

Announced Care Inspection Report 27 March 2017



The Churches Trust Ltd

Type of Service: Domiciliary Care Agency
Address: 121 Spencer Road, Londonderry BT47 6AE
Tel No: 02871311322
Inspector: Caroline Rix

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced inspection of The Churches Trust Ltd took place on 27 March 2017 from 15.10 to 15.50 hours.

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

The organisation's Chief Executive, Fiona Fagan, advised the inspector that the agency, while registered as a domiciliary care agency since September 2010, has not been operating as such. The organisation currently supplies staff to older people within the community under their 'Flexicare' scheme. These services include befriending, helping with shopping or to attend medical appointments along with some home maintenance. This scheme operates in the North West area, mostly in Derry-Londonderry to address social isolation and promote independence for older people.

This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards 2011.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	1	1

Details of the Quality Improvement Plan (QIP) within this report were discussed with Fiona Fagan, Chief Executive, 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.

2.0 Service details

Registered organisation/registered person: The Churches Trust Ltd/Fiona Fagan	Registered manager: Ethel Marjorie Leslie
Person in charge of the service at the time of inspection: Fiona Fagan	Date manager registered: 15 September 2010

3.0 Methods/processes

Prior to inspection the inspector analysed the following records:

- Previous inspection report
- Correspondence with Regulation and Quality Improvement Authority(RQIA)

Specific methods/processes used in this inspection include the following:

- Discussion with the organisations Chief Executive
- Examination of records
- Evaluation and feedback

The following records were examined during the inspection:

- The agency's Statement of Purpose
- Policies and procedures manual.

4.0 The inspection

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

4.1 Inspection Findings

The Statement of Purpose was reviewed and found to be appropriately detailed regarding the nature and range of services the agency plan to provide. However, the details regarding the registered person should be updated to reflect the change of post holder.

A range of policies and procedures were viewed within the agency's policy manual, however, these had not been reviewed or updated since registration in 2010 and would require to be fully reviewed to be in compliance with relevant regulations and standards.

The agency's registered premises include an office and staff facilities which are suitable for the operation of the agency as set in the Statement of Purpose.

From discussions with the Chief Executive, in the absence of a registered person, it was evident that at the time of the inspection and since first registered in September 2010; the agency was not supplying domiciliary care workers into service users' homes.

The inspector discussed the proposed deregistration of the domiciliary care agency with the Chief Executive who confirmed that the Churches Trust Board were to decide whether to deregister or not during their next meeting in May 2017. The inspector was satisfied that pending a decision from the organisation's Board regarding de-registration, the agency will not operate as a domiciliary care agency or supply any staff into service users homes.

Areas for improvement

The registered provider must review the Statement of Purpose to ensure the information contained is updated in line with Regulation 5 Schedule 1.

The registered provider should ensure that policies and procedures in place are updated and subject to a systematic 3 yearly review.

Number of requirements:	1	Number of recommendations:	1
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5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Fiona Fagan, Chief Executive as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all requirements and recommendations contained 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 domiciliary care 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.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Domiciliary Care Agencies Minimum Standards, 2011. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions to be taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to RQIA's office for assessment by the inspector.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.



A completed Quality Improvement Plan from the inspection of this service has not yet been returned.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address info@rqia.org.uk

Quality Improvement Plan

Statutory requirements

Requirement 1

Ref: Regulation 5
Schedule (1)

Stated: First time

To be completed by:
25 May 2017

The registered provider must review the Statement of Purpose to ensure the information contained is updated in line with Regulation 5 Schedule 1.

Response by registered provider detailing the actions taken:

Recommendations

Recommendation 1

Ref: Standard 9

Stated: First time

To be completed by:
25 May 2017

The registered provider should ensure that policies and procedures in place are updated and subject to a systematic 3 yearly review.

Response by registered provider detailing the actions taken:

Name of registered manager/person completing QIP			
Signature of registered manager/person completing QIP		Date completed	
Name of registered provider approving QIP			
Signature of registered provider approving QIP		Date approved	
Name of RQIA inspector assessing response			
Signature of RQIA inspector assessing response		Date approved	



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