

Unannounced Care Inspection Report 15 May 2018



Parkanaur College Supported Living Service

Type of Service: Domiciliary Care Agency
Address: 57 Parkanaur Road, Dungannon, BT70 3AA
Tel No: 02887761272
Inspector: Michele Kelly

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 from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

The Domiciliary Care service known as Parkanaur College Supported Living Service was not operational on 15 May 2018. The service aims to provide care and support to three service users with a learning disability who will live in shared accommodation.

3.0 Service details

Organisation/Registered Provider: Thomas Doran Trust	Registered Manager: Mr Waldemar Mietlicki
Responsible Individual: Mr Wilfred Johnston Mitchell	
Person in charge at the time of inspection: Mr Waldemar Mietlicki	Date manager registered: 14 December 2017

4.0 Inspection/visit summary

An unannounced inspection of Parkanaur Supported Living service was undertaken on 15 May 2018 from 10.15 to 11.15 hours. The registered person Mr Wilfred Mitchell advised the inspector that the agency, while registered as a domiciliary care agency, was not currently operating.

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

The inspection did not assess progress with any areas for improvement identified during and since the last care inspection as both the registered person and registered manager were undertaking other work and were unavailable to support the inspection on the day.

4.1 Inspection/visit outcome

	Regulations	Standards
Total number of areas for improvement	3	3

4.2 Action/enforcement taken following the most recent care inspection dated 03 August 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent pre-registration inspection on 3 August 2017.

5.0 How we inspect

Areas for improvement identified at the last care inspection were not reviewed as part of this inspection and are carried forward to the next care inspection.

Prior to inspection the inspector analysed the following records:

- previous inspection report

Specific methods/processes used in this inspection/visit includes the following:

- discussion with the registered manager and registered person
- visit to the proposed supported living premises

6.0 The inspection/ visit

Following discussions with the registered manager the inspector viewed the accommodation proposed for service users. The inspector had concerns about the living and sleeping areas suitability for three service users and informed the member of staff who accompanied the inspector of the concerns. After the inspection a senior inspector communicated these concerns to the manager and to a senior member of staff within the commissioning trust. Assurances were provided by the trust that further review of the accommodation would be undertaken prior to service users being placed in Parkanaur.

6.1 Review of areas for improvement from the most recent inspection dated 03 August 2017

The most recent inspection of the agency was an announced pre-registration care inspection.

This QIP will be validated by the care inspector at the next care inspection.

6.2 Review of areas for improvement from the last care inspection dated 03 August 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
Area for improvement 1 Ref: Regulation 13, Schedule 3 Stated: First time	The registered person shall ensure that a statement by the registered provider, or the registered manager, as the case may be, that the person is physically and mentally fit for the purposes of the work which he is to perform.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	
Area for improvement 2 Ref: Regulation 17	The registered person shall ensure that the staff handbook is further developed to include record keeping requirements.	Carried forward to the next care inspection

<p>Stated: First time</p>	<p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	
<p>Area for improvement 3 Ref: Regulation 16 (5) (a) Stated: First time</p>	<p>The registered person shall ensure that the agency's induction programme specifies a structured induction lasting no less than three full working days.</p> <p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	<p>Carried forward to the next care inspection</p>
<p>Action required to ensure compliance with the Domiciliary Care Agencies Minimum Standards, 2011</p>		<p>Validation of compliance</p>
<p>Area for improvement 1 Ref: Standard 4 Stated: First time</p>	<p>The registered person shall ensure that each service user is provided with an individual service user agreement, as outlined in Standard 4.</p> <p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	<p>Carried forward to the next care inspection</p>
<p>Area for improvement 2 Ref: Standard 14.1 Stated: First time</p>	<p>The registered person shall ensure that the agency's safeguarding procedures specify the reporting requirements to RQIA, as appropriate and in accordance with Regulation 15 (12) (b).</p> <p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	<p>Carried forward to the next care inspection</p>
<p>Area for improvement 3 Ref: Standard 12.8 Stated: First time</p>	<p>The registered person shall ensure there is a written training and development plan that is kept under review and is updated at least annually. It reflects the training needs of individual staff and the aims and objectives of the agency.</p>	<p>Carried forward to the next care inspection</p>

	<p>Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>	
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7.0 Quality improvement plan

Areas for improvement identified during the pre-registration inspection are detailed in the QIP. The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 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.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and/or the Domiciliary Care Agencies Minimum Standards, 2011.

7.2 Actions to be taken by the service

As the matters in the previous QIP were not reviewed no further response is required at this time.

Quality Improvement Plan	
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007	
Area for improvement 1 Ref: Regulation 13, Schedule 3 Stated: First time To be completed by: 20 December 2017	The registered person shall ensure that a statement is included by the registered provider, or the registered manager, as the case may be, that the person is physically and mentally fit for the purposes of the work which he is to perform.
	No further response is required at this time.
Area for improvement 2 Ref: Regulation 17 Stated: First time To be completed by: 20 December 2017	The registered person shall ensure that the staff handbook is further developed to include record keeping requirements.
	No further response is required at this time.
Area for improvement 3 Ref: Regulation 16 (5) (a) Stated: First time To be completed by: 20 December 2017	The registered person shall ensure that the agency's induction programme specifies a structured induction lasting no less than three full working days.
	No further response is required at this time.
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011	
Area for improvement 1 Ref: Standard 4 Stated: First time To be completed by: 20 December 2017	The registered person shall ensure that each service user is provided with an individual service user agreement, as outlined in Standard 4.
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Area for improvement 2 Ref: Standard 14.1 Stated: First time To be completed by: 20 December 2017	The registered person shall ensure that the agency's safeguarding procedures specify the reporting requirements to RQIA, as appropriate and in accordance with Regulation 15 (12) (b).
	No further response is required at this time.

<p>Area for improvement 3</p> <p>Ref: Standard 12.8</p> <p>Stated: First time</p> <p>To be completed by: 20 December 2017</p>	<p>The registered person shall ensure there is a written training and development plan that is kept under review and is updated at least annually. It reflects the training needs of individual staff and the aims and objectives of the agency.</p>
	<p>No further response is required at this time.</p>



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