

Announced Care Inspection Report 6 February 2020



Hollygate Homecare

Type of Service: Domiciliary Care Agency
Address: 7 The Square, Clough, BT30 8RB
Tel No: 02844811672
Inspector: Michele Kelly

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

Hollygate Homecare is a supported living type domiciliary care agency, located in Clough. The agency's aim is to provide care and support which includes supporting service users with tasks of everyday living, emotional support and assistance to access community services, with the overall goal of promoting health and maximising quality of life.

Staff provide care and support to the three adults who reside in a two storey house; the service users have individual bedrooms and shared kitchen, lounge and bathroom facilities.

3.0 Service details

Organisation/Registered Provider: Hollygate Homecare Responsible Individual(s): Mr Ian George Emerson	Registered Manager: Ms Deirdre Burns
Person in charge at the time of inspection: Ms Deirdre Burns	Date manager registered: 24 July 2009

4.0 Inspection summary

An announced inspection took place on 6 February from 09.30 to 12.00.

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.

The inspection aimed to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to Access NI and staff registrations with the Northern Ireland Social Care Council (NISCC).

The majority of those spoken with commented positively in relation to the support and care 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.

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 Deirdre Burns, 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 1 December 2018

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 1 December 2018.

5.0 How we inspect

Prior to inspection the inspector 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.

During the inspection the inspector focused on contacting the service users, their relatives and staff to find out their views on the service. The inspector also communicated with Health and Social (HSC) professionals involved with the service.

The inspector ensured that the appropriate staff checks were in place before staff visited service users.

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

Questionnaires were provided to give service users and those who visit them the opportunity to contact us after the inspection with their views. Three responses were received and feedback is included within the report.

A poster was provided for staff detailing how they could complete an electronic questionnaire. No responses were received.

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

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

6.0 The inspection

Areas for improvement from the last care/finance inspection dated 1 December 2018		
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 17.-(2) (b)(c)(d) Stated: Second time	The registered person shall ensure that the handbook prepared in accordance with paragraph (1) shall include a statement as to- (b) the role and responsibilities of domiciliary care workers and other staff; (c) record keeping requirements; (d) recruitment procedures;	Met
	Action taken as confirmed during the inspection: Inspector confirmed that additions had been included in the handbook which was now compliant with Regulation 17.	

6.1 Inspection findings

Discussion with the manager and a review of records confirmed that there was a system in place to ensure that relevant pre-employment checks with AccessNI had been undertaken prior to employment.

There was also a system in place to ensure that staff were registered with NISCC and were monitored on a regular basis. The manager stated that staff are alerted when their registration is required to be renewed and would not be supplied for work if they are not appropriately registered.

During the inspection, the inspector met the three service users, who appeared comfortable in their surroundings and were relaxed in their interactions with staff.

The inspector spoke with two staff members, who were knowledgeable in relation to their responsibility in reporting concerns.

The inspector also had communication from a HSC representative and three service users' relatives.

A relative who spoke with the inspector on the telephone discussed matters which had been highlighted on inspection. The inspector communicated with the manager who advised that further discussions involving all stakeholders were being convened shortly.

Comments received during and after inspection.

Service users:

- "I like here, people are good to me."
- "I am happy living here."
- "I enjoy living here."
- "I get on alright with staff."

Relatives:

- "Yes, I feel XXX is well looked after"
- "At the minute, I am happy"
- "I am very happy with how XXX is looked after"
- "Staff are very good, very approachable"

HSC Representative:

- "Good communication between services."
- "Community nursing have regular contact."

Staff:

- "I would have no hesitation in raising concerns."
- "Service users are happy and contented."
- "Service users have a good quality of life."
- "Training has helped me a lot."

Four questionnaires from service users and their relatives were returned and all indicated they were very satisfied.

Areas of good practice

Areas of good practice were identified in relation to the completion of checks with AccessNI and staff registrations with NISCC.

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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