

# Announced Care Inspection Report 25 January 2021



## Rosewood Court

**Type of Service: DCA/SLS**

**Address: Trinity Methodist Church, Trinity Methodist Church,  
Knockmore Road, Lisburn, BT28 2YQ**

**Tel No 028 926 27782**

**Inspector: Jim McBride**

[www.rqia.org.uk](http://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

Rosewood Court is a supported living type domiciliary care agency, located within the Lisburn area. The agency offers domiciliary care and housing support to adults with a learning disability. Staff are available to provide support 24 hours per day and each service user has an identified 'key worker.'

### 3.0 Service details

|                                                                         |                                                   |
|-------------------------------------------------------------------------|---------------------------------------------------|
| <b>Organisation/Registered Provider:</b><br>Inspire Disability Services | <b>Registered Manager:</b><br>Paul Moore          |
| <b>Responsible Individual:</b><br>Cormac Coyle Registration Pending     |                                                   |
| <b>Person in charge at the time of inspection:</b><br>Paul Moore        | <b>Date manager registered:</b><br>Acting manager |

### 4.0 Inspection summary

An announced inspection took place on 25 January 2021 from 09.15 to 12.15.

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.

RQIA have reviewed correspondence and other contacts related to the agency since the previous inspection on the 18 June 2019. Whilst RQIA was not aware that there was any specific risk to the service a decision was made to undertake an on-site inspection adhering to social distancing guidance.

Evidence of good practice was found in relation to Access NI and staff registrations with the Northern Ireland Social Care Council (NISCC). Good practice was also found in relation to all current Covid-19 guidance and the use of Personal protective equipment (PPE) guidelines. Covid-19 education and management including: infection prevention and control (IPC) were found to be in line with latest guideline measures. The agency should also be commended for their service user quality monitoring during the year relating to covid-19 areas.

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.

#### **We noted some of the compliments received by the agency:**

- “The staff have kept me up to date about \*\*\*\*\* and made me feel at ease during this worrying time.”
- “Thanks to the staff for how they supported \*\*\*\*\*”
- “This is the perfect place for my \*\*\*\*\* to live.”

The findings of this report will provide the manager with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users’ experience.

## 4.1 Inspection outcome

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the 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.

No further actions were required to be taken following the most recent inspection on 18 June 2019.

## 5.0 How we inspect

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

During our inspection we focused on contacting the service users and staff to find out their views on the service.

We ensured that the appropriate staff checks were in place before staff visited service users and reviewed the following:

- 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 'Tell us' cards, Service user/relative questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA. No feedback was received prior to the issue of this report.

RQIA information leaflets 'How can I raise a concern about an independent health and social care service' were also provided to be displayed appropriately.

During the inspection we communicated with the manager and staff but had no opportunity to meet service users as they were all self-isolating in specific bubbles in their own homes. However we provided questionnaires for them to comment on the quality of service provision. No feedback was received prior to the issue of this report.

### Staff comments during inspection:

- "Excellent staff communication."
- "The manager is always available and has an open door policy."
- "My induction was comprehensive and I shadowed other experienced staff."
- "Keeping in touch with relatives is important to service users."
- "We promote choice and ask service users for their opinion."
- "Everyone is approachable."
- "We have helped service users with new technology during covid."
- "I feel safe and secure with all the PPE and good guidelines in place."

We would like to thank the manager and staff for their support and co-operation throughout the inspection process.

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

## 6.0 The inspection

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

## 6.1 Inspection findings

### **Recruitment:**

The agency's staff recruitment processes were noted to be managed in conjunction with the organisation's Human Resources (HR) Department, located at the organisation's head office. Discussion with the manager identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 and Standard 11 relating to Access NI. We reviewed documentation in staff files in relation to pre-employment checks which provided assurances that Access NI checks were completed before commencement of employment.

Staff spoken with said that training was valuable and gave them the skills to undertake their role. New staff received a comprehensive induction which included regular meetings and the opportunity to shadow experienced staff. This was confirmed by the staff spoken with and records reviewed.

Staff are supported by supervisions and appraisals. It was noted that these had been consistent with the agency's policy and procedure and helped to enable them to review their practice. From review of records, we could see the formats gave staff the opportunity to raise any concerns and discuss their own personal development.

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

On the day of the inspection it was noted that no incidents had taken place since the previous inspection 18 June 2019.

The agency maintains and implements a policy relating to complaints. On the day of the inspection it was noted that the agency had received one complaint since their previous inspection 18 June 2019. The manager dealt with this through their procedures and is now closed to the satisfaction of the complainant.

