

# Unannounced Care Inspection Report 10 February 2020



## North West Care

**Type of Service: Domiciliary Care Agency**  
**Address: 67 / 69 Main Street, Ballykelly, BT49 9HS**  
**Tel No: 028 7772 3514**  
**Inspector: Kieran Murray**

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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

This is a domiciliary care agency which provides personal care and housing support to 768 individuals with physical, mental health, learning disability, care of the elderly needs living within the Western Health and Social Care Trust (WHSCT) area. Service users are supported by 445 staff.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> North West Care  <b>Responsible Individual:</b> Mr Philip Stewart	<b>Registered Manager:</b> Mrs Bernadette Anne Lowry
<b>Person in charge at the time of inspection:</b> Mrs Bernadette Anne Lowry	<b>Date manager registered:</b> 29 June 2015

### 4.0 Inspection summary

An unannounced inspection took place on 10 February 202 from 09.40 to 14.30.

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 Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017 and the Domiciliary Care Agencies Minimum Standards, 2011.

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.

No areas requiring improvement were identified during this inspection.

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

Service users and relatives spoken with said they were very happy 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.

### 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 Mrs Bernadette Lowry, Registered Manager and Mrs Shauna Irwin, Operations 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 21 November 2018

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 21 November 2018.

## 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.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service. We also spoke with HSCT representatives involved with the service.

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

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

“Have we missed you?” cards were provided to give service users and those who visit them the opportunity to contact us after the inspection with their views. No responses were received prior to the issue of the report.

A poster was provided for staff detailing how they could complete an electronic questionnaire. No responses were received prior to the issue of the report.

Ten questionnaires were also provided for distribution to the service users and their representatives; no responses were returned within the timeframe for inclusion within 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 in the setting.

During the inspection the inspector communicated with two service users, four service users’ relatives and met with three staff. Following the inspection the inspector made telephone contact with a further nine service users, one relative and one HSCT representative.

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

The inspector would like to thank the registered manager, service users, service user’s relatives, HSCT representatives 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

Areas for improvement from the last care inspection dated 21 November 2018		
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011		Validation of compliance
<b>Area for improvement 1</b> <b>Ref:</b> Standard 13.5 <b>Stated:</b> First/ time	The registered person shall ensure that staff have recorded appraisal with their line manager to review their performance against their job description and agree personal development plans in accordance with the procedures.  Ref: 6.4	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The inspector evidenced that appraisals were completed in line with policy and procedure.	

## 6.2 Inspection findings

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

There was a system in place to ensure that staff were registered with NISCC/NMC and were monitored on a regular basis. The inspector reviewed nine records relating to NISCC and NMC registrations and found them to be satisfactory.

During the inspection, the inspector spoke with the manager, operations manager and three staff. Telephone communication was made with 11 service users, five relatives and one HSCT representatives following the inspection. Some comments received are detailed below:

### Service user comments:

- "I couldn't say anything bad about them."
- "The girls are very kind."
- "The girls are all very polite."
- "The staff treat me with respect and dignity."
- "If I had a complaint I have the contact numbers."
- "I have never had them late but I wouldn't mind if they are late."
- "They (agency) look after me well."
- "I can joke and banter with the girls."
- "It's lovely when carers come in and speak to you, it lifts your mind."

### Staff comments:

- "There is flexibility in the team."
- "The management is good."

- “We had an induction.”
- “All concerns would be taken seriously by the manager.”
- “Induction and training prepared us for the role.”

**Relative’s comments:**

- “Same staff always with my mum and are very delightful.”
- “I have no concerns about calls or any late calls.”
- “All the girls are very respectful.”
- “The staff have a positive way of working with my XXXX.”

**HSCT representatives:**

- “I allows get a quick response from North West Care (NWC) agency staff.”
- “Co-ordinators are very approachable.”
- “No complaints about NWC workers.”

**Areas of good practice**

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

**Areas for improvement**

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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