

Announced Support Visit 4 June 2020



Orchard House

Type of Service: Domiciliary Care Agency
Address: 12a Rectory Close, Loughall, BT61 8NA
Tel No: 02838892052
Inspector: Aveen Donnelly

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

Orchard House is a domiciliary care agency, supported living type, located in Loughgall. The Southern Health and Social Care Trust (HSCT) deliver the care and support to number of service users through a team of support staff. Service users have individual rooms and a range of shared facilities.

The agency's aim is to provide care and support to service users; this includes helping service users with tasks of everyday living, emotional support and assistance to access community services, with the overall aim of supporting service users to live as independantly as possible.

3.0 Service details

Organisation/Registered Provider: Southern HSC Trust Responsible Individual: Shane Devlin	Registered Manager: Gemma Cunningham
Person in charge at the time of support visit: Gemma Cunningham	Date manager registered: 25/06/2019

4.0 Inspection summary

A support visit took place on 04 June 2020 from 09.30 to 11.30. Prior to the visit, notice was given to the manager, to ensure that arrangements could be made to safely facilitate the visit during the ongoing coronavirus (COVID-19) pandemic.

During the COVID-19 pandemic the Department of Health (DOH) directed RQIA to continue to respond to ongoing areas of risk identified in regulated services.

Due to concerns that had been identified in another SHSCT registered service under the management of Gemma Cunningham, RQIA undertook this visit, to gain assurances that the current guidelines on the use of Personal Protective Equipment (PPE) and Infection Prevention and Control (IPC) measures to be employed during an outbreak of COVID-19 were being followed within the service.

The current guidelines on the use of PPE and IPC measures to be employed during an outbreak of COVID-19 were being followed within the supported living service during the support visit. This was observed by the inspector and discussions with service users and staff confirmed that appropriate practices were in place.

The findings of this visit will provide the service 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

Details of the visit were discussed with Gemma Cunningham, manager, and can be found in the main body of the report. No new areas for improvement were identified. One area for improvement, previously made, was found to be met. Another area for improvement was not examined during this support visit and has been carried forward to the next inspection.

Enforcement action did not result from this visit.

4.2 Action/enforcement taken following the most recent care inspection dated 03 September 2018

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 03 September 2018.

5.0 How we carry out a support visit?

Prior to the support visit we reviewed the information held by RQIA about the service. This included the previous inspection report, the returned QIP, notifiable events, and written and verbal communication received since the previous care inspection.

During our visit we focused on the use of PPE and IPC measures employed throughout the supported living service.

The inspector spoke with three staff and observed a number of service users in their interactions with staff.

6.0 The inspection

Areas for improvement from the last care inspection dated 3 September 2018		
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 13(d) Schedule 3 Stated: First time To be completed by: Immediate from the date of inspection.	The registered person shall ensure that no domiciliary worker is supplied by an agency unless- (d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3. Action taken as confirmed during the visit: The review of records pertaining to two staff members confirmed that this matter had been addressed.	Met
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011		Validation of compliance
Area for improvement 1 Ref: Standard 12.7 Stated: First time To be completed by: Immediate from the date of inspection	The registered person shall ensure that a record is kept in the agency, for each member of staff, of all training, including induction, and professional development activities undertaken by staff. The record includes: <ul style="list-style-type: none"> • the names and signatures of those attending the training event; • the date(s) of training; • the name and qualification of the trainer or the training agency; and • content of the training programme. 	Carried forward to the next care inspection

	Action taken as confirmed during the visit: Action required to ensure compliance with this standard was not reviewed as part of this visit and this will be carried forward to the next care inspection.	
--	--	--

6.1 Support visit findings

Signage had been placed at the entrance to the building which provided advice and information about COVID-19. The inspector donned and doffed PPE and carried out hand hygiene at appropriate times throughout the visit. Additional signage and information was displayed within the building within appropriate areas and in an appropriate format suitable for both staff, service users and any visiting personnel.

The building was clean, tidy and fresh smelling. Discussion with the manager confirmed the cleaning practices which were in place which were appropriately detailed. There was a system in place to ensure that staff and service users' temperatures were taken twice daily in line with Public Health Agency (PHA) best practice guidance.

Staff were observed using PPE appropriately during the visit and this included appropriate and competent donning and doffing procedures. PPE stations were well stocked throughout the building.

Staff spoken with told the inspector that they had received training in the correct method of donning and doffing of PPE and hand hygiene. This was reflected in the inspectors' observations on the day of the visit.

The service users looked well cared for; they were dressed in clean clothes and were well presented.

Visits from friends and relatives had been suspended prior to the COVID-19 outbreak; however staff ensured alternative ways for service users to maintain contact with their loved ones.

	Regulations	Standards
Total number of areas for improvement from the previous inspection on 03 September 2018	0	1

7.0 Quality improvement plan

No areas for improvement were identified during this support visit. Areas for improvement identified during the previous inspection on 03 September 2018 are detailed in the QIP. Details of the QIP were discussed with Gemma Cunningham, manager, as part of the support visit. The timescales commence from the date of inspection undertaken on 03 September 2018.

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 visit 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 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 12.7</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the date of inspection undertaken on 03 September 2018</p>	<p>The registered person shall ensure that a record is kept in the agency, for each member of staff, of all training, including induction, and professional development activities undertaken by staff. The record includes:</p> <ul style="list-style-type: none"> • the names and signatures of those attending the training event; • the date(s) of training; • the name and qualification of the trainer or the training agency; and • content of the training programme. <p>Action required to ensure compliance with this standard was not reviewed as part of this visit and this will be carried forward to the next care inspection.</p> <p>Response by registered person detailing the actions taken: A record is kept of all Staff training, including date attended and provider. This is recorded on a monthly sheet in the front of the training file. Available content of training is also included. Assistant Manager over sees and audits training records monthly. Training Matrix kept by Assistant Manager.</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)