

Unannounced Care Inspection Report 5 May 2020



The Croft Community

Type of Service: Domiciliary Care Agency
Address: 71 Bloomfield Road, Bangor, BT20 4UR
Tel No: 0289145 9784
Inspector: Corrie Visser

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

The Croft Community is a supported living domiciliary care service which provides twenty four hour care and support to twenty eight service users within nine bungalows on site who have a learning disability and complex needs.

3.0 Service details

Registered Provider: The Croft Community Ltd Responsible Individual: Mrs Linda May Wray	Registered Manager: Mr Alan Hutchinson
Person in charge at the time of inspection: Mrs Linda May Wray	Date manager registered: 26 January 2016

4.0 Inspection summary

An unannounced inspection took place on 5 May 2020 from 11.00 to 14.00 hours.

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.

It is not the remit of RQIA to investigate whistleblowing concerns made by or on behalf of individuals, as this is the responsibility of the registered providers and the commissioners of care. However, if RQIA is notified of a potential breach of regulations or minimum standards, it will review the matter and take appropriate action as required; this may include an inspection of the agency. RQIA received information from an anonymous source which raised concerns about the inappropriate use of personal protective equipment (PPE) and the availability of PPE to staff during the Covid 19 pandemic. Following an internal assessment of the information received and in light of the concerns raised, an inspection was undertaken on 5 May 2020 to examine the agency's infection prevention and control procedures.

On the day of inspection the agency was not in compliance with the required regulations. The inspector found evidence to substantiate the reported concerns regarding care workers not adhering to the guidance issued by the Public Health Agency (PHA) in respect of PPE during the Covid 19 pandemic.

In accordance with RQIA's Enforcement Policy and Procedures, RQIA notified the registered individual of the intention to issue two notices of failure to comply with regulations. A meeting was held at RQIA offices on 13 May 2020 to discuss these matters.

The representatives from The Croft Community outlined the actions that would be taken to address the concerns identified. RQIA were not sufficiently assured that the necessary improvements to ensure full compliance with the regulations had been made as a number of areas required time to ensure that processes were fully embedded into practice. As a result one Failure to Comply notice (FTC Ref: FTC000094 was issued under The Domiciliary Care Agencies Regulations (Northern Ireland) 2007). This related to the agency's failure to adhere to the PHA guidance in relation to PPE and a lack of oversight and governance by the responsible individual to ensure the staff knowledge, skill and competency regarding Infection Prevention and Control (IPC procedures and the appropriate use of PPE).

The responsible individual is required to submit an action plan to RQIA detailing how the shortfalls in the knowledge, training and competency of staff will be addressed.

The QIP from the previous inspection was not reviewed as this inspection focused on the anonymous information. This will be carried over to a future inspection of the service. The service had been found to be in breach of one regulation and two standards during the inspection on 27 June 2019 in relation to the statement of purpose, recruitment and policies and procedures.

RQIA will continue to monitor and review the quality of service provided by the agency and may carry out further inspections to assess compliance with the regulations and minimum standards.

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	1	2

Inspection findings were discussed with Mrs Linda Wray, responsible individual as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action resulted from the inspection. One failure to comply notice was issued in relation to Regulation 11(1) of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 due to limited assurance that the responsible individual was aware of the appropriate IPC and PPE practice. There was limited understanding by staff regarding IPC and PPE. There was no evidence of monitoring by the responsible individual to ensure that staff were using and disposing of PPE appropriately. Failure to ensure that the appropriate PPE was being utilised against Covid-19 has the potential to place service users and staff at risk of harm.

The enforcement policies and procedures are available on the RQIA website.

[https://www.rqia.org.uk/who-we-are/corporate-documents-\(1\)/rqia-policies-and-procedures/](https://www.rqia.org.uk/who-we-are/corporate-documents-(1)/rqia-policies-and-procedures/)

Enforcement notices for registered establishments and agencies are published on RQIA's website at <https://www.rqia.org.uk/inspections/enforcement-activity/current-enforcement-activity>.

4.2 Action/enforcement taken following the most recent care inspection dated 27 June 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 27 June 2019.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- the information received by RQIA from the whistleblower
- previous inspection report and Quality Improvement Plan (QIP)
- all correspondence or information received by RQIA since the previous inspection

During the inspection the inspector met with five staff, the responsible individual and the deputy manager.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 27 June 2019

The most recent inspection of the agency was an unannounced care inspection.

This QIP will be validated by the care inspector at a future care inspection.

