
 [@RQIANews](https://twitter.com/RQIANews)