

Unannounced Care Inspection Report 12 November 2020



Trust Domiciliary Service & Armagh and Dungannon

Type of Service: Domiciliary Care Agency
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Tel No: 028 3756 5068
Inspector: Corrie Visser

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

1.0 What we look for



2.0 Profile of service

Trust Domiciliary Service & Armagh and Dungannon is a domiciliary care agency which provides personal care and housing support to 874 individuals with physical health, palliative care, care of the elderly, learning disability, mental health and dementia needs within the Southern Health and Social Care Trust (SHSCT). Service users are supported by 374 staff.

3.0 Service details

Organisation/Registered Provider: Southern HSC Trust	Registered Manager: Miss Ciara Ann McCrink
Responsible Individual: Mr Shane Devlin	
Person in charge at the time of inspection: Miss Ciara Ann McCrink	Date manager registered: 23 November 2017

4.0 Inspection summary

An unannounced inspection took place on 12 November 2020 from 10.30 to 13.45 hours.

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. This inspection was carried out using an on-site inspection approach in line with social distancing guidance.

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.

The inspection assessed progress with any areas for improvement identified during and 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 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 which is maintained by the agency in relation to the safeguarding of adults.

On the day of the inspection it was noted that one incident had taken place since the previous inspection on 7 October 2019. We examined the records and found that the agency had dealt with the incident in accordance with its own procedure and policy.

The agency maintains and implements a policy relating to complaints. On the day of the inspection it was noted that the agency had not received any complaints since the last inspection.

No areas of improvement were identified from this inspection.

Evidence of good practice was found in relation to Access NI, staff registrations with the Northern Ireland Social Care Council (NISCC), management of incidents and service users' risk assessments including restrictive practices.

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

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	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Miss Ciara Ann McCrink, registered manager, as part of the inspection process and can be found in the main body of the report.

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

4.2 Action/enforcement taken following the most recent care inspection dated 07 October 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 7 October 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, returnable QIP, 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/relatives questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA. The information received shows that people were very satisfied with the current care and support. Comments received are included within the report.

Four service user/relatives questionnaires were returned prior to issuing this report, comments and analysis are included in the body of the report.

Following the inspection we communicated with four service users, four staff, three service user's relative and three professionals.

One area for improvement identified at the last care inspection was reviewed and assessment of compliance recorded as met.

We would like to thank the registered manager, service users, service users’ relatives, staff and professionals 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

Areas for improvement from the last care/finance inspection dated 07 October 2019		
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 15 (2)(a) Stated: Second time	The registered person shall, after consultation with the service user, or if consultation with the service user is not practicable, after consultation with the service user’s representative, prepare or ensure that a written plan (“the service user plan”) is prepared which shall- (a) be consistent with any plan for the care of the service user prepared by an Health and Social Services or Health and Social Services Board or other person with responsibility for commissioning personal social services for service users;	Met
	Action taken as confirmed during the inspection: We reviewed four service users’ files who have restrictive practices in place and a copy was retained in the service users’ files. These assessments were reviewed in liaison with the Trust, service user and their next of kin.	

6.1 Inspection findings

Recruitment:

The service’s staff recruitment processes were noted to be managed in conjunction with the Business Service Organisation (BSO) who undertake all the pre-employment checks. Correspondence is then sent to the manager advising everything has been completed and a start date can be offered and the file is subsequently passed to the Human Resources (HR) Department located at the organisation’s head office. Discussions with the manager identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and Standard 11 of the Domiciliary Care Agencies Minimum Standards 2011 which relate to Access NI. The manager provided us with confirmation emails for four members of staff from BSO advising that all the pre-employment checks had been completed and a commencement date could be provided.

The NISCC matrix reviewed confirmed all staff are currently registered with NISCC. Information regarding registration details and renewal dates are monitored by the manager. The manager confirmed that all staff are aware that they are not permitted to work if their NISCC registration has lapsed.

