

# Unannounced Care Inspection Report

## 27 October 2016



## Prime Care

**Domiciliary Care Agency/Supported Living**  
**77 Eglantine Avenue, Belfast, BT9 6EW**  
**Tel no: 028 9066 3566**  
**Inspector: Jim McBride**

[www.rgia.org.uk](http://www.rgia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An unannounced inspection of Prime Care took place on 27 October 2016.

The inspection sought to assess progress with any issues raised during and since the previous inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

### **Is care safe?**

On the day of the inspection the agency was found to be delivering safe care. The agency operates a staff recruitment system and induction training programme to ensure sufficient supply of appropriately trained staff at all times. The welfare, care and protection of service users is ensured through the identification of safeguarding issues, implementation of safeguarding procedures and working in partnership with the HSC Trust. No areas for quality improvement were identified.

### **Is care effective?**

On the day of the inspection the agency was found to be delivering effective care. The agency responds appropriately to the needs of service users through the development and review of care and support plans. The agency's systems of quality monitoring were found to be providing continuous review of services in conjunction with service users and their representatives. No areas for quality improvement were identified.

### **Is care compassionate?**

On the day of the inspection the agency was found to be delivering compassionate care. The agency responds appropriately to the needs of service users through the development and review of care and support plans including continuous review of services in conjunction with service users and their representatives. No areas for quality improvement were identified.

### **Is the service well led?**

On the day of the inspection the agency was found to be well led. The management had supportive structures to guide staff. Service users and their representatives were provided with information on the organisational structure and how to contact the agency as necessary. The inspector reviewed evidence of effective communication by the agency with the HSC Trust regarding changes in service users' needs. No areas for quality improvement were identified.

This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards 2011.

## 1.1 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Michelle Nicholas, operations 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.

## 1.2 Actions/enforcement taken following the most recent care inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent inspection on 11/05/2015.

## 2.0 Service details

<b>Registered organisation/registered person:</b> Prime Care Mary Marian Nicholas Joseph Raymond Nicholas	<b>Registered manager:</b> Carol Ann Williams
<b>Person in charge of the service at the time of inspection:</b> Michelle Nicholas	<b>Date manager registered:</b> 14/05/2009

## 3.0 Methods/processes

Prior to inspection the inspector analysed the following records:

- Previous inspection report
- Previous returned quality improvement plan (QIP)
- Record of notifiable events for 2015/2016
- User Consultation Officer (UCO) report
- Record of complaints for 1 April 2015 to 31 March 2016
- Communications with the agency since the previous inspection.

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

Discussion with the registered provider and operations manager  
Examination of records

File audits  
Evaluation and feedback.

Prior to the inspection the UCO spoke with five service users and nine relatives, either in their own home or by telephone, between 5 and 10 May 2016 to obtain their views of the service. The service users interviewed informed the UCO that they received assistance with the following:

- Management of medication
- Personal care
- Meals
- Sitting service.

The UCO also reviewed the agency's documentation relating to two service users.

At the request of the inspector the registered provider was asked to distribute 10 questionnaires to staff for return to RQIA; one questionnaire were returned. The inspector spoke with the operations manager regarding the return rate of questionnaires on the 11 November 2016; she stated that the questionnaires were issued to staff. One questionnaire was received prior to the issue of this report.

The following records were examined during the inspection:

- Service user records in respect of referral, assessment, care plan and review
- Service user records in respect of the agency quality monitoring contacts
- Staff quality monitoring records
- Staff training schedule including:
  - Vulnerable adults
  - Moving and handling
  - Medication
  - Challenging behaviour
  - Personal care
  - Fire safety
  - Handling clients' money
- Staff duty rotas
- The agency's Statement of Purpose
- Policies and procedures relating to: staff recruitment, supervision, induction, safeguarding whistleblowing, recording, confidentiality, incident notification and complaints
- Records of incidents reportable to RQIA during 2015/2016
- Complaints records.

#### 4.0 The inspection

Prime Care Ltd is a domiciliary care agency which is based in Eglantine Avenue, Belfast and serves the Belfast area of Northern Ireland.

