

Unannounced Care Inspection Report 19 November 2020



Homecare and Nursing Services Ltd

Type of Service: Domiciliary Care Agency
**Address: The Ballyhay Centre, 277a Killaughey Road, Donaghadee,
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Inspector: Corrie Visser

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Assurance, Challenge and Improvement in Health and Social Care

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

Homecare and Nursing Services Ltd is a domiciliary care agency based in Donaghadee which provides a range of personal care, social support and sitting services to 73 people living in their own homes. Their services are commissioned by the South Eastern Health and Social Care Trust (SEHSCT).

3.0 Service details

Organisation/Registered Provider: Homecare and Nursing Services Ltd	Registered Manager: Mrs Jennifer Dodds
Responsible Individual: Mrs Helen Mary Kane	
Person in charge at the time of inspection: Mrs Jennifer Dodds	Date manager registered: 5 March 2009

4.0 Inspection summary

An unannounced inspection took place on 19 November 2020 from 11.00 to 15.00 hours.

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 Domiciliary Care Agencies Minimum Standards, 2011 and The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017.

Due to the coronavirus (COVID-19) pandemic the Department of Health (DOH) directed RQIA to continue to respond to ongoing areas of risk identified in services.

Information received by RQIA prior to this inspection reported that the agency was not adhering to the guidance issued by the Public Health Agency (PHA) in that staff members were not using personal protective equipment (PPE) in line with regional guidance and have not been adhering to satisfactory infection prevention and control (IPC) measures in terms of donning and doffing PPE. Whilst it is not the remit of RQIA to investigate concerns or complaints made by or on behalf of individuals, as this is the responsibility of the registered providers and the commissioners of care, where RQIA is notified of a potential breach of regulations or minimum standards, it will review the matter and take appropriate action as required. In response to this, RQIA decided to undertake an inspection of this service. This inspection was carried out using an on-site inspection approach in line with social distancing guidance.

In light of the concerns received by RQIA, the inspection sought to examine the agency's dissemination of information and communication to staff and the monitoring of staff practice throughout the Covid-19 pandemic. The inspection also sought to assess progress with issues raised since the previous care inspection to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

Prior to the inspection, further communication was received by RQIA reporting that staff practice had changed and they were now compliant with the PHA guidance.

On the day of inspection we did not find evidence to substantiate the reported concerns regarding the misuse of PPE. All appropriate information and guidance had been disseminated to staff and a significant number of spot checks had been carried out on staff, as well as telephone consultations with service users and their families to discuss staffs' practice.

The agency’s provision for the welfare, care and protection of service users was reviewed. We viewed the regional guidance ‘Adult Safeguarding Prevention and Protection in Partnership’ July 2015 maintained by the agency in relation to the safeguarding of adults.

On the day of the inspection it was noted that no incidents had taken place since the previous inspection on 16 May 2019.

The agency maintains and implements a policy relating to complaints. On the day of the inspection it was noted that the agency had received three complaints since the last inspection. The complaints reviewed were dealt with satisfactorily that showed positive outcomes for the complainants.

One area for improvement was identified during this inspection in relation to recruitment.

Evidence of good practice was found in relation to Access NI, staff registrations with the Northern Ireland Social Care Council (NISCC), monitoring/spot checks of staff, management of complaints and the monthly quality monitoring reports.

Good practice was also found in relation to all current Covid-19 guidance and the use of PPE guidelines, Covid-19 education and management including IPC measures.

RQIA will continue to monitor and review the quality of service provided by Homecare and Nursing Services Ltd. and may carry out a further inspection to assess compliance with the regulations and minimum standards.

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
Total number of areas for improvement	1	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Mrs Jennifer Dodds, registered 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 16 May 2019

No further actions were required to be taken following the most recent inspection on 16 May 2019.

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.

Following our inspection we focused on contacting the service users, their relatives, staff and professionals to find out their views on the service.

We ensured that the appropriate staff checks were in place before staff visited service users and reviewed the following areas:

- Recruitment records specifically relating to Access NI and NISCC registration.
- Covid-19: guidance for domiciliary care providers in Northern Ireland. Updated 16 June 2020.

