

Announced Care Inspection Report 12 February 2018



Rathcoole Fieldwork Office

Type of Service: Domiciliary Care Agency

Address: Innis Avenue

Tel No: Newtownabbey BT37 9NA

Inspector: Jim Mc Bride

User Consultation Officer: Clair Mc Connell (UCO)

Marie Mc Cann Inspector (Observer)

www.rgia.org.uk

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 from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

Rathcoole Fieldwork Office is a domiciliary care agency which provides personal care services to people living in their own homes. Service users have a range of needs including physical disability, dementia and learning disability. 79 staff currently provide care and support to 268 people living in their own homes within the community.

3.0 Service details

Organisation/Registered Provider: Northern Health & Social Care Trust Responsible Individual: Dr Anthony Baxter Stevens	Registered Manager: Heather Mc Elwee (Acting Manager)
Person in charge at the time of inspection: Heather Mc Elwee (Acting Manager)	Date manager registered: Heather McElwee (Acting) 30 September 2017

4.0 Inspection summary

An announced inspection took place on 12 February 2018 from 09.15 to 12.15.

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

Evidence of good practice was found in relation to:

- staff training
- staff recruitment
- quality monitoring

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 heather Mc Elwee, 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 23 March 2017

No further actions were required to be taken following the most recent inspection on 23 March 2017.

5.0 How we inspect

- discussion with the manager
- examination of records
- user consultation officer report (UCO)
- evaluation and feedback

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

- the previous RQIA inspection report
- any correspondence received by RQIA since the previous inspection
- recruitment records 12 December 2017

As part of the inspection the User Consultation Officer (UCO) spoke with seven relatives, by telephone, on 13 February 2018 to obtain their views of the service. The service users interviewed have received assistance with the following:

- management of medication
- personal care
- meals

During the inspection the inspectors spoke with the manager, operations manager and a homecare officer regarding the care and support provided by the agency, staff training and staff's general knowledge in respect of the agency.

The inspector would like to thank the agency staff for their warm welcome and full co-operation throughout the inspection process.

At the conclusion of the inspection a poster was left with the manager to encourage staff to contact RQIA via Survey Monkey to provide their views on the quality of this service. At the time of writing this report no staff views had been returned to RQIA via Survey Monkey.

The manager was also asked to distribute 10 questionnaires to service users seeking their views on the quality of the service. No questionnaires were returned.

The following records were examined during the inspection:

- Monthly quality monitoring reports
- A number of care and support plans
- Staff training records including:
 - *Safeguarding*
 - *Medication*
 - *Infection control*
- Complaints records
- Safeguarding policy and procedures (2018)
- Staff induction policy and procedures
- Staff rota information

- Service user guide (August 2017)
- Statement of purpose (January 2018).

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 23 March 2017

The most recent inspection of the agency was an unannounced care inspection.

6.2 Review of areas for improvement from the last care inspection dated 23 March 2017

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

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to service users from the care, treatment and support that is intended to help them.

The UCO was advised by all of the relatives interviewed that there were no concerns regarding the safety of care being provided by the Northern Trust's homecare service. No issues regarding the carers' training were raised with the UCO by the relatives; examples given included use of equipment and management of medication. All of the relatives interviewed confirmed that they could approach the carers and office staff if they had any concerns.

There were mixed results regarding the service user being introduced to, or advised of the name of, new carers 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.

Examples of some of the comments made by the relatives are listed below:

- "No concerns at all."
- "They let me know if anything is wrong."
- "Very happy with the help."

On the 16 February the inspector spoke with the manager regarding the areas of concerns raised by relatives relating to the introduction of new staff to service users.

The manager stated that all new staff who are on induction are introduced by other shadowing staff and that if an experienced care worker is to be sent to a new client this information is to be passed to service users. The manager discussed an action plan in place to ensure that service users are always aware of who will be providing care.

A number of policies and procedures were reviewed during the inspection. The inspector visited the agency's Human Resource Department on the 12 December 2017 to review a number of recruitment records, which verified that the pre-employment information and documents had been obtained as required for each of the care workers. The documents reviewed were satisfactory.

An induction programme had been completed with each staff member and incorporated elements of the Northern Ireland Social Care Council (NISCC) induction standards. The agency's induction policy was updated in August (2017).

Discussions with the manager indicated that the agency endeavours to ensure that there is at all times an appropriate number of skilled and experienced persons available to meet the assessed needs of the individual service users.

All of the staff members' recruitment records reviewed confirmed that they were or had applied to be registered with The Northern Ireland Social Care Council (NISCC) in line with NISCC timeframes and guidelines. The agency's manager confirmed the majority of staff are registered with (NISCC), with the remaining staff moving towards registration.

The agency's policies and procedures in relation to safeguarding adults and whistleblowing were reviewed. The 'Safeguarding' policy and procedure provided information and guidance in accordance with the required standards. The draft policy has been updated in line with the Department of Health, Social Services and Public Safety Northern Ireland (DHSSPSNI) updated adult safeguarding guidance issued in July 2015 ('Adult Safeguarding Prevention and Protection in (Partnership)'). The agency has highlighted the identification and role of an Adult Safeguarding Champion.

Staff training records viewed for 2016-17 confirmed all care staff had completed the required mandatory update training programme. The training plan for 2016-17 was viewed and contained each of the required mandatory training subject areas. Discussion during inspection with the manager confirmed satisfaction with the quality of training offered.

Records reviewed for staff members evidenced mandatory training, quality monitoring and supervision as being compliant with agency policy timeframes. Review of records management arrangements within the agency supported appropriate storage and data protection measures were being maintained. The agency's registered premises include offices suitable for the operation of the agency in line with the Statement of Purpose (2018).

