

Announced Enforcement Follow-up Inspection Report 15 February 2017



Kesh Domiciliary/Supported Living Service

Type of service: Domiciliary Care Agency
Address: 26 Pettigo Road, Letterkeen, Kesh BT93 1QX
Tel No: 028 6863 3107
Inspector: Jim McBride

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced inspection of Kesh Domiciliary/Supported Living Service took place on 15 February 2017 from 09.30 to 11.45.

The purpose of the inspection was to assess the level of compliance achieved by the agency regarding two failure to comply notices issued to the registered person on 19 December 2016. The date for compliance with the notices was 13 February 2017.

FTC ref: FTC/DCA/11274/2016-17/01

FTC ref: FTC/DCA/11274/2016-17/03

There was clear evidence of improvement and progress made to address the required actions within the two notices. The inspector was satisfied that the necessary improvements had been made to the agency's staffing arrangements and maintenance of records.

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.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Mr Kieran Mc Grenaghan, acting manager as part of the inspection process and can be found in the main body of the report.

1.2 Actions/enforcement taken following the most recent care inspection

The most recent inspection of the agency was undertaken on the 16 January 2017 to assess the agency's compliance with the six failure to comply notices issued on 19 December 2016. Compliance with the regulations outlined in two of the notices could not be evidenced and the registered person was advised of an extension to the date for compliance to 13 February 2017 in respect of the following notices:

FTC ref: FTC/DCA/11274/2016-17/01

FTC ref: FTC/DCA/11274/2016-17/03

2.0 Service details

Registered organisation/registered person: Praxis Care Group/Andrew James Mayhew	Registered manager: Kieran Mc Grenaghan (Acting)
Person in charge of the home at the time of inspection: Kieran Mc Grenaghan	Date manager registered: Acting manager since April 2015

3.0 Methods/processes

Prior to inspection the following records were examined:

- The requirements as set out in the failure to comply notices:
FTC ref: FTC/DCA/11274/2016-17/01
FTC ref: FTC/DCA/11274/2016-17/03
- written and verbal communication received by RQIA since the last care inspection
- the previous care inspection report
- two quality monitoring reports forwarded to RQIA by the registered person

During the inspection the inspector met with one service user, the acting manager and with two care staff.

4.0 The inspection

4.1.1 FTC ref: FTC/DCA/11274/2016-17/01

Notice of Failure to Comply with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation 16 (1) (a)

16.—(1) Where an agency is acting otherwise than as an employment agency, the registered person shall, having regard to the size of the agency, the statement of purpose and the number and needs of the service users, ensure that—

(a) there is at all times an appropriate number of suitably skilled and experienced persons employed for the purposes of the agency;

In relation to this notice, the following actions were required for compliance:

The registered person must ensure that there are at all times an appropriate number of suitably skilled and experienced persons employed for the purposes of the agency.

The registered person must ensure that relevant staff receive training in the agency's procedures for ensuring adequate staffing arrangements are in place, and for escalating instances when this is either potentially or actually compromised.

The registered person must ensure that records maintained by the agency clearly identify the roles and responsibilities of all staff supplied to work with service users.

Inspection findings:

The inspector was advised of ongoing recruitment activity taking place on the day of the inspection. The agency's staffing records were examined for weeks ending 19/02/17, 26/02/17 and week ending 05/03/17. It was noted that there was adequate staff numbers to ensure cover for each required shift pattern. The current staff rotas have been revised to ensure all levels of staff are clearly identified and colour coded to ensure clear visibility. The inspector was satisfied that the agency had demonstrated full compliance with this regulation.

4.1 Inspection Findings

4.1.3 FTC ref: FTC/DCA/11274/2016-17/03

Notice of Failure to Comply with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Regulation 21 (1) (a) (c)

21.—(1) The registered person shall ensure that the records specified in Schedule 4 are maintained, and that they are—

- (a) kept up to date, in good order and in a secure manner;
- (c) at all times available for inspection at the agency premises by any person authorized by the Regulation and Improvement Authority.

In relation to this notice, the following actions were required for compliance:

The registered person must ensure that agency records relating to domiciliary care workers and service users and to the training and development of staff are maintained in accordance with Regulation 21.

Inspection findings:

The layout of the agency's staff duty rotas had been revised since the previous inspection and included the supply of staff across the entire service. Rotas examined indicated the location of the care and support provided and the nature of the shift.

Staff duty records examined reflected the hours worked by staff and the details of each supply of staff to work with service users were clear. Rotas clearly outlined staff with responsibility for 'sleep –overs.' Rotas also confirmed commencement and end of shift times. The registered person provided records relating to domiciliary care workers and service users and of the training and development of staff in accordance with Regulation 21.

The inspector was satisfied that the agency had demonstrated full compliance with this regulation.

Number of requirements:	0	Number of recommendations:	0
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5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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.



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