

Unannounced Care Inspection Report 5 December 2016



Extra Care

Domiciliary Care Agency/Conventional
Lucas Exchange, 1 Orchard Way, Greystone Road, BT41 2RU
Tel no: 028 9448 2939
Inspector: Jim McBride

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of Extra Care took place on 5 December 2016 from 09.30 to 14.45.

The inspection sought to assess progress with any issues raised 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.

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, the HSC Trust 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
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with the 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 08/10/2015.

2.0 Service details

Registered organisation/registered person: Extra Care Brian Hutchinson	Registered manager: Mary Lorraine Collins
Person in charge of the service at the time of inspection: Operations manager	Date manager registered: 4/11/16

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:

- Discussions with the registered provider, operations manager, operational team leader and the human resource and training manager.
- Examination of records
- File audits
- Evaluation and feedback.

As part of the inspection the UCO spoke with two service users and nine relatives, by telephone, between 8 and 12 December 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

At the request of the inspector the registered provider was asked to distribute 10 questionnaires to staff for return to RQIA; three questionnaires were returned.

The following records were examined during the inspection:

- Service user records in respect of the agency quality monitoring contacts;
- Staff quality monitoring records, spot checks;
- Staff training schedule;
- Staff duty rotas;
- 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;
- Staff induction records;
- Staff recruitment records;
- Complaints records.

4.0 The inspection

Extra Care is a domiciliary care agency providing services to all Health and Social Care Trust areas in Northern Ireland with exception to the WHSCT area. Services provided include personal care, assistance with meals and respite sits (day and night).

The service is currently provided to 887 service users. The agency employs 337 staff and operates from a central head office in Antrim where the registered manager leads the care staff team. During the inspection the inspector spoke with the registered provider, operations manager, human resource and training manager and an operational team leader. Their comments have been included in the report.

4.1 Review of requirements and recommendations from the most recent inspection dated 08/10/2015

The most recent inspection of the agency was an unannounced care inspection. The completed QIP was returned and approved by the care inspector.

4.2 Review of requirements and recommendations from the last care inspection dated 08/10/2015

Last care inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 8.11 Stated: Second time	The acting registered person is recommended to ensure completion of monthly reports in line with standard 8.11.	Met
	As discussed within recommendation two within the follow up section of the report.	
	Action taken as confirmed during the inspection: The inspector read a number of quality monitoring reports and was satisfied that they met the recommendation.	

<p>Recommendation 2</p> <p>Ref: Standard 4.4</p> <p>Stated: First time</p>	<p>The written agreement (service user agreement) is signed and or witnessed prior to the service being provided. Where the service user is unable or chooses not to sign, this is recorded.</p> <p>As discussed within theme one of the report.</p> <p>Action taken as confirmed during the inspection: This recommendation has been met by the agency. The documents in place were satisfactory and were updated by the agency in November 2015.</p>	<p>Met</p>
<p>Recommendation 3</p> <p>Ref: Standard 8.12</p> <p>Stated: First time</p>	<p>The quality of service provided is evaluated on at least an annual basis and follow-up action taken. Key stakeholders are involved in the process.</p> <p>As discussed within theme one of the report regarding sharing the 2014 annual report with all stakeholders.</p> <p>Action taken as confirmed during the inspection: The inspector examined the 2015 service user satisfaction survey in place and was assured by the operations manager that this was shared with service users.</p>	<p>Met</p>
<p>Recommendation 4</p> <p>Ref: Standard 10.4</p> <p>Stated: First time</p>	<p>The information held on record is accurate, up-to-date and necessary.</p> <p>As discussed within theme one of the report regarding communication with staff regarding changes to service user's needs.</p> <p>Action taken as confirmed during the inspection: The operations manager assured the inspector that all information relating to changing needs is discussed with staff. Care plans are updated when necessary.</p>	<p>Met</p>

4.3 Is care safe?

The UCO was advised by the majority of the service users and relatives interviewed that there were no concerns regarding the safety of care being provided by Extra Care. However one relative discussed concerns regarding standard of care and management of medication with the UCO which had been reported to management.

The majority of the service users and relatives interviewed advised that 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. All of the service users and relatives interviewed confirmed that they could approach the carers if they had any concerns.