Under the direction of the registered manager Mrs Carol Ann Williams, the staff team provide a range of services to people living in their own homes across two trust areas (three locality areas - North and West locality and the South and East locality of the Belfast Health and Social Care Trust and the South Eastern trust). They provide personal care assistance, social support and domestic duties to service users.

The majority of service users are older people, but they also provide services to those with a learning disability and/or a physical disability that require assistance to maintain an independent lifestyle. The agency does not currently have any self-funding service users.

#### 4.1 Review of requirements and recommendations from the last care inspection dated 11 May 2015

Last care inspection recommendations		Validation of compliance
<b>Recommendation 1</b> <b>Ref:</b> Standard 1 <b>Stated:</b> First time	The registered manager is recommended to ensure service user quality monitoring is carried out in a range of formats based on service user requested methods.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The records in place were satisfactory.	

#### 4.3 Is care safe?

A range of policies and procedures were reviewed relating to staff recruitment and induction training. The inspector found these policies to be in compliance with related regulations and standards. Staff files verified that all the pre-employment information and documents had been obtained as required. An induction programme had been completed with each staff member. A competency assessment had been carried out for each care worker and supervision records maintained.

The UCO was advised by all of the service users and relatives interviewed that there were no concerns regarding the safety of care being provided by Prime Care. New carers had been introduced to the service user by a regular member of staff; this was felt to be important both in terms of the service user's security and that the new carer had knowledge of the required care.

No issues regarding the carers' training were raised with the UCO by the service users or relatives; examples of care given included manual handling, use of equipment and management of medication. All of the service users and relatives interviewed confirmed that they could approach the carers and office staff if they have any concerns. Examples of some of the comments made by service users or their relatives are listed below:

- "All very good. We have no complaints."
- "The carers do not rush and take their time to chat with my XXX."
- "The girls contact me if there any concerns with my XXX."

- The agency's policies and procedures in relation to safeguarding vulnerable adults/children and whistleblowing were reviewed. Their 'Safeguarding and Protecting Service Users' policy and procedure provided information and guidance as required and did reference the Department of Health, Social Services and Public Safety Northern Ireland (DHSSPSNI) updated vulnerable adults guidance issued in July 2015: 'Adult Safeguarding Prevention and Protection in Partnership'.

The agency's whistleblowing policy and procedure was found to be satisfactory.

Staff training records viewed for 2015/16 confirmed all care workers had completed the required mandatory update training programme. The training plan contained each of the required mandatory training subject areas along with other training relevant to service users' care needs.

The inspector noted the comments made by staff during their evaluation of training:

- "Training was very adequate."
- "Very enjoyable training."
- "Grateful for the training to be the best carer I can possibly be."
- "Training is fine."
- "\*\*\*\*\* is excellent he cover all the training needs."
- "\*\*\*\*\* makes the training enjoyable."
- "Very helpful, practical training."
- "Training is very enjoyable."

A review of safeguarding documentation confirmed that potential concerns were managed appropriately in accordance with the regional safeguarding protocols and the agency's policies and procedures.

Samples of service user files confirmed that the agency management had carried out care review meetings with service users/representatives to ensure service user needs were being met. The inspector was given assurances that all information relevant to service users was up to date and available from the HSC Trust as required.

One returned questionnaire from staff indicated:

- Staff receive appropriate training for their role.
- Staff receive supervision and appraisal.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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#### 4.4 Is care effective?

The UCO was informed by the service users and relatives interviewed that there were no concerns regarding carers' timekeeping or that care has been rushed. The service users and relatives interviewed also advised that they had not experienced any missed calls from the agency. Service users advised that they were usually introduced to, or advised of the name of, new carers by a regular carer. It was also confirmed that new carers had been made aware of the care required.

No issues regarding communication between the service users, relatives and staff from Prime Care were raised with the UCO. The service users and relatives advised that home visits and phone calls have taken place. The majority of the service users and relatives interviewed by the UCO confirmed that they had been involved in trust reviews regarding the care package and representation from the agency attended some of the reviews.

A number of the service users and relatives confirmed that they have received questionnaires from Prime Care to obtain their views on the service.

