

# Unannounced Care Inspection Report 4 December 2020



## Connected Health Domiciliary Care Ltd

**Type of Service: Domiciliary Care Agency**

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**Inspector: Corrie Visser**

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

## 1.0 What we look for



## 2.0 Profile of service

Connected Health Domiciliary Care Ltd is a domiciliary care agency based in Belfast which provides personal care, social support and sitting services to people in their own homes.

A team of 768 care staff are currently providing care services to 1655 service users. Service users have a range of needs associated with learning disability, physical disability, dementia and mental health conditions. The majority of the services are commissioned by each of the Health and Social Care (HSC) Trusts across Northern Ireland. A small number of services are provided in a privately funded capacity.

## 3.0 Service details

<b>Organisation/Registered Provider:</b> Connected Health Domiciliary Care Limited	<b>Registered Manager:</b> Ms Lorraine Corr
<b>Responsible Individual:</b> Mr Douglas Joseph Adams	
<b>Person in charge at the time of inspection:</b> Ms Lorraine Corr	<b>Date manager registered:</b> 10 May 2018

## 4.0 Inspection summary

An unannounced inspection took place on 4 December 2020 from 10.10 to 16.00 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. Since the date of the last care inspection, RQIA was notified of a small number of notifiable incidents and received information from the SHSCT. It was therefore decided that an inspection would be carried out using an on-site inspection approach in line with social distancing 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 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.

The agency's provision for the welfare, care and protection of service users was reviewed. We viewed the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 which is maintained by the agency in relation to the safeguarding of adults (2016).

On the day of the inspection we discussed safeguarding incidents which had occurred with the manager and deemed that they had been managed appropriately. We also reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in line with Regulation 23.

The agency maintains and implements a policy relating to complaints. On the day of the inspection it was noted that the agency had received a number of complaints since the last inspection. The complaints reviewed were dealt with satisfactorily that show positive outcomes for the complainants.

Evidence of good practice was found in relation to Access NI, staff registrations with the Northern Ireland Social Care Council (NISCC), monthly quality monitoring reports, management of incident and the return of service users' daily logs.

Good practice was also found in relation to all current Covid-19 guidance and the use of PPE guidelines, Covid-19 education and management including IPC measures.

## 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms Lorraine Corr, registered 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 20 January 2020

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 20 January 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, the returned QIP, 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, staff and professionals to obtain 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 service user/relative questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA. Seven service user/relative questionnaires and two staff surveys were received. Analysis and comments are included in this report.

Following the inspection we communicated with four service users, four staff members, five service users' relatives and two professionals.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

We would like to thank the manager, service users, service user's relatives and staff and professionals for their support and co-operation throughout the inspection process.

## 6.0 The inspection

Areas for improvement from the last care inspection dated 20 January 2020		
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 14(a)  <b>Stated:</b> 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 wellbeing of service users.	<b>Met</b>

	This is in relation to the calls to service users reflective of commissioned call times.	
	<b>Action taken as confirmed during the inspection:</b> We reviewed eight servicer users' files and it was evidenced that the service users were receiving their commissioned calls times.	
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 23  <b>Stated:</b> Second time	The registered person shall establish and maintain a system for evaluating the quality of the services which the agency arranges to be provided.  This relates to reviewing safeguarding allegations within the agency and recording appropriately.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> We reviewed a sample of the monthly quality monitoring reports and they were robust with a good breakdown of all adverse incidents, safeguarding and complaints. There was appropriate governance and oversight of quality of services being provided.	
<b>Area for improvement 3</b>  <b>Ref:</b> Regulation 15(4)  <b>Stated:</b> First time	The registered person shall, so far as is practicable, ensure that the prescribed services which the agency arranges to be provided to any service user meets the service user's needs specified in the service user plan prepared in respect of him.  This relates to travel time between calls impacting on the delivery of care packages to service users.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> We reviewed a sample of rotas and the registered manager explained that the rotas are formulated around "clusters" of service users. This means that the service users living within close proximity of each other. It was noted that travel time had been incorporated into the runs for service users who were outside the "clusters".	

<b>Area for improvement 4</b>  <b>Ref:</b> Regulation 15(3)(b)(c)  <b>Stated:</b> First time	The registered person shall –  (a) Keep the service user plan under review; (b) Where appropriate, and after consultation with the service user, or if consultation with the service user is not practicable, after consultation with the service user’s representative, revise the service user plan.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The HSC Trusts are responsible for reviewing and updating service users’ care plans with input from Connected Health. Any changes to the care plans had been updated in the timetable of services to reflect the service users’ needs.	
<b>Action required to ensure compliance with the Domiciliary Care Agencies Minimum Standards, 2011</b>		<b>Validation of compliance</b>
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 5.7  <b>Stated:</b> First time	The registered person shall ensure the records are transferred from the service user’s home to the agency or other organisation (e.g. referring HSC Trust, or other purchaser of the service) for safekeeping when the service is concluded or according to the agency’s procedures.	<b>Met</b>
	This relates to the daily logs being returned to the agency in a timely manner.	
	<b>Action taken as confirmed during the inspection:</b> We reviewed 8 service users’ daily logs which have been returned to the office in a timely way.	