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

- “No complaints about the carers.”
- “Consistency is good as my XXX has speech impairment.”

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. An induction programme had been completed with each staff member. The inspector noted training provided to operational team leaders in relation to what the agency describe as “Hot topics.”

- Disciplinary process;
- Absence management;
- Probation;
- Difficult conversations;
- Incidents accidents;
- Performance;
- Complaints;
- Record keeping;
- Grievance;
- Recruitment/leavers.

A competency assessment had been carried out for each care worker and supervision records maintained.

The inspector noted some of the areas covered during the planned induction period that also includes shadowing with an experienced staff member:

- Equality, diversity and human rights;
- Policies and procedures;
- Health and safety;
- Fire safety;
- Communication skills;
- Safeguarding;
- Handling service users money;
- Medication;
- Record keeping;
- Complaints;
- Customer service;
- Personal care.

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.

The inspector was given assurances that all information relevant to service users was up to date and available from the HSC Trust as required.

Staff comments:

"Staff induction and training prepares staff for the role."

"Supervision and appraisal is on-going and helps staff with their own development."

Three returned questionnaires from staff indicated:

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

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
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4.4 Is care effective?

The UCO was informed by the majority of 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 new carers by a regular carer and new carers were aware of the care required.

No issues regarding communication between the service users, relatives and staff from Extra Care were raised with the UCO. The service users and relatives advised that home visits have taken place to ensure satisfaction with the service however only one relative was able to confirm that they had received a questionnaire from the agency. 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.

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

- "Satisfied with the care."
- "Times can vary, especially at weekends."

A review of the staffing rotas evidenced that the service user visits by care workers were planned. Service user records include referral information received from the Health and Social Care (HSC) Trust. The referrals detail the services being commissioned and relevant risk assessments. The agency care plans and risk assessments completed by staff during their initial service visits contain evidence that service users' and/or representatives' views had been obtained and where possible, incorporated.

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 contain evidence of communications between the agency and care managers where changing needs are identified and reassessments resulted in amended care plans.

Staff comments:

“Preparation for the work with service users is comprehensive and is provided through induction and on-going training.”

“Staff are observed regularly whilst providing service in people’s homes.”

Three 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.

Number of requirements	0	Number of recommendations	0
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4.5 Is care compassionate?

The majority 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.

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

- “The girls are great.”
- “Couldn’t complain about any of them.”
- “Very happy with the care.”

The inspector noted the agency’s annual service user’s satisfaction survey 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.

The inspector noted the positive feedback received from service users in relation to the following:

- Do you feel you’re involved in agreeing your care plan?
- Have you ever made a complaint to extra care?
- Was your complaint dealt with satisfactorily?
- Do the care workers arrive on time?
- Would you contact the office if they are late?
- Are you kept informed if your call is going to be late?
- Were you contacted by the office if your call was late with an apology?
- Do you ever feel rushed by staff?
- Do staff stay their allocated time?

- Do you feel staff respect you?
- Does the service give you the opportunity to maintain your independence?

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 the practical observations/spot checks and monitoring visits.

The inspector noted some of the areas observed by the operational team leaders:

- Working practice;
- Attitude;
- Personal hygiene;
- Personal care;
- Moving and handling;
- Infection control;
- Medication administration;
- Food preparation;
- Recording.

Staff comments:

“The needs of service users are regularly reviewed by the agency and the HSC Trust, changes are communicated to staff.”

“Staff have the opportunity to discuss any concerns with the team leaders or the manager at any time.”

Three 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.

Comments:

“I feel if we had more time with service users they would get even better care.”

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	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 had any concerns regarding the service. Complaints had been made regarding timekeeping and standard of care which been raised with management, some of which were ongoing.

The RQIA registration certificate was up to date and displayed appropriately. 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 human resource/training 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; twenty 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 October 2016. These records evidenced that the responsible person had been monitoring the quality of service. The reports evidenced how the agency ascertains and respond to the views of service users, relatives, professionals and staff. The agency's reports of monthly monitoring provide assurance of quality monitoring and service improvement.

Staff comments:

"Staffing is regularly reviewed. Training and development is maintained in line with staff and service users' needs."

Three 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.

Number of requirements	0	Number of recommendations	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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