

Unannounced Care Inspection Report 28 September 2020



Prime Care

Type of Service: Domiciliary Care Agency
Address: 77 Eglantine Avenue, Belfast, BT9 6EW
Tel No: 028 9066 3566
Inspector: Corrie Visser

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

This is a domiciliary care agency which provides a range of services including personal care, practical and social support and sitting services. Service users have a range of needs including dementia, mental health, learning disability and physical disability. Their services are commissioned by the Belfast Health and Social Care Trust (BHSCT), the South Eastern Health and Social Care Trust (SHSCT) and the Northern Health and Social Care Trust (NHSCT).

3.0 Service details

Organisation/Registered Provider: Prime Care Responsible Individuals: Ms Mary Marian Nicholas and Mr Joseph Raymond Nicholas	Registered Manager: Ms Carol Ann Williams
Person in charge at the time of inspection: Operations Manager	Date manager registered: 14 May 2009

4.0 Inspection summary

An unannounced inspection took place on 28 September 2020 from 10.15 to 14.00 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.

Following review of this information, the inspector identified that the information received show challenges within the service since the previous inspection on 11 February 2020. The correspondence shared with RQIA indicated there may have been an impact within the service at this time. In response to this, RQIA decided to undertake an inspection of this service using an on-site inspection approach in line with social distanced 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, 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 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 eight incidents had taken place since the previous inspection on 11 February 2020. We examined the records and found that the agency had dealt with the incidents 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 received one formal complaint since the last inspection. The complaint reviewed was dealt with satisfactorily that showed a positive outcome for the complainant.

The SEHSCT issued a Performance Notice on 6 August 2020 due to “unsatisfactory performance”. This was in relation to the service breaching Regulation 13 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 by supplying care workers who were not of integrity and good character. This followed a safeguarding investigation which was undertaken by the SEHSCT. The service was required to provide assurances to the SEHSCT to address the safeguarding concerns and the Performance Notice was lifted on 24 August 2020 as the SEHSCT were satisfied that the actions taken by the service provided assurance of compliance with this regulation.

Three areas for improvement were identified in relation to recruitment, the monthly quality monitoring reports and record keeping.

Evidence of good practice was found in relation to Access NI, staff registrations with the Northern Ireland Social Care Council (NISCC), staff induction, the management of complaints and the management of incidents.

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	2	1

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with the person in charge 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 11 February 2020

No further actions were required to be taken following the most recent inspection on 11 February 2020.

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 and staff 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’s/relative questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA.

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

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

We would like to thank the person in charge, 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

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

6.1 Inspection findings

Recruitment records

We reviewed four staff recruitment files and it was evident that all pre-employment checks including Access NI and references were completed and finalised prior to the member of staff commencing employment. As outlined in Regulation 13, Schedule 3 a full employment history is required of each applicant. It was noted in two recruitment records that the dates of their previous employment were not completed fully and there were gaps in employment in one staff file and no evidence of any discussion during interview. An area for improvement has been stated in this regard.

The NISCC matrix reviewed confirmed all staff were registered with NISCC. The person in charge advised that they have a new system in place to monitor staff registration and it is checked on a monthly basis. Prime Care issue a cheque to NISCC to pay the fees of the care workers and the sum is deducted from their wages. This is to ensure all staff are registered. The person in charge confirmed that all staff are aware that they are not permitted to work if their NISCC registration has lapsed. Staff also confirmed their knowledge of this when providing feedback.

Monthly Quality Monitoring Reports

We reviewed a sample of the monthly quality monitoring reports which were available on the day of inspection. It was noted that there were no consultations with all stakeholders in

particular care workers and service users' relatives. This does not provide the service with any areas for improvement or monitor the quality of the service being delivered. It was reviewed that 31 service users were consulted in March 2020, 54 in April 2020 and 24 May 2020. The person in charge advised that these figures were a representation of service users and their relatives being contacted for feedback however the reports did not reflect this. The person in charge advised that these figures would be broken down in future reports. An area for improvement has been made in this regard.

Some comments received included:

- "Really good rapport with staff."
- "Happy."
- "Care is good."
- "More than happy with the care provided."

