

# Unannounced Follow up Care Inspection Report 24 August 2017



## Open Door Homecare Ltd

Type of Service: Domiciliary Care Agency

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Inspector: Caroline Rix

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Assurance, Challenge and Improvement in Health and Social Care

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

Open Door Homecare Ltd is a domiciliary care agency, which provides services to people in their own homes in the Bangor, Newtownards and Donaghadee areas. These services include personal care, meal preparation, sitting services and social support. The domiciliary care agency has been operational since September 2015. The South Eastern Health and Social Care Trust commissions these services.

### 3.0 Service details

<b>Registered organisation/registered person:</b> Open Door Homecare Ltd/Denise Cranston	<b>Registered manager:</b> Lorraine Dorcas Wilson
<b>Person in charge of the service at the time of inspection:</b>	<b>Date manager registered:</b> 4 July 2014

### 4.0 Inspection summary

An unannounced inspection took place on 20 November 2017 from 09.40 to 11.40 hours.

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

The inspection sought to assess progress with issues raised at a meeting on 26 April 2017 regarding staff recruitment practice, quality monitoring and record keeping.

The following areas were examined during the inspection:

- recruitment and selection policy and procedure
- staff recruitment files
- staff induction records
- monthly monitoring reports

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
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Denise Cranston registered person and Lorraine Wilson registered 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 12 April 2017

In accordance with RQIA's Enforcement Policy and Procedures, a meeting was arranged at RQIA offices on 26 April 2017 to discuss with the registered person the non-compliance in relation to Regulation 13(a) and (b) and Regulation 23(1)(4) and of The Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

The registered person and the registered manager attended the meeting at RQIA offices on 26 April 2017 and provided assurances that the areas for improvement had been addressed. Other than those actions detailed in the QIP, the responsible person was required to provide evidence of the staff file audit undertaken including all actions taken to achieve full compliance. The registered person was required to submit a copy of each monthly monitoring report for review, until further notice, as an assurance that quality monitoring improvements are being maintained. These documents were submitted to RQIA as required.

## 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- Previous inspection report and returned Quality Improvement Plan
- Staff file audit record
- Monthly monitoring reports
- Record of notifiable events for 2017

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

- Discussion with the registered person and registered manager
- Examination of records
- File audits
- Evaluation and feedback

The following records were examined during the inspection:

- Five staff recruitment and induction records
- Agency process for verifying staff NISCC registration
- Monthly monitoring reports for April to October 2017
- Policy and procedure relating to staff recruitment.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to the registered person and registered manager at the conclusion of the inspection.

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 12 April 2017

The most recent inspection of the agency was an unannounced care inspection. The completed QIP was returned and approved by the care inspector.

### 6.2 Review of areas for improvement from the last care inspection dated 12 April 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.		Validation of compliance
<b>Area for Improvement 1</b> Ref: Regulation 13 (d) Stated: Third time	The registered person must ensure that no domiciliary care worker is supplied by the agency unless full and satisfactory information is available in relation to him.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The inspector reviewed staff recruitment records which confirmed that full and satisfactory information had been obtained in relation to each domiciliary care worker. The inspector reviewed the agency's system of auditing staff recruitment records, introduced in April 2017.	
<b>Area for Improvement 2</b> Ref: Regulation 23 Stated: Third time	The registered person shall establish and maintain a system for evaluating the quality of the services which the agency arranges to be provided. This should include monthly monitoring reports which shall contain details of the measures that the registered person considers it necessary to take in order to improve the quality and delivery of the services which the agency arranges to be provided.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The inspector reviewed the monthly monitoring reports completed by the registered person for April to October 2017. These monthly monitoring reports were found to be in	

	line with the regulation and minimum standards.	
<b>Area for Improvement 3</b> <b>Ref:</b> Regulation 21 (1) Schedule 4 (5)  <b>Stated:</b> First time	The registered provider must ensure that details of each supply of a domiciliary care worker to a service user are maintained and available at all times for inspection.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The inspector confirmed that details of the supply of each domiciliary care worker to a service user are being maintained and were available for inspection.	

This inspection focused solely on issues previously outlined in section 4.0. The areas for improvement from the last care inspection on 12 April 2017 were reviewed as part of this care inspection.

### 6.3 Inspection findings

#### Staffing

The inspector reviewed actions taken in response to ensuring that no domiciliary care worker is supplied by the agency unless full and satisfactory information is available in relation to him in respect of each of the matters specified in Regulation 13 and Schedule 3 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

The inspector viewed evidence confirming that the registered person and registered manager had completed an audit of all existing domiciliary care workers' pre-employment records to identify any gaps in documentation or information obtained. The registered manager discussed how measures were then taken to address any missing information. The inspector reviewed the agency's system of auditing staff recruitment records on a monthly basis, introduced in April 2017.

Review of staff files confirmed the agency had taken appropriate action to comply with regulations and minimum standards. Records demonstrated that where identified within four staff files during the inspection 12 April 2017 the agency had obtained full information for each domiciliary care worker. A further five staff files were reviewed and these also verified the agency had appropriate arrangements in place to ensure that all pre-employment checks are made to ensure staff are suitably recruited to provide care.

The inspector confirmed that details of the supply of each domiciliary care worker to a service user are being maintained and are available for inspection.

#### Areas of good practice

The registered manager has introduced a monthly audit system to ensure staff recruitment records are in line with regulations and standards. Details of the supply of each domiciliary care worker to a service user are being maintained.

**Areas for improvement**

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

**Governance arrangements**

The monthly monitoring report template and records were found to be in line with regulation and minimum standards. The inspector reviewed the monthly monitoring reports completed by the registered person for April to October 2017 which had been submitted to RQIA as required. The contents of these reports were found to be detailed and contained a summary of staff and service user monitoring, compliments and complaints; and evidenced how any issues arising had been managed.

**Areas of good practice**

The registered person submitted to RQIA each monthly monitoring report as required. The content of these reports were found to be appropriately detailed.

**Areas for improvement**

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	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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