

Announced Care Enforcement Inspection Report 7 September 2018











Extra Care

Type of Service: Domiciliary Care Agency

Address: Lucas Exchange, 1 Orchard Way, Greystone Road, Antrim,

BT41 2RU

Tel No: 02894482939

Inspectors: Aveen Donnelly and Jim McBride

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

Extra Care is a domiciliary care agency providing services to all Health and Social Care Trust (HSCT) areas in Northern Ireland. Services provided include personal care, assistance with meals and respite sits (day and night). The agency currently provides services to 673 individuals living in their own homes. Services are provided by 332 Staff.

3.0 Service details

Organisation/Registered Provider: Extra Care Ltd	Registered Manager: Mary Lorraine Collins
Responsible Individual: Brian Ronald Hutchinson	
Person in charge at the time of inspection: Mary Lorraine Collins	Date manager registered: 4 November 2016

4.0 Inspection summary

An announced inspection took place on 7 September 2018 from 9.15 to 11.30 hours.

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

The inspection sought to assess the level of compliance achieved in relation to the Failure to Comply (FTC) Notices issued on 7 June 2018.

The Regulation and Quality Improvement Authority (RQIA) had completed an unannounced inspection on 31 May 2018 in follow up to concerns raised regarding failure to provide appropriate service provision and lack of adequate contingency measures in place to address staff shortages. The outcome of the inspection resulted in two failure to comply notices (FTC's) being issued.

One failure to comply notice related to the agency's failure to ensure the safety and well-being of service users and to safeguard them against abuse or neglect. The second failure to comply notice related to the lack of appropriate staff supervision. The date of compliance with the notices was 8 August 2018. During an announced inspection undertaken on 8 August 2018 there was insufficient evidence that the agency was fully compliant with the actions outlined in the failure to comply notices and RQIA made a decision to extend the compliance date for the two notices until 7 September 2018.

The following FTC Notices were issued by RQIA:

FTC References: FTC00005 and FTC00006

During this inspection however, evidence was available to validate compliance with the Failure to Comply Notices.

RQIA requested that submission of weekly reports outlining the service provision, service failures and reporting requirements to the NHSC Trust continue until further notice. RQIA further requested to be informed on a weekly basis of the number of new service users the agency receive via referral from the NHSCT and to be kept informed of the agency's management arrangements.

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	1	0

The areas for improvement from the last care inspection on 8 August 2018 were not fully reviewed during this inspection and one area for improvement has been carried forward for review at the next care inspection. This inspection resulted in no new areas for improvement being identified.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- the requirements as indicated in the failure to comply notices FTC Ref: FTC00005 and FTC00006
- the registration status of the agency
- written and verbal communication received since the previous care inspection
- previous care inspection reports
- weekly reports provided by the agency to RQIA/Trust
- action plans provided by the agency to the trust and to RQIA for information

The following methods and processes used in this inspection include the following:

- a discussion with the manager
- review of information relating to the two failure to comply notices

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 8 August 2018

The most recent inspection of the agency was an announced care inspection. The areas for improvement made at the last care inspection were reviewed during this inspection.

6.2 Review of areas for improvement from the last care inspection dated 8 August 2018

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 14 (a) (b) FTC00005 Stated: Second time	The registered person shall make suitable arrangements to ensure that the agency is conducted, and the prescribed services arranged by the agency, are provided— (a) so as to ensure the safety and well-being of service users; (b) so as to safeguard service users against abuse or neglect;	
	The registered person must undertake an audit of all missed or late calls in 2018 and ensure that relevant agencies (RQIA, HSC Trusts) are notified of these.	
	The registered person must develop and implement a robust system for ensuring that service users receive their care calls in a timely manner.	
	The registered person must review the system for communication with service users and/or their' representatives, to ensure that any matters impacting on service delivery are communicated effectively.	Met
	Until further notice, a weekly report must be submitted to RQIA detailing any missed service user calls and actions taken as a consequence.	
	Action taken as confirmed during the inspection: The inspection undertaken on 8 August 2018 verified compliance with three of the actions outlined above.	
	Inspectors confirmed during this inspection that a system had been fully implemented to ensure that late or missed calls were communicated to service users and/or their representatives. Refer to section 6.3 for further detail.	