Care Plans and Reviews

We reviewed four service users' file. One care plan was out of date by 18 months. There was no evidence of any written Trust reviews in any of the four files reviewed however there was evidence of amendments to service users' care plan. It was positive to note that the service has maintained a record of all communications undertaken on behalf of the service users including telephone calls to the GP and district nurse.

We reviewed the daily logs for three service users and noted that there were deficits in all three of the logs as they were completed inappropriately in accordance with regulations. This included entries being written in blue pen and full signatures not being recorded. An area for improvement was stated in this regard.

Comments from service users included:

- "I'm happy enough."
- "I have never had any complaints about the carers."
- "They are friendly and respectful."
- "Most of the time I have the same carers. If they are going on holiday, they give me a heads up and are able to tell me who will be visiting me instead."
- "I appreciate the help they give me."
- "I am very contented with them."

Comments from service users' relatives included:

- "We loved Prime Care."
- "We were delighted with everything we got."
- "We are very happy with them."
- "He's got to know all the carers."
- "Consistency is really good as they know him so well."
- "The carers are attentive and have a good rapport with him."
- "I never knew these people existed."
- "I am astounded at the level of care they carry out."
- "I couldn't speak highly enough of them."
- "They are fabulous people."
- "No one comes in grumpy. There are never any grumpy faces."
- "They are all part of the family now."

- “They do more than what is required of them.”
- “First class.”
- “I could not exist without them coming here.”
- “I have made a particular effort to get to know their names and greet them when they arrive.”

Comments from care workers included:

- “I love working for them.”
- “Management are very supportive and very helpful.”
- “We would be monitored regularly, including spot checks.”
- “If I have any concerns, I ring the office and they act on it and sort the problem out.”
- “I am really happy working for them.”
- “Everything is great.”
- “We are provided with everything we need.”
- “There was regular communication from the office through the pandemic.”
- “Training is great.”
- “Induction was beneficial.”
- “They are brilliant to work for.”
- “I would recommend working for Prime Care.”
- “They are always on the ball.”
- “Everything is fine.”
- “We have all been trained in relation to PPE.”

Covid-19

We spoke to the person in charge and 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 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

Based on 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

Evidence of good practice was found in relation to Access NI, staff registrations with the Northern Ireland Social Care Council (NISCC), staff induction, the management of complaints and the management of incidents.

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

Three areas for improvement were identified in relation to recruitment, monthly quality monitoring reports and record keeping.

	Regulations	Standards
Total number of areas for improvement	2	1

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with the operations 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 and the Domiciliary Care Agencies Minimum Standards, 2011.

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 full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken: Prime Care has updated its on-line application and paper application form to ensure months are included for employment and gaps in employment.</p>
<p>Area for improvement 2</p> <p>Ref: Regulation 23 (1) and (2)(b)(i) (ii)</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 establish and maintain a system for evaluating the quality of the service which the agency arranges to be provided. At the request of the Regulation and Improvement Authority, the registered person shall supply to it a report, based upon the system referred to in paragraph (1), which describes the extent to which, in the reasonable opinion of the registered person, the agency takes the views of service users and their representatives into account in deciding what service to offer to them, and the manner in which such services are to be provided.</p> <p>This refers to the service consulting all stakeholders to assess the quality of the care being delivered.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken: Prime Care immediately implemented the updated template for monthly quality monitoring visits by a registered provider to a domiciliary care agency to ensure that all stakeholder groups are consulted.</p>

Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011

<p>Area for improvement 1</p> <p>Ref: Standard 5.6</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 all records are legible, accurate, up to date and signed and dated by the person making the entry. This includes using black pen for all entries. They are kept in a safe place in the service user's home, as agreed with the service users, or where appropriate his or her carer/representative.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken: Prime care have instructed all care staff to ensure records are legible, accurate, up to date and signed and dated. This is included in training, spot monitoring checks, appraisals and group discussions. We will</p>

	endeavour for all entries to be signed in black pen and black pens have been available to all care staff.
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****Please ensure this document is completed in full and returned via Web Portal****



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