A review of records confirmed that all staff are currently registered with The Northern Ireland Social Care Council (NISCC). We noted that the manager had a system in place each month for monitoring registration status of all staff with NISCC and confirmed that all staff are aware that they are not permitted to work if their NISCC registration had lapsed.

**Service quality:**

We reviewed a number of monthly quality monitoring reports that show good satisfaction levels in place for service users, staff and other stakeholders. We noted some of the comments received from service users, staff, relatives and HSC staff:

**Service users:**

- “The staff are great.”
- “Staff are kind to me.”
- “I’m happy living here.”

**Staff:**

- “The teamwork is very good.”
- “I enjoy my role.”
- “We receive good support.”

**Relatives:**

- “\*\*\*\* has settled so well.”
- “I have no issues contacting the scheme.”
- “Staff are wonderful caring and supportive.”

**HSC Staff:**

- “Communication between me and the staff is good.”
- “I have good confidence in the team.”
- “I only have praise for the support.”

**Care planning and review:**

We reviewed care plans in place for individual service users. These fully described the care and support required for individuals and included:

- Referral information
- Care plan
- Individual action plans
- Risk assessments
- Reviews

The agency is to be commended for ensuring that all annual reviews were completed.

Staff we spoke with demonstrated good caring values and a desire to provide service users with high quality personalised care. They knew service users well including their choices and preferences.

**Covid-19:**

We spoke with the manager and a number of staff members, who were knowledgeable in relation to their responsibility in relation to covid-19. Staff stated they were aware of the guidance on 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.

We reviewed the current practices relating to the following areas of guidance and good practice relating to Covid-19.

- Dissemination of information to staff.
- Monitor staff practice.
- IPC policies and procedures have been updated to address all current guidance in relation to Covid-19.
- Temperature monitored twice daily in line with guidance.
- PPE storage and disposal.
- Staff training and guidance on: a. IPC and b. the use of PPE, in line with the current guidance.

We reviewed records relating to IPC policies which were in-line with the current guidance. The policies and procedures had been updated to include Covid-19 guidance. Policies and guidance were available to all staff in hard copy within the agency office.

We reviewed records indicating that service users, staff and visitors had their temperatures monitored twice daily in accordance with the guidance.

Monitoring records also involved asking about and looking out for the following symptoms, fever of 37.8C or above, cough, loss of or change in sense of smell or taste.

Hand sanitisers were placed in different areas throughout the agency for service users, staff and visitors to use to ensure and promote good hand hygiene.

There was evidence that clear guidance with regards to IPC, donning (putting on) and doffing (taking off) of PPE. There was evidence that staff had completed training with regards to IPC.

The staff on duty demonstrated that they had a good understanding of the donning and doffing procedures and were observed to be using PPE appropriately. The manager discussed the procedures that both he and staff spot check the use of PPE during shifts. Spot checks on staff practice are undertaken to ensure they are fully compliant with the guidance.

The procedure and guidance in place show that:

- Robust systems are in place to ensure that current infection prevention and control guidance is available and accessible to staff.
- There are effective systems in place to monitor staff compliance with good infection prevention and control practices.
- All staff working in the service are able to demonstrate their knowledge of IPC practice commensurate to their role and function in the service.

It was good to note that staff were working well together to support the best outcomes for service users, in a sensitive manner, whilst being caring and compassionate. This was evidenced through discussion and record reviewed.

It was 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. Staff are being vigilant in terms of monitoring tenants for symptoms and are adhering to the public health guidance in order to minimise the risk of introducing or spreading Covid-19 within the agency.

We noted one of the quality monitoring surveys, relating to Covid-19 was completed earlier this year. This is to be commended as it showed clear relevance to the current covid management. This pictorial easy read document allowed the service users to comment on the following areas:

- Has Coronavirus changed what you do day to day?
- Have you felt worried about Coronavirus or the changes that it has caused?
- Do you think the Coronavirus restrictions have made your mental health feel different?
- Do you want to tell us anything about how your mental health has been during Coronavirus pandemic?
- Do you think the Coronavirus restrictions have made your physical health feel different?
- Are you worried or upset about the chance of more restrictions on where we can go and what we can do?
- Can you think of anything that would make it better for you if there are more restrictions on where we can go and what we can do?
- Do you think Inspire have given you good support during Coronavirus?

#### Questionnaire replies:

- "I continue to enjoy the activities."
- "Staff reassure me."
- "Staff help with my shopping."
- "I miss some of my outings."
- "Staff have helped me keep safe."
- "I miss my family."
- "Staff are providing full support."
- "Staff have helped me keep busy and to keep in touch with family."
- "Staff reassured me and kept me safe."

#### Areas of good practice

- compliance with the Covid-19 guidance relating to IPC and PPE
- quality monitoring

No areas for improvement were identified during the inspection.

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