

Unannounced Care Inspection Report 15 October 2020



Admiral Care

Type of Service: Domiciliary Care Agency
Address: 4 Joymount, Carrickfergus, BT38 7DN
Tel No: 028 9086 4055
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

This is a domiciliary care agency which provides a range of personal care services, meal provision and sitting services to people in their own homes. Service users have a range of needs including dementia, mental health, learning disability and physical disability. The services are provided in the areas of Newtownabbey, Greenisland, Carrickfergus, Larne, Carnlough and the surrounding areas. The Northern Health and Social Care Trust (NHSCT) commission these services.

3.0 Service details

Organisation/Registered Provider: Admiral Care Services (NI) Ltd	Registered Manager: Ms Dawn Elizabeth Smyth
Responsible Individual: Ms Dawn Elizabeth Smyth	
Person in charge at the time of inspection: Operations Manager	Date manager registered: 17 November 2010

4.0 Inspection summary

An unannounced inspection took place on 15 October 2020 from 09.30 to 12.00 hours.

Due to the coronavirus (Covid-19) pandemic the Department of Health (DoH) directed RQIA to continue to respond to ongoing areas of risk identified in services.

Since the inspection on 16 December 2019 RQIA have not completed a primary inspection. In response to this, RQIA decided to undertake an inspection of the service. This inspection was carried out using an on-site inspection approach in line with social distancing guidance.

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 and The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

The agency's provision for the welfare, care and protection of service users was reviewed. We viewed the procedures maintained by the agency in relation to the safeguarding of adults (2016) which were the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' July 2015.

On the day of the inspection it was noted that three incidents had taken place since the previous inspection on 16 December 2019. We examined the records and found that the agency had dealt with the incidents in accordance with its own procedure and policy.

The agency maintains and implements a policy relating to complaints. On the day of the inspection it was noted that the agency had not received any complaints since the last inspection.

No areas for improvement were identified during this inspection.

Evidence of good practice was found in relation to Access NI, staff registrations with the Northern Ireland Social Care Council (NISCC), care records, management of incidents and staff supervision.

Good practice was also found in relation to all current Covid-19 guidance and the use of personal protective equipment (PPE) guidelines, Covid-19 education and management including infection prevention and control (IPC) measures.

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	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the operations manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 16 December 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 16 December 2019.

5.0 How we inspect

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

Following our inspection we focused on contacting the service users, their relatives, staff and professionals to obtain their views on the service.

We ensured that the appropriate staff checks were in place before staff visited service users and reviewed the following areas:

- Recruitment records specifically relating to Access NI and NISCC registration.
- Covid-19: guidance for domiciliary care providers in Northern Ireland. Updated 16 June 2020.

RQIA provided information to service users, staff and other stakeholders that will support feedback on the quality of service delivery. This included "Tell Us" cards, service user/relative questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA.

Following the inspection we communicated with two service users, three staff members, four service users' relatives and two professionals.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

We would like to thank the person in charge, service users, service user's relatives and staff for their support and co-operation throughout the inspection process.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

Areas for improvement from the last care/finance inspection dated 16 December 2019		
Action required to ensure compliance with the Domiciliary Care Agencies Minimum Standards, 2011		Validation of compliance
Area for improvement 1 Ref: Standard 10.4 Stated: First time	<p>The registered person shall ensure that information held on record is accurate, up to date and necessary.</p> <p>This includes, but is not limited to:</p> <ul style="list-style-type: none"> all required signatures are recorded on service users' care plans, (where the service user is unable or chooses not to sign this is recorded). <p>The agency should retain a signed copy of the service users' care plans within the agency office.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>Four service users' care files were reviewed during inspection and the information was up to date and accurate. All documentation was signed by the registered manager and retained in the service users' files.</p>	
Area for improvement 2 Ref: Standard 8.1 Stated: First time	<p>The registered person shall ensure there is a defined management structure that identifies the lines of accountability, specifies roles and details responsibilities for areas of activity.</p> <p>This relates to missed calls to service users. The agency is required to have a system in place which records any calls which did not occur to the service user or if the service user has cancelled the call.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>We reviewed four daily logs for service users and did not identify any missed calls. It was discussed with the person in charge that if a call is missed or cancelled, an email is sent to the service user's key worker and a note is</p>	

	kept on the service user's file. This was evident in one record as a number of calls had been cancelled by the service user.	
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6.1 Inspection findings

Recruitment:

We reviewed four staff recruitment files and it was evident that all pre-employment checks had been undertaken before the staff member commenced employment, including Access NI. It was positive to note that the service was compliant with Regulation 13 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

The NISCC matrix reviewed confirmed all staff were registered with NISCC. The person in charge advised that a system is in place to monitor the registration of all staff and reminders are sent to staff when they are due to renew their registration. The manager confirmed that all staff are aware that they are not permitted to work if their NISCC registration has lapsed. Staff also confirmed their knowledge of this when providing feedback.