## 6.1 Inspection findings

### Recruitment:

On the day of inspection, we reviewed four staff recruitment files. It was evident that the manager was knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and Standard 11 of the Domiciliary Care Agencies Minimum Standards, 2011 which relates to Access NI. All pre-employment checks had been completed prior to a date of commencement being provided to the staff member. This ensures that the persons employed are suitable to be working with service users.



The NISCC matrix reviewed confirmed all staff were registered with NISCC. The manager advised that staff registration is checked on a monthly basis and a reminder is sent to staff who are due to renew their registration. The manager 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.

Comments from service users included:

- “I’m dead on with the care.”
- “They are wearing full PPE – gloves, aprons, masks and eye protection.”
- “Top class.”
- “They wear all the gear.”
- “No complaints whatsoever.”
- “Very good girls.”
- “Very friendly.”
- “Very good at their job.”
- “Oh yes I am happy.”
- “They do their best.”
- “They are well organised.”

Comments from service users’ relatives included:

- “I am happy.”
- “They are better now than what they were.”
- “They are doing what they should be doing.”
- “The girls are lovely.”
- “They have been very cautious through the pandemic.”
- “Very professional and attentive.”
- “They are wearing full PPE – gloves, aprons and masks.”
- “Very respectful.”
- “Very good for arriving for every call.”
- “Very diligent.”
- “I am extremely happy.”
- “Very very pleased.”
- “They provide my relative with a high standard of care.”
- “They are very kind to my relative.”
- “They are very good and very kind to my relative.”

Comments from care workers included:

- “It’s great.”
- “Management are supportive.”
- “We have a good supply of PPE.”
- “I feel we have enough time to deliver care.”
- “Any issues I have had, they have been sorted quickly.”
- “I am aware of the donning and doffing, the safe disposal and the need to double bag PPE.”
- “I am happy to work for Connected Health.”
- “We have received a lot of guidance, training and videos for using PPE.”
- “We get constant updates for training.”
- “I like to spend a lot of time with service users but sometimes I am pushed for time.”

- “I enjoy my work, it’s very rewarding.”
- “The manager is always available.”
- “I like consistency as it means I can get to know my service users.”
- “I am more than happy to work for them and want to continue to do so.”
- “Until the last couple of months, things were grand however but things have gone downhill. We couldn’t get new workers and we had to do more work.” (This comment was in relation to the resignations of a number of staff members from Connected Health due to obtaining other positions elsewhere, leaving for personal reasons or returning to their job pre-covid).
- “My manager is great.”
- “I have had spot checks by the Trust and by Connected Health.”
- “My friends and family recommended working for Connected Health.”
- “The support is fantastic.”
- “Any issues are dealt with straight away.”
- “We get training updates every week including videos of how to don and doff PPE.”
- “If there are any changes, they are well on top of it.”
- “I need more training, all I have to do is ask and it is done by zoom.”
- “They are absolutely great.”
- “PPE is always available when I need it.”

Comments from professionals included:

- “They are good at reporting.”
- “No major incidents or concerns.”
- “They are regular collectors of PPE.”
- “No issues reported regarding PPE.”

Seven service user/relative questionnaires were received and all the respondents were either ‘very satisfied’ or ‘satisfied’ that the care being delivered was safe, effective, compassionate and well led. Comments included:

- “Everybody is fine. Happy with care received by Connected. I am very happy.”
- “Very happy with care provided.”
- “Everything is fine. They are nice girls.”
- “Everything is ok.”

Two staff responses were received. One respondent was ‘satisfied that the care being delivered to service users is safe, compassionate, effective and well-led and included a comment:

- “I feel I work for a dedicated company who are passionate about the work they do, as with any job there are obstacles to overcome and they are.”

One respondent was ‘very unsatisfied’ that the care being delivered is safe, compassionate and effective and was ‘undecided’ if the care was well-led. This respondent did not include any comments and the questionnaires are confidential therefore we are unable to contact the respondent to ascertain the issues that they feel need addressed by the agency. These responses were discussed with the registered manager. It was discussed that Connected Health have an anonymous hotline for staff to use if they have any concerns about any aspect of their work or care of the service user. This is monitored on a daily basis and no concerns have been reported. The agency has also recently undertaken staff surveys and no concerns were raised by staff members. There is an open door policy for staff so they can contact their



line manager or the registered manager at any time to discuss any concerns or issues they may have.

## **Covid-19**

We spoke to the manager, assistant manager, compliance officer and to 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 were shown how and what information is provided to staff and viewed the video in relation to donning and doffing PPE, how to dispose of PPE and the need to double bag PPE which was created by Connected Academy. We were also made aware of a quiz which all staff members complete in relation to their knowledge of the PHA guidelines. It was explained that if any staff member gets an incorrect answer, the computer system identifies the name of the care worker and further advice and training is provided. Weekly updates are provided to staff which has included car sharing, mask and visor guidance, IPC guidance and amber PPE advice and guidance. Staff spoken with confirmed that information is regularly sent out to them with all the information required to keep the service users safe as well as themselves.

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. During discussion with staff it was positive to note that they 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 NISCC, monthly quality monitoring reports, management of incidents and the return of service users' daily logs.

Good practice was also found in relation to all current Covid-19 guidance and the use of PPE guidelines, Covid-19 education and management including IPC measures.

### Areas for 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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