6.2 Review of areas for improvement from the last care inspection dated 27 June 2019

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 5.1 Stated: First time	The responsible individual shall ensure that a separate statement of purpose is made available for the supported living facility. Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to a future care inspection.	Carried forward to a future care inspection
Action required to ensure compliance with the Domiciliary Care Agencies Minimum Standards, 2011		
Area for improvement 1 Ref: Standard 11.2 Stated: First time	The responsible individual shall ensure that criminal history disclosure information at the enhanced disclosure level is sought from persons who change roles within the organisation.	Carried forward to a future care inspection

	<p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to a future care inspection.</p>	
<p>Area for improvement 2 Ref: Standard 9.1 Stated: First time</p>	<p>The responsible individual shall ensure that induction policies and procedures are in accordance with statutory requirements.</p> <p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to a future care inspection.</p>	<p>Carried forward to a future care inspection</p>

6.3 Inspection findings

Information received by the RQIA prior to this inspection reported that the agency had failed to adhere to the guidance issued by the PHA in relation to the appropriate use of PPE and to advise that PPE was not being supplied to staff.

The responsible individual's arrangements for ensuring the safety and wellbeing of service users and staff were examined during the inspection and evidence was found to substantiate the reported concerns in relation to the care workers not adhering to the guidance issued by the PHA in respect of the PPE. The inspector observed that four of the five staff members spoken with were not wearing PPE correctly and thus placing the service users and themselves at risk.

The inspector observed that only one of these staff was wearing the appropriate PPE (gloves, apron and face mask). The staff member confirmed that this was due to an activity being undertaken with a service user at that time. Table 4 guidance was discussed with the staff members and it was evident that they were unaware of the updated advice from the PHA in relation to the appropriate use of PPE. Staff spoken with advised that they were informed by management that gloves, aprons and masks were to be worn only when attending to service users' personal care needs. They also advised that they were informed that masks were to be worn at all times from Thursday 30 April 2020. (On that date we had made a telephone call to the service to advise of the appropriate use of PPE and Table 4 guidance).

The responsible individual informed the inspector that the service was adhering to Table 4 of the PHA guidance and that PPE was available to all staff and sufficient supplies were in each bungalow. The responsible individual also provided the inspector with two folders which contained correspondence and information in relation to Covid-19, including Table 4.

Staff spoken with lacked knowledge of the guidance issued by the PHA, the procedure for donning and doffing PPE and the appropriate and safe disposal of contaminated PPE.

Staff raised concerns with the inspector regarding the management's response to requests for PPE and the advice provided in relation to the wearing of masks.

The PPE being worn by staff was not being used appropriately and face masks were being removed or pulled down from staff members' faces and not being changed following this which raised concern in relation to Infection Prevention and Control (IPC) and cross contamination.

These concerns were raised by the inspector with the management team in relation to the inappropriate use of PPE which potentially placed service users and staff at risk of harm.

In addition to the limited understanding by staff regarding IPC and PPE there was also limited assurance that the responsible individual was aware of the appropriate IPC and PPE practice and there was no evidence of monitoring by the responsible individual or management to ensure that staff were using and disposing of PPE appropriately.

Failure to ensure that the appropriate PPE was being worn during the Covid-19 pandemic has the potential to place service users and staff at risk of harm.

The areas for improvement identified from this inspection are included in FTC Ref: FTC000094.

The following actions are required by the responsible individual by 27 May 2020 to comply with regulation contained in the Failure to Comply Notice:

- The responsible individual is required to confirm the full staff complement within the service and the number of staff who have completed the training via the NISCC training zone.
- The responsible individual is required to complete a competency assessment in relation to staff understanding of current IPC and PPE guidance.
- The responsible individual is required to complete a competency assessment regarding staff practice in donning and doffing of PPE and appropriate disposal.
- An action plan is to be forwarded to RQIA detailing how the responsible individual has addressed the shortfalls in the knowledge, training and competency of staff.
- The responsible individual is required to implement a monitoring system in relation to ongoing staff practice regarding IPC and PPE.

	Regulations	Standards
Total number of areas for improvement	1	2

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mrs Linda Wray, responsible individual, and the deputy manager as part of the inspection process. The timescales commence from the date of inspection.

The registered provider 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 Regulations (Northern Ireland) 2007	
Area for improvement 1 Ref: Regulation 5.1 Stated: First time To be completed by: Immediate from the date of the inspection	The responsible individual shall ensure that a separate statement of purpose is made available for the supported living facility. Ref: 6.7 Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to a future care inspection.
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011	
Area for improvement 1 Ref: Standard 11.2 Stated: First time To be completed by: Immediate from the date of the inspection	The responsible individual shall ensure that criminal history disclosure information at the enhanced disclosure level is sought from persons who change roles within the organisation. Ref: 6.4 Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to a future care inspection.
Area for improvement 2 Ref: Standard 9.1 Stated: First time To be completed by: Immediate from the date of the inspection	The responsible individual shall ensure that induction policies and procedures are in accordance with statutory requirements. Ref: 6.4 Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to a future care inspection.

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



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)