RQIA provided information to service users, staff and other stakeholders that will support feedback on the quality of service delivery. This included “Tell Us” cards, service user/relative questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA. Two responses were received from staff members. Analysis and comments are included in this report.

Following the inspection we communicated with two service users, four staff, five service users’ relatives and one professional.

No areas for improvement were identified at the last inspection.

We would like to thank the registered manager, service users, service users’ relatives and staff for their support and co-operation throughout the inspection process.

The findings of the inspection were provided to the 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.

6.1 Inspection findings

Information received by the RQIA prior to this inspection reported that the agency was not adhering to the guidance issued by the PHA during the Covid-19 pandemic in relation to using PPE appropriately. The SEHSCT wrote to the provider on 10 September 2020 seeking assurances that all staff had the appropriate PPE training and were fully competent in relation to following the regional guidance in terms of donning and doffing PPE and the actions that were in place to ensure staff are compliant and the systems and processes that were in place to monitor staff. The SEHSCT were provided with assurances however further concerns were raised following information received by RQIA. Due to these concerns, the SEHSCT issued a Performance Notice to the agency on 19 October 2020 and followed up with the agency to ensure that the required actions were addressed within specified time scales. The Performance Notice was lifted by the SEHSCT on 23 October 2020 due to the agency’s compliance with the regional guidance.

Recruitment:

On the day of inspection we reviewed three staff files for newly recruited care workers. As stated in Regulation 13, Schedule 3 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007, the reason for leaving a position which involves working with children or

vulnerable adults is required. This was not evident in one recruitment file and not explored or discussed by the manager. Two written references are also required to be sought prior to commencement of employment, one from the previous employer. This was not evident in two recruitment files and one reference was received after the staff member commenced employment. One staff member had a previous caring role, however this agency had not been contacted for a reference. All pre-employment checks should be completed prior to an employment start date being provided which is in line with Regulation 13, Schedule 3. An area for improvement has been stated in this regard.

The NISCC matrix reviewed confirmed all staff were registered with NISCC. The manager advised that an online system provides alerts every Monday if anything is out of date including NISCC, car insurance, training or if there are any new or updated policies and procedures. The manager confirmed that all staff were aware that they are not permitted to work if their NISCC registration has lapsed. Staff also confirmed their knowledge of this when providing feedback.

Monitoring/Spot Checks:

We reviewed the agency's system for ensuring the compliance of staff members with the guidance from the PHA in relation to the use of PPE as per the concerns received by us. We were provided with a sample of spot checks undertaken on staff and the manager reported that 19 spot checks had been undertaken in one week. No issues were identified in relation to the staffs' practice regarding the donning and doffing of PPE or of their knowledge of the regional guidance. They were also knowledgeable regarding the safe disposal of PPE and were observed to double bag the PPE and dispose of it safely. They were also observed car sharing and it was noted that appropriate PPE was worn and new PPE donned prior to providing care to the service user.

It was noted that the complainant had contacted us prior to the inspection advising that staff were now adhering to the guidance and it was confirmed that safe practice was being undertaken.

Comments from service users included:

- "I am very happy with the care I am getting."
- "They couldn't be nicer to me."
- "They are very good."
- "Very friendly and respectful."
- "If I need anything, all I have to do is ask."

Comments from service users' relatives included:

- "They're great."
- "I am glad my relative got a package of care from Helen Kane."
- "The girls are lovely."
- "They provide a better level of care than previous companies."
- "If I have had any concerns, they have been resolved quickly."
- "They wear full PPE."
- "Very friendly."
- "100% happy."
- "Couldn't get better carers."
- "The relationship, banter and craic they have with my relative is great."

