

Support Care Recruitment Ltd RQIA ID: 12233 c/o Premier Business Centre 20 Adelaide Street Belfast BT2 8GB

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# Unannounced Care Inspection of Support Care Recruitment Ltd

5 May 2015

The Regulation and Quality Improvement Authority
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#### 1. Summary of Inspection

An unannounced care inspection took place on 5 May 2015 from 10.30 am to 13.30 pm by Maire Marley, Senior Inspector and Caroline Rix, Inspector/Quality Reviewer from the Regulation and Quality Improvement Authority (RQIA) following receipt of information from Northern Health and Social Care Trust.

Overall on the day of the inspection the agency was not found to be delivering safe or effective care. A review of the outcomes of the inspection was undertaken with the senior management team to assess the agency's level of compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

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

A Notice of Proposal to place two conditions on the registration of Support Care Recruitment Limited Domiciliary Care Agency was issued 10 October 2014 and following unannounced inspections carried out on 18 December 2014 and 26 March 2015 to assess the agency's level of progress and compliance with the conditions imposed on registration: the two conditions imposed were removed from the agency's registration certificate with effect from 1 April 2015.

#### 1.2 Actions/Enforcement Resulting from this Inspection

In accordance with RQIA's Enforcement Policy and Procedures, RQIA wrote to the registered person to advise of the intention to issue three notices of failure to comply with regulations. A meeting was held at RQIA offices on 13 May 2015 to discuss these matters and other serious matters that arose during this inspection. The outcome of this meeting resulted in one failure to comply notice being issued and assurances provided regarding the serious concerns discussed to be included within their quality improvement plan. This was felt would be the most appropriate and proportionate measure to achieve improvements.

One Failure to Comply notice issued 14 May 2015 in relation to Support Care Recruitment Limited Domiciliary Care Agency having supplied individuals prior to undertaking the required pre-employment checks.

#### 1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and	4	4
recommendations made at this inspection	**	

The details of the QIP within this report were discussed with the registered manager Fadzai Burrows as part of the inspection process. The timescales in which compliance must be achieved is 17 June 2015.

#### 2. Service Details

Registered Organisation/Registered Person: Support Care Recruitment Limited Domiciliary Care Agency/Petros Jinga	Registered Manager: Fadzai Burrows
Person in charge of the agency at the time of Inspection: Fadzai Burrows	Date Manager Registered: 22 December 2014
Number of service users in receipt of a service on the day of Inspection:	

#### 3. Inspection Focus

The inspection sought to assess compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

#### 4. Methods/Process

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

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

The following records were examined during the inspection:

- Six staff files
- · Two service user files
- · Staff Induction policy and procedure
- Database containing staff details

#### 5. The Inspection

#### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an unannounced care inspection dated 26 March 2015. A Quality Improvement Plan was not issued on this occasion as the issues identified were addressed in the Notice of Proposal.

# 5.2 There were no previous requirements or recommendations to review following previous care inspection.

# 5.3 Theme 1 - Management systems and arrangements are in place that support and promote the quality of care services.

#### Is Care Safe?

The inspectors reviewed six staff files. Three of these files were found to contain incomplete pre-employment information. One file did not have any references or evidence that an Access NI certificate had been requested, received or reviewed, had no induction training records, no staff job description or contract of employment. Another file contained one reference, no staff job description or contract of employment. A third file contained no references.

The registered manager explained that since taking up her post as registered manager she had reviewed the content of staff files to check if any information was missing however she had not reviewed two of the files inspected.

The staff records viewed found evidence that one out of six contained confirmation that a job description had been provided.

The inspectors found that only one out of six records contained evidence that a contract of employment had been provided to them, this one record verified receipt of a contract of employment but no copy of the actual contract was attached. Copies of all agreements between the agency and domiciliary care workers could not be confirmed.

At the meeting at RQIA offices on 13 April 2015, the responsible person and registered manager, provided a copy of the staff contract of employment and gave an assurance that every staff member will be provided with this document, and a signed copy will be retained in their staff files.

The inspectors requested to view the list of staff currently employed by the agency. The registered manager provided access to their staff computerised database. This database contained details of current staff along with former staff and people who have not commenced employment with the agency. The registered manager could not provide an up to date alphabetical index of domiciliary care workers supplied or available for supply by the agency, including any serial numbers assigned to them.

The inspectors requested to view the staff duty rota. The registered manager was unable to provide a copy of the staff duty rota, she explained that the deputy manager held this information and was out shadowing a new care worker at the time of inspection. The registered manager attempted to obtain a copy of the duty rota by email but this was not made available during the inspection. The registered manager was unable to confirm details of each supply of domiciliary care workers to service users.