Staff Supervision:

We reviewed four staff's supervision records and it was evident that the agency were supervising their staff in accordance with their policies and procedures. Staff confirmed through feedback that they get supervision on a regular basis. One staff member stated that supervision was every month and then after the probationary period, it reduced which is in line with the supervision policy.

Care Plans and Reviews:

We reviewed four service users' file and it was noted that the care plans had been reviewed on an annual basis and any changes to the service user's package of care was updated accordingly. A signed copy of the care plan was retained in the service users' files within the office and a copy was retained in the service users' home in accordance with Standard 10.4 of the Domiciliary Care Agencies Minimum Standards 2011.

The daily logs for four service users were also reviewed on the day of inspection and it was positive to note that there were no missed calls identified over a two week period. The person in charge advised that there is a system to record missed or cancelled calls. This system was shown to us for another service user who would regularly cancel calls and correspondence is sent to the service users' key workers to advise of this.

Comments from service users included:

- "I am happy with the care."
- "They are all respectful and friendly."
- "They are all very good and helpful."
- "Timings are great."

Comments from service users' relatives included:

- "We have found them very good."

- “Initially it was bumpy but it’s all good now.”
- “They do what they are supposed to do.”
- “They are wearing full PPE.”
- “They put their used PPE in a double bag before disposing of it.”
- “Things are good.”
- “I am happy with everything.”
- “They treat him really well.”
- “No complaints whatsoever.”
- “They always turn up and on time.”
- “If they get held up I get a phone call but this happens once in a blue moon.”
- “The level of care is absolutely spot on.”
- “My wife looks forward to them coming in.”
- “They are very helpful and chat to her.”
- “They leave everything neat and tidy.”
- “Extremely good company.”
- “On the whole I think that most of their staff are interested in what they are doing and want to please.”
- “They always ensure my husband looks presentable.”
- “He is happy to see them coming.”
- “The care workers are quite compassionate and they are good at helping.”

Comments from care workers included:

- “During my induction I got a lot of information and guidance regarding PPE.”
- Supervision happens every month.”
- “I have had quite a lot of spot checks.”
- “Management are supportive. I can contact them at any time.”
- “I love working for them.”
- “100% I have enough time to deliver the packages of care.”
- “I don’t rush my calls.”
- “I am happy with what Admiral has provided us with. They take the current pandemic very seriously and ensure we are all protected, as well as the service users.”
- “All precautions have been taken.”
- “Any issues I have had are resolved pretty quickly.”
- “I did have issues with my run previously as I did feel that the calls were rushed but I’m not there to do a job quickly, I’m there to provide safe care.”
- “We are a close knit team.”
- “I have an attachment to all my service users.”
- “The care takes as long as it takes.”
- “If I have any concerns, I would speak to the care co-ordinator and she puts me at ease.”

Comments from professionals included:

- “No major concerns.”
- “My service user hasn’t raised any issues.”
- “The family are very happy.”
- “The care workers received training from Occupational Therapist and Nurses to meet the care needs of my service user.”
- “Timing of calls was an issue but that has all been resolved and everything is settled.”
- “Communication would not be great from Admiral.”
- “I deal more with the care co-ordinator.”

- “There have been issues with the times of calls.”

Covid-19

We spoke to the manager and to three staff members who were knowledgeable in relation to their responsibility in relation to Covid-19. Staff stated they were aware of the guidance in relation to the use of PPE for activities that brought them within two metres of service users. Staff were also aware of the need to replace PPE between service users and how to appropriately dispose of used PPE. There was evidence that staff had completed training with regards to IPC and they had been provided with clear guidance.

We reviewed the current practices relating to the following areas of guidance and good practice relating to Covid-19:

- dissemination of information to staff
- IPC policies and procedures have been updated to address all current guidance in relation to Covid-19
- PPE storage and disposal
- staff training and guidance on IPC and the use of PPE equipment in line with guidance

We reviewed records relating to IPC policies which were in-line with the guidance. The policies and procedures had been updated to include Covid-19.

The procedure and guidance in place show that:

- robust systems are in place to ensure that current IPC guidance is available and accessible to staff
- all staff working in the service are able to demonstrate their knowledge of IPC practice commensurate to their role and function in the service

Based on feedback it was positive to note that staff were working well together to support the best outcomes for service users, in a caring manner whilst being caring and compassionate to both service users and their relatives.

It was also noted that staff were committed to working in line with Covid-19 guidance to ensure that the impact of current measures, strikes the correct balance between keeping people safe and promoting a good quality of life, as highlighted by relatives in their comments. Staff are being vigilant in terms of monitoring people for symptoms and are adhering to the public health guidance in order to minimise the risk of introducing or spreading Covid-19.

Areas of good practice

Evidence of good practice was found in relation to Access NI, staff registrations with the Northern Ireland Social Care Council (NISCC), care records, management of incidents and staff supervision.

Good practice was also found in relation to all current Covid-19 guidance and the use of personal protective equipment (PPE) guidelines, Covid-19 education and management including infection prevention and control (IPC) measures.

Areas for improvement

No areas for improvement were identified from this inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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