

**THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)**

**FAILURE TO COMPLY NOTICE**

<b>Name of Registered Agency:</b> Extra Care (RQIA ID: 10930)	<b>Name of Registered Person:</b> Mr. Brian Hutchinson
<b>Address of Registered Agency:</b> Lucas Exchange, 1 Orchard Way, Greystone Road, Antrim, BT41 2RU	
<b>Issue Date:</b> 9 April 2020	<b>FTC Ref:</b> FTC000091
<b>Regulation not complied with:</b>  <b><i>The Domiciliary Care Agencies Regulations (Northern Ireland) 2007</i></b>  <b><i>Regulation 14.—</i></b>  <i>Where the agency is acting otherwise than as an employment agency, the registered person shall make suitable arrangements to ensure that the agency is conducted, and the prescribed services arranged by the agency, are provided —</i> <i>(a) so as to ensure the safety and well-being of service users;</i> <i>(b) so as to safeguard service users against abuse or neglect;</i>	
<b>Specific failings to comply with regulations:</b>  During an unannounced inspection on 6 March 2020, there was evidence to demonstrate that the safety and well-being of service users had been placed at risk due to a number of missed and late calls.  The review of the records identified that missed calls had occurred within the Northern Health and Social Care Trust (NHSCT) area.  Whilst the inspectors acknowledge that the recorded numbers of missed and late calls had decreased significantly since previous enforcement action had been taken in May 2018, it was very concerning that the agency had again not taken timely action to ensure the safety and well-being of service users.  The review of the agency's missed calls records evidenced that the agency had not been aware of all the missed calls. There was evidence within the care records that calls which had been significantly late had been recorded as late calls, when they should have been recorded as missed calls. This called the accuracy of the missed calls records into question.  Examination of care records evidenced a varied pattern of service provision with significant numbers of calls being provided in shorter times than the care time commissioned by the NHSCT. There were a number of occasions where calls were scheduled for the same time on the same run. This meant that the care physically could not have been delivered at the same time.	

The review of the staff rosters identified a number of occasions where single runs had been merged into double runs. This meant that specific blocks of commissioned care times were delivered into shorter time slots. In one instance there was evidence that five hours and fifteen minutes of commissioned care had been provided in three hours and forty minutes.

Due to missed calls, twenty five service users had their personal care needs neglected. Fourteen service users missed their medicines, ten missed their meals, thirteen missed calls where they needed to be assisted to the toilet and eleven service users missed calls where the care workers were to assist them in to bed.

The inspectors evidenced the negative impact the missed and late calls had on service users and their representatives.

The inspectors were informed by the agency that a number of the missed and late calls had been attributed to insufficient staffing numbers. However, the inspectors identified eleven occasions where the staff roster had been mismanaged.

Three service users and their representatives advised the inspectors that they had raised their concerns with the agency's management team; however, the inspectors identified that concerns had not been consistently recorded within the agency's complaints record.

There was limited evidence to demonstrate that the responsible individual had taken appropriate action in a timely manner, to address the concerns and safeguard the service users.

**Action required to comply with regulations:**

- The registered person must develop and implement a robust system for ensuring that service users receive their care calls in a timely manner.
- The registered person must review the system for communication with service users and/or their' representatives, to ensure that any matters impacting on service delivery are communicated effectively.
- The registered person must undertake audits of all missed or late calls and review the systems to communicate effectively with service users and relevant stakeholders. The registered person must ensure that the HSC trusts are notified of these.
- The registered person must ensure that a written report of the audits undertaken are submitted to RQIA no later than five days after the last day of the month and until further notice.

**The Registered Person may make written representations to the Chief Executive of RQIA regarding the issue of a failure to comply notice, within one month of the date of serving this notice.**

**Date by which compliance must be achieved: 9 July 2020**



**Signed.....Director of Assurance**

***This notice is served under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Domiciliary Care Agencies Regulations (Northern Ireland) 2007***

***It should be noted that failure to comply with some regulations is considered to be an offence and RQIA has the power under regulations to prosecute for specified offences.***

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<b>Issue Date:</b> 9 April 2020	<b>FTC Ref:</b> FTC000092
<b>Regulation not complied with:</b>  <i>The Domiciliary Care Agencies Regulations (Northern Ireland) 2007</i>  <b>Regulation 16.—</b>  <i>(1) Where an agency is acting otherwise than as an employment agency, the registered person shall, having regard to the size of the agency, the statement of purpose and the number and needs of the service users, ensure that—</i> <i>(a) there is at all times an appropriate number of suitably skilled and experienced persons employed for the purposes of the agency;</i>	
<b>Specific failings to comply with regulations:</b>  During an unannounced inspection undertaken on 6 March 2020 the registered person's arrangements for ensuring that there are appropriate staffing numbers to meet the service users' needs were examined.  Relatives spoken with informed the inspectors that there were frequent changes in staff.  The inspectors identified that there had been a high level of staff turnover, with twenty of the sixty staff employed within the previous six months having left employment.  The agency had relied on the use of agency staff from other registered domiciliary care agencies and supplied nine of them without having provided them with appropriate induction.  The review of six care records identified that in all care records, the calls provided were consistently shorter than the commissioned care time.  Insufficient staffing levels had been attributed to the reasons missed and late calls had occurred on twelve days, between December 2019 and February 2020.	

