



The Regulation and
Quality Improvement
Authority

Enable Care Services
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**Unannounced Care Inspection
of
Enable care Services**

14 August 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An unannounced care inspection took place on 14 August 2015 from 09.00 - 11.00. Overall on the day of the inspection it was found that improvements in the area of staffing arrangements were necessary in order for care to be safe, effective and compassionate. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

1.1 Actions/Enforcement Taken Following the Last Inspection

N/A.

1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action resulted from the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	3	1

A serious concerns meeting was held in the offices of the RQIA on the 28 August 2015. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Paul O'Keefe	Registered Manager: Geraldine McConnell
Person in charge of the agency at the time of Inspection: Geraldine McConnell	Date Manager Registered: 29 October 2013
Number of service users in receipt of a service on the day of Inspection: 128	

3. Inspection Focus

The inspection sought to assess the validity of intelligence information received by RQIA on the 11 August 2015.

4. Methods/Process

The inspector met with the current registered manager Geraldine Mc Connell and examined the following documents in relation to a number of staff:

- Staff duty rotas
- Staff Access NI Checks
- Staff application forms
- Staff start dates
- Staff induction details.

5. The Inspection

An unannounced inspection was conducted at the service on the 14 August 2015, following intelligence received by RQIA on the 11 August 2015.

The caller to RQIA stated that: A service user who wished to remain anonymous advised social worker that an agency staff member who had not been Access NI checked had been in their home.

Following receipt of this information the RQIA completed an unannounced inspection of the agency on the 14 August 2015 from 09:00 to 11.00.

The inspection was facilitated by Mrs Geraldine McConnell (Acting Manager). The inspector examined a number of staff files - 10 in total that provided clear evidence of all pre-employment documentation outlined in Regulation 13 Schedule 3 in place.

There was no evidence of Access NI checks not being in place. The registered manager confirmed that one staff member did commence a number of shadowing induction shifts without the required Access NI check and did attend with two other staff the homes of five service users on the 6 July and the 10 July 2015.

The manager stated that this was contrary to the agency's policy and was a genuine error that should not have happened. The manager stated that the staff member did not work alone and did not provide any care/support. The rota for the dates stated was examined and did show evidence that the staff member was accompanied by two other staff members.

RQIA has assessed the risk to service users as low – given that the worker was not alone and that the agency immediately withdrew the staff member from the rota on discovering the error.

The inspection findings were also positive and suggested that the breach in regulations was not indicative of certain failures or weaknesses in systems.

With reference to our concerns about the quality of care and service within Enable Care Services, detailed in correspondence sent to you on the 14 August 2015, the Regulation and Quality Improvement Authority (RQIA) held a meeting with you on 28 August 2015 to discuss our concerns regarding the following regulations:

1 Regulation 13 (d) of Domiciliary Care Agencies Regulations (Northern Ireland) 2007:

13. The registered manager shall ensure that no domiciliary care worker is supplied by the agency unless -

(d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.

At this meeting, you provided a full account of the actions you will take to ensure the minimum improvements necessary to achieve compliance with the requirement identified. You provided RQIA with assurances that full and satisfactory information is available in relation to staff in respect of each of the matters specified in Schedule 3 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007:

RQIA will continue to monitor the quality of service provided by Enable Care Services and may carry out an inspection to assess compliance with this regulation.

It should be noted that continued noncompliance may lead to further enforcement action.

5.1 Review of Requirements and Recommendations from Previous Inspection

N/A

Other areas examined:

Prior to this unannounced inspection the User Consultation Officer (UCO) spoke with six service users and eight relatives, either in their own home or by telephone, between 3 and 6 July 2015 to obtain their views of the service. The service users interviewed live in Dungannon, Markethill and surrounding areas and receive assistance with the following:

- Management of medication
- Personal care
- Meals
- Sitting service

The UCO also reviewed the agency's documentation relating to six service users.

Is care safe?

The UCO was advised that new carers are usually introduced to the service user by a regular member of staff; this was felt to be important both in terms of the service user's security and the carer's knowledge of the required care.

