



Announced Care Inspection Report 12 March 2021



Homecare (Northern Ireland) Ltd t/a Homecare Independent Living

Type of Service: Domiciliary Care Agency
Address: Callan House, 51 Hill Street, Milford, BT60 3NZ
Tel No: 028 3751 1333
Inspector: Aveen Donnelly

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

1.0 What we look for



2.0 Profile of service

Homecare Independent Living is a domiciliary care agency whose registered office is based in Milford. A staff workforce of 500 provides care to 1170 service users in their own homes. Service users have a range of needs including physical and learning disabilities, addictions, dementia and mental health needs. The range of services which are provided include the provision of personal care, practical and social support, and sitting services. The services are commissioned by the Belfast Health and Social Care Trust, the Northern Health and Social Care Trust and the Southern Health and Social Care Trust (HSCT's).

3.0 Service details

Organisation/Registered Provider: Homecare (NI) Ltd	Registered Manager: Ms Joanne Elizabeth Murray
Responsible Individual: Ms Mairead Mackle	
Person in charge at the time of inspection: Head of Operations and Compliance	Date manager registered: 20/03/2019

4.0 Inspection summary

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.

The last care inspection was undertaken on 16 April 2019.

Since the date of the last care inspection, a number of correspondences were received in respect of the agency. RQIA was also informed of any notifiable incidents which had occurred within the agency in accordance with regulations.

Whilst RQIA was not aware of any specific risk to the service users within the agency, the decision was made to undertake an onsite inspection, adhering to social distancing guidance.

An announced inspection took place on 12 March 2021 from 09.15 to 13.50 hours.

We reviewed the dates that criminal records checks for staff employed by the agency (AccessNI) had been completed to ensure that they were in place before staff were supplied to service users. We checked that all staff were registered with the Northern Ireland Social Care Council (NISCC) and that there was a system in place for ongoing monitoring of staff registrations. Staff adherence to the Covid-19 Guidance was also reviewed through discussion with a number of relatives. In addition, we reviewed Covid-19 related information, disseminated to staff.

Evidence of good practice was found in relation to recruitment practices and staff registrations with NISCC. Good practice was also found in relation to Infection Prevention and Control (IPC); it was evidenced that all staff and service users had been adhering to the current Covid-19 guidance on the use of Personal Protective Equipment (PPE).

No areas for improvement were identified.

Those consulted with indicated that they were satisfied with the care and support provided.

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.

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 and the Domiciliary Care Agencies Minimum Standards, 2011.

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 the person in charge, 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 16 April 2019

No further actions were required to be taken following the most recent inspection on 16 April 2019.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA in relation to the agency. This included the previous inspection report, notifiable events and written and verbal communication received since the previous care inspection.

RQIA provided information requesting feedback from service users, staff and other stakeholders in relation to the quality of service provided. This included an electronic survey for service users, relatives and staff, to feedback to the RQIA.

To ensure that the required pre-employment checks were in place before staff visited service users, we reviewed the following:

- Recruitment records specifically relating to Access NI and NISCC registrations.

We also reviewed IPC procedures to ensure that they were compliant with the current Covid-19 guidance for domiciliary care providers in Northern Ireland.

We discussed any complaints and incidents that had been received by the agency with the person in charge and in addition we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in line with Regulation 23 of The Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

6.0 What people told us about this agency

During the inspection we spoke with the person in charge. We had no opportunity to meet service users as they were all in their own homes throughout the community.

RQIA provided information requesting feedback from service users, staff and other stakeholders in relation to the quality of service provided. This included an electronic survey for service users, relatives and staff, to feedback to the RQIA. The feedback received indicated that people were satisfied with the current care and support.

Comments are detailed below:

Staff

- “Everyone works as a team.”

Service users

- “I have no concerns.”

Service users’ representatives

- “I have two of the nicest ladies that ever came into this house. They even tell me that if I can’t cope, just let them know.”
- “They are a marvellous bunch. I do not know how I would have survived without them. From the get go, they were excellent, very respectful.”
- “I am very happy, they are very helpful,”
- “I have no concerns.”

HSC’ representatives

- “We do not at this time have any concerns in relation to Homecare NI. In fact we have found them very amenable during the recent Covid-19 surges and have managed to maintain services to our service users.”
- “We have no concerns.”

7.0 The inspection

The review of the agency’s staff recruitment records confirmed that recruitment was managed in accordance with the regulations and minimum standards, before staff members commence employment and direct engagement with service users.

A review of the records confirmed that all staff provided by the agency are currently registered with NISCC. We noted that there was a system in place each month for monitoring staff registrations. There was a process in place to ensure that new employees completed an induction, which included training identified as necessary for the service and familiarisation with the service and the organisation’s policies and procedures.

There was a rolling programme of training in place for staff and this was reviewed during the inspection. We discussed the practical elements of moving and handling training and were satisfied that it included training on the most commonly used moving and handling equipment. Discussion took place in relation to the need for practical training on specific and less commonly used items of moving and handling equipment as and when such items of equipment are assessed as required. The person in charge confirmed that such training is facilitated by the local area managers or the commissioning trusts, if required.

The review of a number of care records identified that moving and handling assessments were in place. The review of the daily care logs, returned from service users' homes, identified that there had been no missed calls. All calls were generally delivered as planned. However, it was noted that a number of calls were slightly shorter in duration than that outlined in the care plan. The person in charge agreed to monitor this going forward.

Discussion with the person in charge evidenced that they had a good understanding of the procedures to follow whilst providing care to service users who had a confirmed or suspected diagnosis of Covid-19.

Staff had also completed training in relation to IPC. This included training on the donning (putting on) and doffing (taking off) of PPE. The person in charge further described how a range of other Covid-19 related information was available for staff to read. We viewed communications sent to staff, in relation to Covid-19 updates. These included information on:

- PPE Guidance
- 7 Step Handwashing Guide
- Donning and Doffing
- Returning to work policy
- Covid-19 policy
- Travel restrictions

There was a system in place to ensure that IPC procedures were being adhered to. This included senior staff undertaking spot checks of care staff in relation to their adherence to the guidance. Feedback noted in the monthly quality monitoring reports also noted that staff adherence to the guidance had been checked.

We reviewed a number of monthly quality monitoring reports that indicated good satisfaction levels in place for service users, staff and other stakeholders.

Areas of good practice

Evidence of good practice was found in relation to staff recruitment practices and staff registrations with NISCC. Good practice was found in relation to IPC; all staff and service users had been adhering to the current Covid-19 guidance on the use of PPE.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

8.0 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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