

Unannounced Care Inspection Report 2 March 2020











The Lodge

Type of Service: Domiciliary Care Agency Address: 120 Belfast Road, Antrim, BT41 2BA

> Tel No: 028 9446 5200 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

The Lodge is a supported living type domiciliary care agency which provides 24 hour support with accommodation for six service users with enduring mental health needs. The service is managed by the Northern Health and Social Care Trust (NHSCT). The aim of the service is to enable service users to meet their potential to progress to more independent living. It further aims to support the rehabilitation and recovery of service users discharged from hospital and those referred by the Community Mental Health Teams.

3.0 Service details

Organisation/Registered Provider: Northern Health and Social Care Trust Responsible Individual(s): Dr Anthony Baxter	Registered Manager: Mr Mark Stanley Farr
Person in charge at the time of inspection: Mr Mark Stanley Farr	Date manager registered: 25 June 2014

4.0 Inspection summary

An unannounced inspection took place on 2 March 2020 from 10.00 to 12.30 hours.

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.

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.

All service users and staff spoken with stated they were very happy with the care and support provided.

No areas requiring improvement were identified during the inspection.

Evidence of good practice was found in relation to the monthly quality monitoring reports, management and reporting of notifications to RQIA, process for completing Access NI checks and managing staff registrations with the Northern Ireland Social Care Council (NISCC) and the Nursing and Midwifery Council (NMC).

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 Mr Mark Farr, 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 18 December 2018

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 18 December 2018.

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.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service.

We ensured that the appropriate staff checks were in place before staff visited service users.

Recruitment records specifically relating to Access NI and NISCC/NMC registration.

Ten questionnaires were provided to give service users and those who visit them the opportunity to contact us after the inspection with their views. No responses were returned for inclusion within this report

A poster was provided for staff detailing how they could complete an electronic questionnaire. No responses were received.

RQIA information leaflets 'How can I raise a concern about an independent health and social care service' were also provided to be displayed appropriately in the setting.

During the inspection the inspector met with one service user and one member of staff.

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

The inspector would like to thank the registered manager, service users and staff for their support and co-operation throughout the inspection process.

6.0 The inspection

Areas for improvement from the last care/finance inspection dated 18 December 2018			
Action required to ensure compliance with The Domiciliary Care		Validation of	
Agencies Regulations (Northern Ireland) 2007		compliance	
Area for improvement 1	In accordance with Regulation 23 (2) (3), the registered person must forward to RQIA	Mat	
Ref: Regulation 23 (2)(3)	reports of quality monitoring visits undertaken on a monthly basis until further notice.	Met	
Stated: First time			

	Action taken as confirmed during the inspection: The manager advised that a new template had been created and once agreed by RQIA was implemented by the agency. The inspector reviewed a sample of the agency's monthly quality monitoring reports from October 2019, November 2019, December 2019 and January 2020 and noted that they were compliant with Regulation 23.	
Action required to ensure compliance with The Domiciliary Care Agencies Minimum Standards, 2011		Validation of compliance
Area for improvement 1 Ref: Standard 14.6 Stated: First time	The registered person shall ensure that all statutory notifications are submitted to RQIA in compliance with current RQAI guidance. This relates specifically to the notification of an adult safeguarding concern with PSNI involvement.	
	Action taken as confirmed during the inspection: The inspector reviewed the accident and incident records held by the agency and noted that all incidents were reported to RQIA in compliance with the current guidance. The manager had devised a flow chart for all staff to ensure they know what and when to report to RQIA.	Met

6.1 Inspection findings

The agency's staff recruitment processes were noted to be managed in conjunction with the organisation's Human Resources department. The manager confirmed that no staff had been employed by the agency since the previous inspection. Discussions with the manager identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and Standard 11 of the Domiciliary Care Agencies Minimum Standards, 2011.

The day care setting has a system is in place to ensure all staff are registered with NISCC and NMC and that registration of each staff member is maintained. A review of 9 staff records confirmed that they were all currently registered with NISCC/NMC as required. The inspector noted that the manager had a system in place for monitoring registration status of staff with the relevant regulatory body. Staff were aware that they are not permitted to work if their NISCC/NMC registration had lapsed.

Service users' comments included:

- "It's bliss living here."
- "I've got my own double bed and kettle so I can make my own tea at night."

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- "I'm in control of my own money."
- "I can come and go as I please."
- "I like living here."
- "I do my own shopping and I buy what I want to buy and what I like to eat."
- "We have monthly meetings which are good."

Staff members' comments included:

- "Getting to know the tenants is what is most important."
- "The manager is the best I've worked for."
- "Staff are supportive of each other."
- "It's the best place I have ever worked."
- "I love my job."
- "It's good to see the tenants making progress; it makes the job worthwhile."
- "The most important part of the job is promoting independence so the tenants can do most things for themselves."
- "It's a fantastic place."
- "Every day is different."
- "The manager is very supportive."

Areas of good practice

Areas of good practice were identified in relation to the monthly quality monitoring reports, management and reporting of notifications to RQIA, process for completing Access NI checks and managing staff registrations with NISCC and NMC.

Areas for improvement

No areas for improvement were identified during the 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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