Care Planning and Review:

We reviewed four service users' care plans which included restrictive practices. These fully described the care and support required for individuals and included:

- referral information
- care plan
- individual action plans
- risk assessments
- reviews

The restrictive practice assessments were undertaken in liaison with the service user and their next of kin. The assessments took into consideration if the service user has capacity and their views on this practice which focused on bed rails and medication. The assessments included:

- the outcome of the discussion with the service user and their next of kin
- physical/medical/psychological conditions or triggers
- risks identified to necessitate the use of restrictions
- preventative/protective de-escalation of strategies
- planned restrictive interventions/practices agreed which included the duration and frequency of the restriction, the level and type of monitoring/reviewing and the outcome/goals which incorporated the service user's human rights

These assessments are kept under regular review and a copy is retained in the service user's home as well as within their file held in the office.

Comments from service users included:

- "I'm happy enough with my package of care."
- "They always wear full PPE."
- "I think they are alright."
- "My level of care is very good."
- "On the whole, they are very good."
- "I am very happy."
- "No issues with my care."

Comments from service users' relatives included:

- "I am very happy."
- "Couldn't fault any of them."
- "They are brilliant, fantastic."
- "I couldn't speak highly enough of them."
- "Couldn't ask for a better group of carers."
- "They all wear full PPE."
- "They are wonderful, noble people."
- "They are out of this world."
- "I couldn't find people like them anywhere."

Comments from care workers included:

- “I really do love it.”
- “They are flexible with my family life.”
- “My manager is fantastic and very supportive.”
- “I am up to date with my training.”
- “They are only a phone call away if I need reassurance.”
- “There is loads of support from my supervisor.”
- “I am aware of the donning and doffing processes and double bagging.”
- “If I feel a service user needs more time, I say to my supervisor and they follow it up with the Social Worker.”
- “The Trust are good to work for and they have a good reputation.”
- “My induction was very good.”
- “Good guidance regarding PPE.”
- “I love my work.”
- “Training is 100%”
- “We give everyone 100% of our time.”
- “We get guidance for everything.”
- “Admin staff are fantastic.”
- “I check my own temperature every morning before starting my run.”

Comments from professionals included:

- “The Domiciliary Care Supervisors (DCS) within the Armagh area are extremely accommodating and will go above and beyond to be flexible with the provision of care to the service users that we have responsibility for.”
- “The communication is also very positive and involves a mixture of email correspondence but also face to face as we share the same building and so therefore positive working relations have developed.”
- “If concerns do need to be raised with the manager they are taken seriously. However, this is not a common occurrence and in the main, any queries we would be raising is often in relation to requirement for increased provision of care or flexibility and as noted above, the manager and DCS will endeavour to support within their remit whilst ensuring safety for staff and service users.”
- “It has been my experience that DCS will raise incident reports in a timely manner. I had noted an issue with the location of the identification of service users on some of the incident reports and when I approached the DCS this was received well and followed up and learning evident in future incident reports which was very positive.”
- “Communication with supervisors is always very good”
- “I have found that any issues or concerns are addressed quickly and effectively.”
- “The supervisors review and monitor service users frequently and I receive feedback from each monitoring call they complete.”
- “I have found the service to be professional and accommodating at all times.”
- “They are timely in their response and communications both electronic and on the phone have been positive.”
- “Feedback from my team would be that relationships are good and that they will always try their best to try to meet the ever increasing demand and need for services.”

Four service user/relatives' questionnaires were returned prior to issuing this report. All the respondents reported that they are very satisfied that the care they are receiving is safe, effective, compassionate and well led.

Comments included:

- “Carers are like members of our family.”
- “Gives my family peace of mind.”
- “I couldn’t do without my care workers, they are wonderful.”
- “Excellent carers, they provide a great service that meets all my needs.”

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. There was also evidence of a video on YouTube which was disseminated to all staff which focused on the donning (putting on) and doffing (taking off) PPE, double bagging used PPE and the PHA’s guidance regarding the 72 hour rule prior to disposing of used PPE. Staff also received a newsletter date 21/10/2020 which included information and guidance regarding Covid-19 as well as outlining the 10 best practice guidelines for domiciliary care workers when delivering care and recording and reporting.

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 are 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 NISCC, management of incidents and service users’ risk assessments including restrictive practices.

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.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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