

Unannounced Care Inspection Report 10 September 2020



Optimum Care

Type of Service: Domiciliary Care Agency
**Address: Suite 4, River House, Castle Lane, Coleraine,
BT51 3DR**
Tel No: 02870353999
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

Optimum Care is a domiciliary care agency providing personal care to 486 service users in the Causeway, the Glens and the Mid-Ulster areas. The agency has a current staff compliment of 160 staff that provides services commissioned by the Northern Health and Social Care (HSC) Trust.

3.0 Service details

Organisation/Registered Provider: Home Care Services NI (Ltd) T/A Optimum Care Responsible Individual(s): Mrs Lesley Catherine Megarity	Registered Manager: Mrs Andrea Hill
Person in charge at the time of inspection: Mrs Andrea Hill	Date manager registered: 23 November 2017

4.0 Inspection summary

An unannounced inspection took place on 10 September 2020 from 10.10 to 13.30 hours.

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 information received from a service user's representative; following review of this information and because RQIA have not completed a primary inspection since 22 November 2018, RQIA decided to undertake an inspection of the service.

To reduce any risk this inspection was carried out using an on-site inspection approach with socially distanced guidance in place.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, 2007 and The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017 the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

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

An area requiring improvement was identified and referred to ensuring all complaints were logged appropriately and investigated according to the agency policy and procedure for dealing with complaints.

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.

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	1

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Andrea Hill, registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

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.

Following the inspection the inspector focused on contacting the service users, their relatives and staff to find out their views on the service.

The inspector 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 on 16 June 2020.

RQIA provided information to service users, staff and other stakeholders that will support feedback on the quality of service delivery.

“Tell us” cards were provided for care workers, service users and visitors to the service to give 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 care workers detailing how they could complete an electronic questionnaire to give their views. 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 prior to the issue of the report.

Following the inspection the inspector communicated with two service users, three staff and two service users’ relatives.

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

Prior to the inspection RQIA had received concerns from a relative of a service user and discussed these matters with the registered manager. It was discovered that concerns had been raised with the agency but that these had not been logged as complaints and investigated according to the agency's complaints policy and procedures. An area for improvement will be stated in respect of this. Following the inspection RQIA received an update on the progress of the investigation and is satisfied that the matters have been resolved to the satisfaction of all parties.

Recruitment records:

The service'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 she was knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and Standard 11 of the Domiciliary Care Minimum Standards, 2011 which relate to Access NI. Following the inspection the inspector reviewed communication received from the manager in relation to a reference which was not available on the day of inspection; this provided assurances that two references are obtained before commencement of employment and that HR have systems in place to verify the source of references.

The inspector reviewed documentation in staff files in relation to pre-employment checks which provided assurances that Access NI checks were completed before commencement of employment.

A review of four staff records confirmed that all staff are currently registered with NISCC. The inspector noted that the manager had a system in place each month for monitoring registration status of staff with NISCC and confirmed that all staff are aware that they are not permitted to work if their NISCC registration had lapsed.

Comments from service users include:

"Very good service from Optimum"

"The carers who come to me treat me as if I am one of their own"

"I have the same person five days a week; it is good to have that continuity"

"Every three months a senior comes to check"

Comments from service users' relatives include:

"It's all very good"

"We have really good communication and updates on care planning"

"I am happy with the service"

"They take their time and there are good introductions with new staff"

Comments from staff members include:

“We get regular updates about Covid-19”

“Managers are supportive; it is good to work for Optimum Care”

“I was shielding and management were very supportive and kept in touch”

“Yes from the beginning we have been wearing PPE and the guidance and equipment is good regarding this”

Areas of good practice

Areas of good practice were identified in relation to the completion of checks with Access NI in conjunction with the HR Department and staff registrations with NISCC.

Areas for improvement

One area for improvement was identified during the inspection and refers to ensuring that records are kept of all complaints.

	Regulations	Standards
Total number of areas for improvement	0	1

Covid-19:

The inspector spoke with the manager and to three staff members, who were knowledgeable regarding their responsibility in relation to Covid-19. Staff stated they were aware of the guidance on the use of Personal Protective Equipment (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.

The inspector reviewed the current practices relating to the following areas of guidance and good practice relating to Covid-19:

- Dissemination of information to staff
- Monitoring of staff practice
- Infection Prevention and Control (IPC) policies and procedures were updated to ensure they addressed all current guidance in relation to Covid-19
- Used PPE storage and disposal

The inspector reviewed records relating to Infection prevention and control 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. The inspector discussed comments from a representative regarding the disposal of PPE with the manager who agreed to ensure that guidance previously issued would be communicated to all staff as a reminder of good practice.

Areas of good practice

Good practice was found in relation to current Covid-19 guidance..

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

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Andrea Hill, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP 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 the agency. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011	
<p>Area for improvement 1</p> <p>Ref: Standard 15.10</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing.</p>	<p>The registered person shall ensure that records are kept of all complaints and these include details of all communications with complainants, the results of any communications and actions taken.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken:</p> <p>Complaints recording has been reviewed with the operational team including recognising complaints, recording correspondence with the complainant and actions taken as a result of the complaint, in keeping with our complaints policy.</p>

Please ensure this document is completed in full and returned via Web Portal



The **Regulation** and
Quality Improvement
Authority

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

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)