**Action required to comply with regulations:**

- The registered person must ensure that the agency assesses risk and can guarantee the safety, health and well-being of vulnerable service users.
- The registered person, within this context, must be in a position to safely accept new packages of care and to demonstrate overall proportionate risk management approaches are implemented.
- The registered person must develop a written plan to address the agency's staffing shortages. This plan must also include reference to the agency's staff retention policy and procedure.
- The registered person must ensure that a written plan is submitted to RQIA no later than five days after the last day of the month and until further notice. This plan must outline how the agency assesses and manages risk of service delivery. The plan must also outline how the agency assesses risk associated with new referrals whilst ensuring appropriate staffing levels.

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<b>Issue Date:</b> 9 April 2020	<b>FTC Ref:</b> FTC000093
<b>Regulation not complied with:</b>  <b><i>The Domiciliary Care Agencies Regulations (Northern Ireland) 2007</i></b>  <b><i>Regulation 23.—</i></b>  <b><i>(1) The registered person shall establish and maintain a system for evaluating the quality of the services which the agency arranges to be provided.</i></b> <b><i>(2) At the request of the Regulation and Improvement Authority, the registered person shall supply to it a report, based upon the system referred to in paragraph (1), which describes the extent to which, in the reasonable opinion of the registered person, the agency—</i></b> <b><i>(a) arranges the provision of good quality services for service users;</i></b> <b><i>(b) takes the views of service users and their representatives into account in deciding—</i></b> <b><i>(i) what services to offer to them, and</i></b> <b><i>(ii) the manner in which such services are to be provided; and</i></b> <b><i>(c) has responded to recommendations made or requirements imposed by the Regulation and Improvement Authority in relation to the agency over the period specified in the request.</i></b> <b><i>(3) The report referred to in paragraph (2) shall be supplied to the Regulation and Improvement Authority within one month of the receipt by the agency of the request referred to in that paragraph, and in the form and manner required by the Regulation and Improvement Authority.</i></b> <b><i>(4) The report shall also 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.</i></b> <b><i>(5) The system referred to in paragraph (1) shall provide for consultation with service users and their representatives.</i></b>	
<b>Specific failings to comply with regulations:</b>  During an unannounced inspection undertaken on 6 March 2020 the registered person's arrangements for evaluating the quality of service provision were examined.  The inspectors identified that there had been no meaningful interrogation of the missed and late calls records. The concerns raised by staff, service users and their representatives had not been picked up or acted upon.	

The agency's systems for auditing care records, complaints records and staff rosters failed to accurately identify all missed and late calls; and those calls which were significantly and consistently shorter than care time commissioned by the Northern Health and Social Care Trust (NHSCT).

Concerns were identified in relation to the quality of the monthly quality monitoring reports. The review of the reports identified that the person designated with the responsibility of undertaking the monitoring visits lacked the understanding of the purpose of the visits. This was evident in the carrying forward of an area for improvement, which had already been deemed by RQIA as having been met. The action plans consisted of the RQIA Quality Improvement Plan from 07 and 09 May 2019 being copied and pasted to the end of each report. Progress under each area for improvement was generally recorded as 'Inspection findings identified that this area for improvement had been addressed'. Inspectors identified that this was not consistently accurate.

Failure to establish and maintain an effective system for evaluating the quality of service provision has the potential to lead to poor outcomes for service users.

**Action required to comply with regulations:**

- The registered person must establish and maintain a robust system of quality assurance to ensure that they are satisfied with all aspects of service provision.
- The registered person must ensure that there is appropriate governance and management oversight of all associated action plans arising out of the quality assurance processes.
- The registered person must consider the current size and organisational structure of the agency registration. This must be considered in order to ensure the agency's ability to provide the appropriate level of rigor in their quality assurance processes. A written plan in relation to how this will be achieved must be submitted to RQIA.
- The registered person must ensure that the views of all stakeholder groups are taken into account and acted upon as part of the monthly quality monitoring process.
- The registered person must ensure that the monthly quality monitoring report contains an action plan. This must contain details of the measures to be taken to improve the quality and delivery of service provision.
- The registered person must ensure that the monthly quality monitoring report action plan is followed up and ensure that all identified actions have been concluded.
- The registered person must ensure that the monthly quality monitoring review takes account of the areas for improvement outlined within the RQIA report and Quality Improvement Plan.
- The registered person should ensure that the person identified to undertake the monthly quality monitoring process has the appropriate training, knowledge and skills to undertake the reviews.
- The registered person must ensure that the monthly quality monitoring reports are reviewed, verified and signed by the Chairperson of the Extra Care Board of Directors, before submission to RQIA on a monthly basis. These should be submitted to RQIA no later than 5 days after the last day of the month and until further notice

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