Areas of good practice

There were examples of good practice identified throughout the inspection in relation to: Recruitment, induction, training, supervision and appraisal; adult safeguarding and management of risks.

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 Is care effective?

The right care, at the right time in the right place with the best outcome.

The UCO was informed by the relatives interviewed that there were no concerns regarding the carers' timekeeping or that care has been rushed. The relatives interviewed also advised that they had not experienced any missed calls from the agency. There were mixed results regarding service users being introduced to new carers by a regular member of staff.

No issues regarding communication between the service users, relatives and staff from the Northern Trust's homecare service were raised with the UCO. The relatives advised that home visits and phone calls have taken place to obtain their views on the service as well as receiving a questionnaire.

Examples of some of the comments made by the relatives are listed below:

- "Couldn't fault them."
- "We would prefer it if new staff could be introduced to us."
- "They'll do anything at all that XXX needs help with. It's a great help to me."

Service user records viewed in the agency office 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 relatives' views had been obtained and where possible, incorporated.

A sample 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 manager explained that the agency attend the trust arranged care review meetings with service users/representatives.

The inspectors noted some of the comments made by service users during their annual review:

- "I'm happy with the staff and the service."
- "Happy with the services."
- "Homecare workers are amazing they are all very good."
- "All homecare workers are good I love the company."

Service user files also contained evidence of communications between the agency and trust key workers, where changing needs were identified and reassessments resulted in amended care plans. The manager confirmed that the agency is provided with details of the care planned for each new service user or with changes to existing service users' care plans. The manager demonstrated an awareness of the importance of accurate, timely record keeping and reporting procedure if any changes to service users' needs are identified.

The inspectors noted the positive feedback from service users who were asked to comment on the following during the agency’s annual service user survey:

- Quality of homecare service overall.
- Do you find homecare staff to be caring and compassionate towards you?
- Did you receive a leaflet explaining the role and function of the Regulation and Quality Improvement Authority (RQIA)?
- Do homecare staff have enough time to carry out the tasks in your Care plan, without making you feel rushed in any way?

Some of the comments made by service users during the annual survey:

- “I could not get better.”
- “They are very efficient.”
- “They are mostly good at all times.”
- “I could not ask for better care from them.”
- “More and beyond what they should do.”
- “Care is very good based on the basic homecare package*** receives.”
- “They come in and do their job efficiently.”
- “I find them very good at their job.”
- “Never have I been made to feel rushed. They take time and with me and show a lot of patience.”

Areas of good practice

There were examples of good practice identified throughout the inspection in relation to communication between service users, agency staff and other relevant stakeholders and the monitoring of the quality of the services provided.

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

Service users are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

All of the relatives interviewed by the UCO felt that care was compassionate. The 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, phone calls and questionnaires to ensure satisfaction with the care that has been provided by the Northern Trust’s homecare service.

Examples of some of the comments made by the relatives are listed below:

- “All very nice.”
- “Have been coming for years. They’ve become friends.”
- “XXX loves them.”

The agency carries out service user quality monitoring on an ongoing basis through home visits, telephone contact and through the annual quality survey. Records reviewed during inspection support ongoing review of service users’ needs. Quality monitoring from service user contacts alongside monthly quality reports and annual quality surveys evidenced positive feedback from service users and their family members.

Observation of staff practice carried out within service users’ homes on an ongoing basis was confirmed during inspection through records viewed in the agency office and discussions with the manager. Records reviewed by the inspectors highlighted no concerns regarding staff practice during spot checks/monitoring visits.

Areas of good practice

There were examples of good practice identified throughout the inspection in relation to the provision of individualised compassionate care and the effective engagement of service users.

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.7 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

All of the relatives interviewed confirmed that they are aware of whom they should contact if they have any concerns regarding the service. No complaints had been made regarding the service or management of the agency.

The RQIA registration certificate was up to date and displayed appropriately. Under the direction of the manager, Heather Mc Elwee, a team of 79 care workers provides domiciliary care and support to 268 people living in their own homes.

Review of the statement of purpose and discussion with the manager evidenced that there was a clear organisational structure within the agency. The manager was able to describe staff roles and responsibilities and was clear regarding reporting responsibilities in line with the agency procedures. The Statement of Purpose (2018) was reviewed and found to be appropriately detailed regarding the nature and range of services provided. This contained all information in compliance with Regulations and Standards.

The agency's complaints information viewed within the service user guide was found to be appropriately detailed, including the contact information of independent advocacy services.

It was identified from records viewed that the agency has received no complaints since the previous inspection.

The inspectors reviewed a number of monthly quality monitoring reports. The reports evidenced that the registered person monitors the quality of service provided in accordance with minimum standards.

The inspectors noted comments from Service users, Staff and the HSC Trust:

Service users:

- "Staff are compassionate."
- "Staff are approachable."
- "An excellent service."

Staff:

- Training is excellent."
- "The quality of care is excellent."
- "I'm satisfied with my supervision."

HSC Trust:

- "The overall quality of care is very good."
- "Staff provide good updating."
- "Response times are satisfactory."

The registered provider has worked effectively with RQIA and maintained their roles and responsibilities in accordance with legislation. The Statement of Purpose (2018) and Service User Guide (2018) are kept under review, and have been revised when necessary. The registered person has shown an ability to respond appropriately to regulatory matters and led the organisation in maintaining compliance with Regulations and Minimum Standards.

Areas of good practice

There were examples of good practice identified throughout the inspection in relation to the agency's management and governance arrangements, management of complaints, incidents, quality monitoring and 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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