The documentation relating to six service users were reviewed by the UCO during the home visits. However, one care plan was noted to be out of date. One file did not contain any log sheets. The log sheets for five service users were reviewed the files reviewed contained a copy of the service user's care plan and risk assessment. Issues were noted regarding staff signatures, a small number of calls not recorded and the accuracy of the times recorded for one call. One recommendation has been made (see QIP attached to this report).

Is care effective?

The UCO was informed by all of the people interviewed that they had not made any complaints but are aware of whom they should contact if they have any concerns with the service. A number of the people interviewed confirmed that they had received questionnaires from the agency, and that management visits and observation of staff practice had taken place.

Is care compassionate?

The people interviewed by the UCO raised no concerns regarding the quality of care being provided by the carers from Enable Care. Great importance was placed on the benefit of care being provided by consistent carers as it enables a good relationship to develop; this is accommodated by the agency as far as possible.

No concerns were raised regarding the carers treating the service users with dignity or respect, or that care is being rushed. Service users, as far as possible, are given their choice in regards to meals and personal care, and are allowed to complete tasks themselves if appropriate. Examples of some of the comments made by service users or their relatives are listed below:

- "Extremely happy with them"
- "Team is fantastic"
- "The consistency is great and helps as my XXX has dementia"
- "Couldn't wish for better"
- "No issues at all".

Service users or their relatives informed the UCO that they felt that the carers are appropriately trained and knowledgeable regarding the service user's condition. Examples given included working with service users with limited verbal communication, mobility, dementia and Parkinsons.

It was good to note that service users or their representatives are included in decision making regarding their care plan and are also given the opportunity to comment on the quality of service either during home visits, by telephone or annual surveys for the agency.

The UCO was informed by the service users and relatives interviewed that there were no concerns regarding the carer's timekeeping and they are usually contacted by the agency if their carer has been significantly delayed.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mr O Keefe as part of the inspection process during a serious concerns meeting held in the offices of the RQIA on the 28 August 2015. The timescales commence from the date of inspection.

The registered person/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 person/manager 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

6.2 Recommendations

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

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/ registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to agencies.team@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the agency. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the agency.

Quality Improvement Plan

Statutory Requirements

<p>Requirement 1</p> <p>Ref: Regulation 13</p> <p>Stated: First time</p> <p>To be Completed by: Immediate</p>	<p>13. The registered person shall ensure that no domiciliary care worker is supplied by the agency unless—</p> <p>(d) full and satisfactory information is available in relation to him in respect of each of the matters Specified in Schedule 3.</p>
	<p>Response by Registered Person(s) Detailing the Actions Taken: Our recruitment policy:-</p> <p>When recruiting Staff we arrange an interview within our office. We ask if they have any convictions on their records or any convictions pending which allows them to disclose at interview. We then organise for a police check to be done at Coalisland Training Services and request two references, one being present or previous employer and one other from a professional body. We proceed in the interim to hold a three day induction period where full training is given by a Qualified Trainer and whereby Policies and Procedures are also conducted to RQIA Standards within Enable Care Services. A letter is then drafted with confirmation that the new employee's Police Check, training and references has been completed and is clear to commence employment. This letter is stamped and a copy is kept in their file in the office and a copy is given to the supervisor. At this point the new employee is on a shadowing period to be introduced to each Service User and become familiar with their individual needs.</p>
<p>Requirement 2</p> <p>Ref: Regulation 14</p> <p>Stated: First time</p> <p>To be Completed by: Immediate</p>	<p>14. Where the agency is acting otherwise than as an employment agency, the registered person shall make suitable arrangements to ensure that the agency is conducted, and the prescribed services arranged by the agency, are provided—</p> <p>(a) so as to ensure the safety and well-being of service users;</p> <p>(b) so as to safeguard service users against abuse or neglect;</p> <p>(d) so as to ensure the safety and security of service users' property, including their homes.</p>
	<p>Response by Registered Person(s) Detailing the Actions Taken: To ensure the Safety and well being of our Service Users, we now have adapted a different monitoring format. We have a Monitoring Officer Mrs Pauline Corr who telephones Service Users and their Next of Kin to arrange a visit to their homes. This includes the quality of service provided for e.g. Ensuring Staff are conducting themselves in a</p>

