

Unannounced Care Inspection Report

6 October 2020



Trust Domiciliary Service - Banbridge and Craigavon

Type of Service: Domiciliary Care Agency
**Address: Banbridge Health and Care Centre, Old Hospital Road,
Banbridge, BT32 3GN**
Tel No: 028 4062 0465
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

This is a domiciliary care agency which provides personal care and housing support to 1009 service users with physical health, children with disabilities, 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 499 care workers.

3.0 Service details

Organisation/Registered Provider: Southern HSC Trust Responsible Individual: Mr Shane Devlin	Registered Manager: Mr Mel Byrne
Person in charge at the time of inspection: Mr Mel Byrne	Date manager registered: 22 April 2009

4.0 Inspection summary

An unannounced inspection took place on 6 October 2020 from 10.15 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.

Since the inspection on 04 November 2019 RQIA have not completed a primary inspection. In response to this, RQIA decided to undertake an inspection of the service. 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 procedures maintained by the agency in relation to the safeguarding of adults (2016) which were the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' July 2015.

On the day of the inspection it was noted that one incident had taken place since the previous inspection on 04 November 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 Mr Mel Byrne, 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 04 November 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 4 November 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.

Five 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 three service users, two staff, one service user's relative and one professional.

No areas for improvement were identified at the last care inspection.

We would like to thank the registered manager, service users, service user's 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

Area for improvement from the last care inspection dated 04 November 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-	Met
	(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;	
	Action taken as confirmed during the inspection: We reviewed five service users' files who have restrictive practices in place. These assessments had been completed by the district nursing team 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 five 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 five 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 by the district nurses with 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. 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 am very happy."
- "I will be moving shortly and have asked if the girls can come with me and they can so I am extremely happy."
- "The girls are very very good."
- "I love them all."
- "They don't rush me."
- "The girls speak to me with respect."
- "This is the best team of carers I have had in 20 years."
- "They are very good."
- "No concerns."
- "Lovely girls."
- "It's great to have them."
- "I don't know how I would get about without them."
- "They take their time."

- “The girls are very good and very nice.”

Comments from service users’ relatives included:

- “The care workers are dead on.”
- “I have no objection to them coming in.”
- “They are friendly.”
- “They do their job alright.”

Comments from care workers included:

- “I love it.”
- “It is brilliant.”
- “Good guidance through the pandemic.”
- “I don’t feel we have enough time in some calls, but I stay until the service users’ needs are met. I have raised this with management.”
- “All the service users are lovely.”
- “We would be really close to our service users.”
- “Management are very supportive.”
- “Training is brilliant.”
- “We get enough supplies of PPE and I change my mask between every call so I can get a breather.”
- “Everything is great.”
- “My supervisor is very good and makes herself available any time I need her.”
- “We are getting spot checks to ensure we are doing what we are supposed to be doing.”
- “We were getting phone calls and a leaflet about the donning and doffing procedures for PPE.”
- “The training is absolutely fantastic through the Trust.”
- “The practical training for medication is really beneficial as we are put in a scenario with a nurse in front of us to ensure we are compliant and not making mistakes. I have never had medication training like that before.”
- “Management are great.”
- “I love my job.”
- “If I am going to be late, I let the office know who then contacts the service user to reassure them.”

Comments from professionals included:

- “My experience of working with the manager and his team of domiciliary care supervisors and carers has been excellent.”
- “Trust Home Care provide high quality care to the most vulnerable in our community.”
- “In my experience completing joint visits alongside the care staff, the care is delivered in a respectful and dignified manner.”
- “When I have needed to contact the supervisors with a change in circumstances, they respond quickly and efficiently and are as accommodating as possible.”
- “Any concerns are dealt with in a timely and appropriate manner.”
- “Care reviews are always well attended and prioritised.”
- “They are accommodating when asked to change times of calls to accommodate our clients with dementia.”
- “I have no areas recommended for improvement as I am very grateful for this service and we wouldn’t be able to care for our clients without it.”

Five service user/relatives' questionnaires were returned prior to issuing this report. Three respondents were service users and one respondent was a relative who reported they are very satisfied that the care being delivered is safe, effective, compassionate and well led. The fifth respondent was a relative who reported that they were very satisfied that the care being delivered is safe, effective and compassionate however were undecided if the care was well led.

Service users' comments included:

- "All very efficient."
- "Not happy about loss of some of my carers due to operational reasons."
- "This is a very general questionnaire. It does not consider (1) different levels of care needed and (2) area specific."

Covid-19:

We spoke to the manager and to two 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 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), 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.

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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