	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	to the next care inspection
Area for improvement 3 Ref Regulation 16 (2) (a) Stated: Second time	The registered person shall ensure that each employee of the agency— (a) receives training and appraisal which are appropriate to the work he is to perform.	Carried forward
Area for improvement 2	Action taken as confirmed during the inspection: The inspection undertaken on 8 August 2018 verified compliance with two of the actions outlined above. Inspectors confirmed during this inspection that training had been provided to all staff who had a supervisory role within Extra Care. Refer to section 6.3 for further detail.	
	and the agency's policies and procedures. The registered person must ensure that the methods of staff supervision are reviewed, to ensure that they are appropriate for the work the staff is to undertake. The registered person must ensure that any staff, who have the responsibility of undertaking staff supervision, are suitably trained to undertake their role.	Met
Stated: Second time	 (4) The registered person shall ensure that each employee receives appropriate supervision. The registered person must ensure that an audit of staff supervision records is undertaken, and that a plan is developed to ensure that any identified gaps are addressed in accordance with the minimum standards 	
Area for improvement 2 Ref: Regulation 16 (4) FTC000006	Where an agency is acting otherwise than as an employment agency, the registered person shall, having regard to the size of the agency, the statement of purpose and the number and needs of the service users, ensure that—	

Area for improvement 4 Ref: Regulation 21 (1) (c) Stated: Second time	The registered person shall ensure that the records specified in Schedule 4 are maintained, and that they are— (c) at all times available for inspection at the agency premises by any person authorised by the Regulation and Improvement Authority. Action taken as confirmed during the inspection: Records were available in relation to phone calls to service users regarding service failures and in relation to staff training records.	Met
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011		Validation of compliance
Area for improvement 1 Ref: Standard 8.3	The registered person shall ensure that all staff are familiar with, and work in line with the agency's policies and procedures.	
Stated: Second time	This refers specifically to the staff's role in recognising and reporting missed calls.	
	Action taken as confirmed during the inspection: A review of the records relating to missed and late calls confirmed that all matters had been reported to the service users and/or their' representatives in line with the agency's policies and procedures.	Met

6.3 Inspection findings

FTC Ref: FTC00005

Notice of failure to comply with regulation 14 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation 14 (a)(b)

Where the agency is acting otherwise than as an employment agency, the registered person shall make suitable arrangements to ensure that the agency is conducted, and the prescribed services arranged by the agency, are provided—

- (a)so as to ensure the safety and well-being of service users;
- (b)so as to safeguard service users against abuse or neglect;

In relation to this notice the following four actions were required to comply with this regulation.

The registered person must undertake an audit of all missed or late calls in 2018 and ensure that relevant agencies (RQIA, HSC Trusts) are notified of these.

The registered person must develop and implement a robust system for ensuring that service users receive their care calls in a timely manner.

The registered person must review the system for communication with service users and/or their' representatives, to ensure that any matters impacting on service delivery are communicated effectively.

Until further notice, a weekly report must be submitted to RQIA detailing any missed service user calls and actions taken as a consequence.

During this inspection, a review of the records confirmed that a system had been implemented to ensure that late or missed calls were communicated to service users and/or their representatives. RQIA requested that submission of weekly reports outlining the service provision, service failures and reporting requirements to the NHSC Trust continue until further notice.

RQIA further requested to be informed on a weekly basis of the number of new service users the agency received and to be kept informed of the agency's management arrangements on an ongoing basis.

FTC Ref: FTC00006

Notice of failure to comply with regulation 16 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation16 (4)

Where an agency is acting otherwise than as an employment agency, the registered person shall, having regard to the size of the agency, the statement of purpose and the number and needs of the service users, ensure that—

(4) The registered person shall ensure that each employee receives appropriate supervision.

In relation to this notice the following three actions were required to comply with this regulation.

The registered person must ensure that an audit of staff supervision records is undertaken, and that a plan is developed to ensure that any identified gaps are addressed in accordance with the minimum standards and the agency's policies and procedures.

The registered person must ensure that the methods of staff supervision are reviewed, to ensure that they are appropriate for the work the staff are to undertake.

The registered person must ensure that any staff, who have the responsibility of undertaking staff supervision are suitably trained to undertake their role.

During this inspection, a review of staff training records confirmed that appropriate training had been provided to all relevant staff.

RQIA ID: 10930 Inspection ID: IN032820

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Number of areas for improvement	0	0

6.4 Conclusion

Evidence was available to validate compliance with the Failure to Comply Notices.

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mary Collins, registered 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.

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

Area for improvement 1

Ref: Regulation 16 (2) (a)

Stated: Second time

To be completed by: Immediate from the date of the inspection The registered person shall ensure that each employee of the agency— (a) receives training and appraisal which are appropriate to the work he is to perform.

Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Ref: 6.2

Response by registered person detailing the actions taken:

We will schedule and deliver suitable training and appraisal to our staff that is appropriate for the work they are to perform. A sample of our training records from our Carefree management system has been emailed seperately to Aveen Donnelly..





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