	<p>Professional and Dignified manner, adhering to Infection Control and Manual Handling Policies. Also that Staff are in Full Uniform and identity badges are worn and that confidentiality is maintained at all times. Also our Monitoring Officer is keen to know if the package of care delivered meets the needs of the Service User and that staff are staying there time as allocated for each call. This also gives the Service User and Next of Kin a chance to discuss anything untoward with the service that they may feel we could improve upon. With having a monitoring Officer it allows her to cover all Service Users within a 3 month period in all geographical areas that we are contracted for. Miss Laura McKenna is also responsible for our Telephone monitoring which is done on a monthly basis and is documented and filed. This is whereby we gather our evidence on any issue that need addressed by our monitoring team and a monthly monitoring report is drawn up to provide an overall summary of our quality of care.</p> <p>B) All members of staff are trained thoroughly in protecting vulnerable adults through various training courses such as Safeguarding Vulnerable Adults, Adult Abuse and Needs of the Service User. All employees are urged to report and record any types of abuse or acts of omissions that they may witness no matter how minor. From this we as an agency respond appropriately by notifying relevant bodies such as the service user's social worker as well as the RQIA and if necessary then the Northern Ireland Social Care Council would be notified for further action to take place.</p> <p>C) All employees are police checked before commencing employment. Following that we request two references which are then analysed and approved by our personnel manager. Following approval employees then part take in their induction and training. With completing this, new employees are then introduced into each service user's home and are shown the security and accessibility routes. The majority of homes are fitted with security keypads to ensure safety for the service users'. If not we encourage our service users' to get their property fitted with one to which our care workers would only have access to the security code to gain entry on each of their calls.</p>
<p>Requirement 3</p> <p>Ref: Regulation 21.1(a) Schedule 4</p> <p>Stated: First time</p> <p>To be Completed by: Immediate</p>	<p>21.—(1) The registered person shall ensure that the records specified in Schedule 4 are maintained, and that they are—</p> <p>(a) kept up to date, in good order and in a secure manner.</p> <p>Response by Registered Person(s) Detailing the Actions Taken: We as an agency make sure that the records that are specified in schedule 4 are maintained and kept up to date by introducing a new scheme whereby each month specific area observation sheets are made up in a form of a booklet for each individual service user. These booklets are completed by each care worker and signed by their full</p>

	name on each of their calls every month which are then admitted to our office for analysis. A new booklet is then produced to each supervisor for each of their service users' to start a new month of observations. By doing this we are easily able to maintain an up to date record of each service users' individual improvements in a secure manner.
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Recommendations			
Recommendation 1 Ref: Standard 5.2 and 5.6 Stated: Once To be Completed by: Immediate	The registered manager is recommended to ensure that full and accurate records are maintained consistently within service users daily records.		
	Response by Registered Person(s) Detailing the Actions Taken: We ensure that full and accurate records are maintained consistently within the service users' records because on a monthly basis supervisors submit to the office each of their service users' observations sheets and their staffs timesheets which are checked and compared together to ensure full accuracy of the work that has been done by each employee. Rotas are also emailed to the office on a weekly basis and are filed with accordance to their geographical area. From this we again are able to keep a record of which employee is carrying out which call at all times of the day. Rotas are then compared against the times sheets as well as the observation sheets which are submitted in a monthly period. To ensure records are maintained consistently with service users' daily records, a three monthly update takes place in each area with each service user. This is to ensure that all changes with their needs are noted in their care plan and that their files are constantly kept up to date.		
Registered Manager Completing QIP	Geraldine McConnell	Date Completed	14/10/2015
Registered Person Approving QIP	Paul O'Keefe	Date Approved	14/10/2015
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	14/10/2015

Please ensure the QIP is completed in full and returned to agencies.team@rqia.org.uk from the authorised email address