

Lucas Love Healthcare RQIA ID: 10886 161-163 Victoria Street Belfast BT1 4PE

Inspector: Jim McBride

Inspection ID: IN22832

Tel: 028 9066 8035 Email: sp@lucaslovehealthcare.com

# Unannounced Care Inspection of Lucas Love Healthcare

14 December 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

# 1. Summary of Inspection

An unannounced care inspection took place on 14 December 2015 from 09.00 to 11.00. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. No areas of improvement were identified during this inspection. 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
Total number of requirements and recommendations made at this inspection	0	0

### 2. Service Details

Registered Organisation/Registered Person:	Registered Manager:
Sinead Polland	Sinead Polland
Person in charge of the agency at the time of Inspection:	Date Manager Registered:
Sinead Polland	26 September 2011
Number of service users in receipt of a service on the day of Inspection. No specific number available	

# 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 and quality improvement plan (QIP)
- Record of notifiable events

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

- Discussion with the registered manager/provider
- Examination of records
- Staff File audits

On the day of inspection the inspector met with the registered manager who is also the registered provider.

The following records were examined during the inspection:

- Six staff personnel files
- Induction records
- Duty rota/time sheets.
- Alphabetical list of staff
- Training records

## 5. The Inspection

On the day of inspection the registered manager/provider facilitated the inspection process. The inspector was advised that Lucas love Healthcare supply care workers to organisations providing domiciliary care in supported living type services. The manager also advised that Lucas Love Healthcare do not supply staff to work directly with service users. Having considered the inspection findings and the presentation of the nature of the services provided by Lucas Love Healthcare during this inspection, RQIA is satisfied that the current supply of staff to other agencies is in the context of employment agency.

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

The previous inspection of the agency was an unannounced care inspection dated 26 February 2015. The completed QIP was returned and approved by the care inspector.

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b> <b>Ref</b> : Regulation 13 Schedule 3 (10)	The registered person/manager is required to ensure that full and satisfactory information is completed in relation to each domiciliary care worker.	Met
	Action taken as confirmed during the inspection:	
	This requirement related to a signature on a medical form that has now been completed.	
Previous Inspection	Recommendations	Validation of Compliance
Previous Inspection Recommendation 1 Ref: Standard 8.17	Recommendations The registered person/manager is recommended to complete update training on each mandatory subject.	
Recommendation 1	The registered person/manager is recommended to	

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

# 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?

The inspector was advised that Lucas love Healthcare has an arrangement with the providers of a number of other domiciliary care agencies, whereby they supply domiciliary care staff to work in the homes of service users who are in receipt of a supported living service.

On the day of inspection there was no evidence within the agency's office of assessments of need, care plans, referrals or reviews. The inspector was advised that this information and all details pertaining to service users are held within the service users' homes. The registered manager discussed how they were assured that the organisations they provide care workers to ensure that their employees receive adequate information to meet the needs of service users.

# Is Care Effective?

The manager confirmed that staff are provided with details of care planned for each service user needs. This information is supplied by staff of the supported living schemes staff are allocated to work in.

The manager confirmed they had received no complaints from any organisation they supply care workers to.

# Is Care Compassionate?

The manager stated that induction includes a range of mandatory training topics. The manager stated that staff are all trained in how to communicate with service users as well as how to promote choice, dignity and independence.

### Areas for Improvement

There were no areas for improvement noted in relation to:

Number of Requirements: 0 Number of Recommendations: 0
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# 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 operational management systems, policies and processes were reviewed within the agency during inspection to ensure communication channels with the organisation they supply care workers to. These included missed call policies and procedures, information on staff supplied. Evidence of these communications was verified during the inspection.

### Is Care Effective?

Procedures in place for staff supervision and appraisal were reviewed during inspection. The inspector examined records of six care staff; the records in place were satisfactory and are in line with the agencies policy. Training records examined on the day of inspection were detailed sufficiently to include the nature and type of training provided.

#### Is Care Compassionate?

The agency has on call arrangements which were outlined to the inspector. The inspector noted efforts by the agency to ensure there was continuity of care in respect of the care workers supplied.

#### **Areas for Improvement**

No areas for improvement were identified in this theme.

Number of Requirements:	0	Number of Recommendations:	0	ĺ
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## 5.4 Additional Areas Examined

**5.5** No additional areas were examined during this inspection.

# No requirements or recommendations resulted from this inspection.

I agree with the content of the report.				
Registered Manager	Sinead Polland	Date Completed	18/02/16	
Registered Person	Sinead Polland	Date Approved	18/02/16	
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	19/2/16	
Please provide any additional comments or observations you may wish to make below:				

\*Please ensure this document is completed in full and returned to <u>agencies.team@rqia.org.uk</u> from the authorised email address\*

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 service. 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.