During the serious concerns meeting at RQIA offices on 13 April 2015, the responsible person and registered manager, provided evidence of the revised index of domiciliary care workers supplied or available for supply by the agency along with a copy of the staff duty rota with details of each supply of a domiciliary care worker to a service user.

The staff Induction policy and procedure dated October 2014 was reviewed. This document is not in line with the legislation and is required to be expanded to specify the timescale within which this training will be provided.

The staff records reviewed contained evidence that staff had been provided with induction training, with the exception of one staff file which did not contain any records to confirm induction training had been provided. The staff records reviewed did not contain evidence that the competency of staff had been assessed on completion of their induction training programme.

During the serious concerns meeting at RQIA offices on 13 April 2015, the responsible person and registered manager provided an assurance that they would undertake a review of the staff induction policy and procedure to ensure it is in accordance with this regulation.

Overall on the day of inspection we found that care delivery was not safe.

#### Is Care Effective?

The inspectors reviewed two service users' files. These files did not contain evidence that any agreements had been provided to service users. Discussion with the registered manager confirmed that agreements have not been provided to any service users. The agency does not currently have a service user agreement template. During the serious concerns meeting at RQIA offices on 13 April 2015, the responsible person and registered manager gave an assurance that they had developed individual service user agreements and plan to provide these to all service users by 14 June 2015. They confirmed that two copies would be provided to service users and request both signed with one copy retained in the agency file and the second retained by service users within their home file.

Overall on the day of inspection we found that care delivery was not effective.

#### Is Care Compassionate?

This area was not assessed on the day of the inspection.

#### **Areas for Improvement**

The registered person must revise their staff recruitment policy and procedure to ensure that no domiciliary care worker is supplied by the agency unless full and satisfactory information is available in relation to him.

Failure to provide employees with information regarding their responsibilities would be considered a serious concern for the safety of service users and staff.

Number of Requirements 4 Number Recommendations:
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#### 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Petros Jinga responsible person and Fadzai Burrows registered manager as part of the serious concerns meeting. The timescales in which compliance must be achieved is 17 June 2015.

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 RQIA's office 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

#### Regulrement 1

The registered person shall ensure that no domiciliary care worker is supplied by the agency

Ref:

unless-Regulation 13

him.

(a) he is of integrity and good character;

Stated: First time (b) he has the experience and skills necessary for the work that he is to (c) he is physically and mentally fit for the purposes of the work which he

To be Completed by: In accordance with the timescale outlined in FTC/DCA/12233/2015 -16/01

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

17 June 2015

The registered person must revise their staff recruitment policy and procedure to ensure that no domiciliary care worker is supplied by the agency unless full and satisfactory information is available in relation to

Response by Registered Person(s) Detailing the Actions Taken:

Kelondo viewed at follow up inspection 17.6.15 Confirmed met.

## Requirement 2

The registered person shall ensure that each employee of the agency-(c) is provided with a job description outlining his responsibilities.

Ref:

Regulation 16(2)(c)

Response by Registered Person(s) Detailing the Actions Taken:

Stated: First time

To be Completed by: 17 June 2015

Kelondo viewed at Bllow up inspection 17615 Confirmed met

## Requirement 3 Where the agency is acting otherwise than as an employment agency, the registered person shall ensure that-(a) a new domiciliary care worker Ref: ("the new worker") is provided with appropriately structured induction Regulation 16 (5)(a) training lasting a minimum of three full working days. Stated: Response by Registered Person(s) Detailing the Actions Taken: First time Klands viewed at Allow up inspection 17:6:5 anhorms To be Completed by: 17 June 2015 this area was met. Requirement 4 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 Ref: Regulation 21 (1) inspection at the agency premises by any person authorized by the Regulation and Improvement Authority. Stated: First time Response by Registered Person(s) Detailing the Actions Taken: To be Completed by: Kessels viewed at follow up inspection: 17615 Godfmul this area was met. 17 June 2015

Recommendations		
Recommendation 1  Ref: Minimum Standard 4.1  Stated: First time	Each service user and, if appropriate, provided with a written individual agree of the service. If it is not possible to p commencement of the service, it is presuch commencement. The agreement format and language suitable for the secarer/representative.	eement before the commencement rovide this agreement before the rovided within five working days of t is made available, if required, in a
To be Completed by: 17 June 2015	Response by Registered Person(s)	_
Registered Manager Co	mpleting QIP Eurowes	Date Completed 13 10/15
Registered Person App	roving QIP	Date Approved (3/10/15
RQIA Inspector Assess	ing Response Luche Ric	Approved 4-10-15

<sup>\*</sup>Please ensure the QIP is completed in full and returned to <a href="mailto:agencies.team@rqia.org.uk">agencies.team@rqia.org.uk</a> from the authorised email address\*

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