Examples of some of the comments made by service users or their relatives are listed below:

- “Couldn’t complain about one thing.”
- “Couldn’t ask for better. Really good carers.”
- “It’s reassuring for me that someone checks with my XXX; we rely on them.”

The UCO reviewed the agency’s documentation relating to two service users and one issue in regards the signatures in the log sheets was noted.

A review of the staffing rotas evidenced that the service user visits by care workers were planned. Service users and relatives spoken to by the UCO and staff spoken with during the inspection suggested the agency have appropriate staffing levels in various roles to meet the needs of their service user group.

Service user records viewed included referral information received from the Health and Social Care (HSC) Trust. The referrals detailed the services being commissioned and relevant risk assessments. The agency care plans and risk assessments completed by staff during their initial service visits contained evidence that service users’ and/or representatives’ views had been obtained and where possible, incorporated.

Service user records evidenced that the agency carries out care reviews with service users and telephone contacts, along with annual surveys to obtain feedback on services provided. Service user files also contained evidence of communications between the agency and care managers where changing needs were identified and reassessments resulted in amended care plans.

One returned questionnaire from staff indicated:

- Service users get the right care, at the right time and with the best outcome for them.
- There are systems in place to monitor the quality/safety of the service you provide.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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#### 4.5 Is care compassionate?

All of the service users and relatives interviewed by the UCO felt that care was compassionate. The service users and relatives advised that carers treat them with dignity and respect, and care has not been rushed.



Service users, as far as possible, are given their choice in regards to meals and personal care. During the home visits the UCO observed interactions between one carer and a service user; these were felt to be appropriate and friendly in nature.

Views of service users and relatives have been sought through home visits, phone calls and questionnaires to ensure satisfaction with the care that has been provided by Prime Care. Examples of some of the comments made by service users or their relatives are listed below:

- “Very friendly.”
- “We get on well with them.”
- “XXX is treated with utmost respect.”

The inspector noted the agency’s annual quality review of the service and the positive comments made by service users in relation to the quality of care provided. It was good to note that this report was shared with all service users.

Records viewed in the agency office confirmed that direct observation of staff practice was carried out within service users’ homes on a regular basis. From the records reviewed by the inspector no staff practice issues were identified during spot checks and monitoring visits. It was good to note positive comments from service users had been recorded on their monitoring records.

One returned questionnaire from staff indicated:

- Service users are treated with dignity and respect and involved in decisions affecting their care.
- That the people who use the service have their views listened to.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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#### 4.6 Is the service well led?

All of the service users and relatives interviewed confirmed that they are aware of whom they should contact if they have any concerns regarding the service. No concerns regarding the management of the agency were raised during the interviews.

The RQIA registration certificate was up to date and displayed appropriately. The Statement of Purpose and Service Users’ Guide were satisfactory. Discussion with the registered provider evidenced that there was a clear organisational structure within the agency.

A number of policies were reviewed and contents discussed with the operations manager and the registered provider. The arrangement for policies and procedures to be reviewed, at least every three years, was found to have been implemented.

The complaints log was viewed for 2015/2016 to date; fifteen complaints were recorded with satisfactory outcomes.



Discussion with the staff and review of records evidenced that systems were in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately. Incident records viewed demonstrated that appropriate action had been taken with staff on receipt of incident reports. The inspector reviewed the monitoring arrangements for January to June 2016. These records evidenced that the responsible person had been monitoring the quality of service. The inspector noted some of the comments received during quality monitoring:

#### Service users:

- “Staff are very professional, courteous and show empathy at all times.”
- “Staff go the extra mile.”
- “Staff cheer me up and give me dignity.”
- “I have no problems with the carers.”
- “I could not get nicer ladies.”

#### HSC Trust Comments:

- “I’m happy with the standard of care.”
- “Good communication.”
- “I’m impressed with the quality of care provided by Prime care.”

One returned questionnaire from staff indicated:

- The service is managed well.
- Were satisfied that quality monitoring is undertaken regularly for both staff/volunteers and people who use the service.

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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### 5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards.



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