Comments from care workers included:

- “100% support from manager.”
- “If there is any new guidance the manager updates us.”
- “We are supplied with more than enough PPE.”
- “The manager and the care coordinators have been doing spot checks on us to check how we are using PPE.”
- “If I have any problems, I can go to my manager and it’s sorted out.”
- “My manager is so understanding.”
- “Super friendly.”
- “There is always someone there for you if you need to speak to someone.”
- “Induction and training are beneficial.”
- “I was told if I didn’t feel confident after my shadowing shifts, I could do more until I felt confident to go out alone.”
- “I get regular supervision.”
- “This company is by far the best I have worked for.”
- “The manager communicates very well with the care workers.”
- “The manager is always there on hand.”
- “The job role and responsibilities were explained during my interview.”
- “Induction was amazing. Everything was explained down to the last detail.”
- “We have received a lot of guidance for Covid-19.”
- “Extra PPE is provided.”

Comments from professionals included:

- “They are pretty good at raising issues at contacting me.”
- “Overall I am happy with them.”
- “The manager is very professional.”
- “They are willing to come to reviews and meetings.”
- “The manager is on the ball.”
- “They are quite flexible.”
- “The package of care is going really well for my service user.”
- “They are willing to resolve any issues.”
- “We work well together.”

Two responses were received from staff members. Both respondents were either very satisfied or satisfied that the care being delivered is safe and compassionate. One respondent was also satisfied that the care was effective and well led, however the second respondent was unsatisfied with these elements of the care.

A comment received from a staff member included:

- “Service users’ homes are not risk assessed by management before staff members go to first call. We get told to go and collect file, then follow care plan. We feel that there should be an element of knowledge, and understanding of what is expected of us. We go in to new clients totally ‘blind’.”

This comment was discussed with the registered manager who advised that the process of taking on a new service user will be discussed with all staff at a team meeting.

Covid-19:

We spoke to the manager and to four staff members who were knowledgeable in relation to their responsibility in relation to Covid-19. Staff stated they were aware of the guidance in relation to the use of PPE for activities that brought them within two metres of service users. Staff were also aware of the need to replace PPE between service users and how to appropriately dispose of used PPE. There was evidence that staff had completed training with regards to IPC and they had been provided with clear guidance. We reviewed the guidance and advice sent to staff as well as information being posted on a private Facebook page for the agency.

We reviewed the current practices relating to the following areas of guidance and good practice relating to Covid-19:

- dissemination of information to staff
- IPC policies and procedures have been updated to address all current guidance in relation to Covid-19
- PPE storage and disposal
- staff training and guidance on IPC and the use of PPE equipment in line with guidance

We reviewed records relating to IPC policies which were in-line with the guidance. The policies and procedures had been updated to include Covid-19.

The procedure and guidance in place show that:

- robust systems are in place to ensure that current IPC guidance is available and accessible to staff.
- all staff working in the service are able to demonstrate their knowledge of IPC practice commensurate to their role and function in the service

From feedback, it was positive to note that staff were working well together to support the best outcomes for service users, in a caring manner whilst being caring and compassionate to both service users and their relatives.

It was also noted that staff were committed to working in line with Covid-19 guidance to ensure that the impact of current measures, strikes the correct balance between keeping people safe and promoting a good quality of life, as highlighted by relatives in their comments. Staff are being vigilant in terms of monitoring people for symptoms and are adhering to the public health guidance in order to minimise the risk of introducing or spreading Covid-19.

Areas of good practice

Areas of good practice was found in relation to Access NI, staff registrations with the Northern Ireland Social Care Council (NISCC), monitoring/spot checks of staff, management of complaints and the monthly quality monitoring reports.

Good practice was also found in relation to all current Covid-19 guidance and the use of PPE guidelines, Covid-19 education and management including infection prevention and control (IPC) measures.

Areas for improvement

One area for improvement was identified in relation to recruitment.

	Regulations	Standards
Total number of areas for improvement	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 Jennifer Dodds, 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>Area for improvement 1</p> <p>Ref: Regulation 13(d) Schedule 3</p> <p>Stated: First time</p> <p>To be completed by: Immediately from the date of inspection and ongoing</p>	<p>The registered person shall ensure that no domiciliary care worker is supplied by the agency unless-</p> <p>(d) full and satisfactory information is available in relation to him in respect of each of the matters in Schedule 3.</p> <p>This relates to references and reasons for leaving care positions being obtained.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken: A new employment record has been created will all sections from schedule 3 that must be fully completed before all staff commence employment.</p>

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



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