

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

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UNANNOUCED INSPECTION

Inspection No: 18111

Establishment ID No: 10986

Name of Establishment: Peninsula Care Services

Date of Inspection: 24 April 2014

Inspector's Name: Amanda Jackson

GENERAL INFORMATION

Name of Agency:	Peninsula Care Services			
Address:	3a Movilla Street Newtownards BT23 7JG			
Telephone Number:	(028) 9182 8921			
E mail Address:	info@peninsulacareservices.co.uk			
Registered Organisation/ Registered Provider:	Peninsula Care Services Ltd / Mr Jonathan Cook			
Manager:	Miss Gillian Mary Mulholland			
Person in Charge of the Agency at the time of Inspection:	Mr Jonathan Cook			
Date and type of previous inspection:	10 March 2014 Announced Follow Up Inspection following 2013-14 inspection in December 2013			
Date and time of inspection:	24 April 2014 Unannounced inspection regarding recruitment practices 10.15 to 11.15 hours			
Name of Lead Inspector:	Amanda Jackson			

PURPOSE OF THE INSPECTION

The purpose of the inspection was to investigate an allegation received regarding possible non-compliance with the following; The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and The Department of Health, Social Services and Public Safety's (DHSSPS) Domiciliary Care Agencies Minimum Standards (2008) (updated 2011).

The Regulation and Quality Improvement Authority (RQIA) received a complaint which made an allegation regarding the safety and quality of the service being provided by the agency. The allegation required an inspection to be carried out to investigate if any breach of regulations had occurred.

METHODS/PROCESS

The unannounced inspection of Peninsula Care Services took place on the 24 April 2014 from 10.15 – 11.15hours.

The registered person Jonathan Cook was informed of the allegations received by RQIA and cooperated fully with this unannounced inspection.

The allegations made were as follows;

 Peninsula Care Services is employing and starting workers in service user's homes before the appropriate recruitment and Access NI checks have been received. Two specific staff names were shared with RQIA during the whistleblowing allegation.

The areas inspected on 24 April 2014 and findings are as follows;

 Staff recruitment records - The agency has employed two domiciliary care staff since the agencies previous inspection in March 2014. Review took place of both records during this inspection.

INSPECTOR FINDINGS

1. The agency has recruited two new staff members since the agencies previous follow up inspection in March 2014. These two staff members were not found to be the two staff names provided to RQIA by the whistle blower. Recruitment practice had been an area of review during the agencies previous annual announced inspection in December 2013 with a requirement made during this time. Review of recruitment practice during the agencies last follow up inspection in March 2014 was confirmed as compliant. On-going review of recruitment records continues with RQIA given the previous requirement made in December 2013.

2. Staff records reviewed for the two recently recruited staff members were found to be compliant with Regulation 13 and Schedule 3 and Standard 11 with exception to the paper element of both staff members driving licence (the hard plastic element was available for both staff members). The records for one staff member was also amiss regarding their car insurance for business purposes. Both matters were discussed with Jonathan Cook during inspection and requested for submission with the QIP to this report.

3. The inspector shared the two staff names provided by the whistle blower with Jonathan Cook during the inspection. Jonathan confirmed that neither staff member was known to himself or the agency. Jonathan provided a complete alphabetical staff list for review during inspection together with the previous two weeks staff BACs payment list, review of both by the inspector confirmed that the two staff names were not enlisted.

SUMMARY OF FINDINGS

Inspection findings regarding the allegations made as follows;

 Peninsula Care Services is employing and starting workers in service user's homes without the appropriate recruitment and Access NI checks. This allegation was found not to be upheld

One recommendation was made as a result of the unannounced inspection of Peninsula Care Services undertaken on 24 April 2014. All matters have been detailed in the attached QIP.

The inspector's initial findings were discussed with Jonathan Cook who was advised that a report would be forwarded to him. Jonathan Cook was advised that he must ensure all staff member's recruitment records are compliant with Regulation 13 and Schedule 3 and Standard 11 prior to commencing employment.

QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement Plan appended to this report were discussed with **Jonathan Cook** as part of the inspection process.

The timescales for completion commence from the date of inspection.

The registered provider / manager is required to record comments on the Quality Improvement Plan.

Where the inspection resulted in no recommendations or requirements being made the provider / manger is asked to sign the appropriate page confirming they are assured about the factual accuracy of the content of the report.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

Enquiries relating to this report should be addressed to:

Amanda Jackson
The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT



Quality Improvement Plan

Unannounced Secondary Inspection

Peninsula Care Services

24 April 2014

The areas where the service needs to improve, as identified during this inspection visit, are detailed in the inspection report and Quality Improvement Plan.

The specific actions set out in the Quality Improvement Plan were discussed with **Jonathan Cook (registered person)** receiving feedback during the inspection visit.

Any matters that require completion within 28 days of the inspection visit have also been set out in separate correspondence to the registered persons.

Registered providers / managers should note that failure to comply with regulations may lead to further enforcement and/ or prosecution action as set out in The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

It is the responsibility of the registered provider / manager to ensure that all requirements and recommendations contained within the Quality Improvement Plan 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

Statutory Requirements

This section outlines the actions which must be taken so that the Registered Person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Domiciliary Care Agencies Regulations (NI) 2007

	(Cadity), improvement and regulation (intertition in claim) order 2000, and the Democraty Gare regulations (int) 2001								
No.	Regulation	Requirements	Number Of Details Of Action Taken By		Timescale				
	Reference		Times Stated	Registered Person(S)					
1	Standard 11.2	The registered person / manager is recommended to ensure all new staff recruitment records are maintained in compliance with standard 11.2 regarding staff driving licence and car insurance. As discussed within the body of this report.	Once	Both paper component of driving licence and car insurance details have been forwarded to inspector as per requirement. For those being recruited in the future we will ensure these records are obtained prior to commencement of employment and hold copies of same for review during the next inspection process.	To be commenced with immediate effect and two staff records reviewed during inspection to be submitted with this QIP for review.				

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:

NAME OF REGISTERED MANAGER COMPLETING QIP	JONATHAN COOK	
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	JONATHAN COOK	

QIP Position Based on Comments from Registered Persons	Yes	Inspector	Date
Response assessed by inspector as acceptable	Yes	A.Jackson	12/06/ 14
Further information requested from provider			