

Unannounced Care Inspection Report 6 March 2020



Extra Care

Type of Service: Domiciliary Care Agency

**Address: Lucas Exchange, 1 Orchard Way, Greystone Road, Antrim,
BT41 2RU**

Tel No: 02894482939

Inspectors: Aveen Donnelly and Kieran Murray

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

Extra Care is a domiciliary care agency providing services to all of the Health and Social Care Trust (HSCT) areas in Northern Ireland with exception of the Western HSCT area. Services provided include personal care, assistance with meals and respite sits (day and night).

The agency currently provides services to 591 individuals living in their own homes. The care and support is provided by 239 care staff.

3.0 Service details

Organisation/Registered Provider: Extra Care for Elderly People Ltd	Registered Manager: Mrs Sandra Selwood
Responsible Individual: Mr Brian Ronald Hutchinson	
Person in charge at the time of inspection: Deputy Manager	Date manager registered: 30 April 2019

4.0 Inspection summary

An unannounced inspection took place on 6 March 2020 from 09.30 to 18.30 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, The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017 and the Domiciliary Care Agencies Minimum Standards, 2011.

Information received by the Regulation and Quality Improvement Authority (RQIA) prior to this inspection reported that the agency had failed to provide services to one or more service users on a number of occasions; that the duration of calls were shorter than outlined in the service users' care plans; that adequate contingency measures were not in place to address staff shortages; and that care staff were not all registered with the Northern Ireland Social Care Council (NISCC).

Whilst it is not the remit of RQIA to investigate complaints made by or on behalf of individuals, as this is the responsibility of the registered providers and the commissioners of care, where RQIA is notified of a potential breach of regulations or minimum standards, it will review the matter and take appropriate action as required. In light of the concerns received by RQIA, an inspection was undertaken to examine the agency's staffing arrangements, the records pertaining to care delivery and the system in place for managing staff NISCC registrations.

On the day of inspection the agency was not found to be in compliance with the required regulations. The inspectors found evidence to substantiate the reported concerns regarding care delivery, staffing shortages, NISCC registrations and ineffective quality monitoring processes.

In accordance with RQIA's Enforcement Policy and Procedures, RQIA notified the registered individual of the intention to issue four notices of failure to comply with regulations. A meeting was held at RQIA offices on 20 March 2020 to discuss these matters.

The outcome of the meeting resulted in three failure to comply notices being issued.

One failure to comply notice related to the agency's failure to ensure the safety and well-being of service users and to safeguard them against abuse or neglect. The registered individual is also required to submit a written report of the audits undertaken to RQIA on a monthly basis.

The second failure to comply notice related to the lack of appropriate staff numbers to meet the needs of the service users. The registered individual is also required to submit a written plan to RQIA on a monthly basis outlining how the agency assesses and manages risk of service delivery, particularly in relation to risks associated with new referrals.

The third failure to comply notice related to the lack of robust monthly quality monitoring processes. The registered individual is required to 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. Additionally, the responsible individual is required to consider the current size and organisational structure of the agency registration, to ensure the agency's ability to provide the appropriate level of rigor in their quality assurance processes.

Given the assurances provided during the meeting, RQIA made the decision not to issue a failure to comply notice in respect of NISCC registrations. A decision was made to issue a Quality Improvement Plan (QIP) in this regard.

Other areas for improvement made in the QIP related to staff induction, complaints records and the availability of records.

Staff, service users and relatives spoken with by the inspectors provided feedback regarding the service received by the agency. Feedback is reflected within the report.

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	7	0

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mr Brian Hutchinson, responsible individual during the enforcement meeting at RQIA offices on 20 March 2020. The timescales for completion commence from the date of inspection.

Enforcement action resulted from the inspection. Three failure to comply notices were issued in relation to care delivery, staff provision and the quality monitoring processes.

The enforcement policies and procedures are available on the RQIA website.

[https://www.rqia.org.uk/who-we-are/corporate-documents-\(1\)/rqia-policies-and-procedures/](https://www.rqia.org.uk/who-we-are/corporate-documents-(1)/rqia-policies-and-procedures/)

Enforcement notices for registered establishments and agencies are published on RQIA's website at <https://www.rqia.org.uk/inspections/enforcement-activity/current-enforcement-activity>

4.2 Action/enforcement taken following the most recent care inspection dated 11 October 2019

No further actions were required to be taken following the most recent inspection on 11 October 2019.

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 reports
- all correspondence received by RQIA since the previous inspection

The following records were examined during the inspection:

- missed and late call records
- records of calls cancelled by relatives/others
- staffing rosters
- business continuity plan July 2019
- profiles relating to staff from other domiciliary care agencies
- records confirming registration of staff with the NISCC
- six service user records regarding care planning
- daily logs returned from the service users' homes
- complaints records
- monthly quality monitoring reports

During the inspection the inspectors spoke with two service users, twelve relatives and twelve staff. Comments are detailed within the report.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 11 October 2019

The most recent inspection of the agency was an unannounced care inspection. No areas for improvement were identified.

6.2 Inspection findings

Care delivery

Information received by the RQIA prior to this inspection reported that the agency had failed to provide services to one or more service users on a number of occasions; that the duration of calls were shorter than outlined in the service users' care plans; and that adequate contingency measures were not in place to address staff shortages.

Previous enforcement action had been taken with this agency in respect of the same concerns in May 2018. Whilst the inspectors acknowledged that the recorded numbers of missed and late calls had decreased significantly since previous enforcement action had been taken, 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 and late 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. The review of the care records identified three service users who had missing entries in their daily care records. This meant that the inspectors could not be assured that the calls had been undertaken and called the accuracy of the missed calls records into question.

Examination of six 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 relevant Trust. 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.

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. There were also two instances of staff not recording the end time of calls, therefore the inspectors could not assess the length of those calls.

Whilst the relatives spoken with generally commented positively in relation to the care provided, the inspectors evidenced the negative impact the missed and late calls had on service users and their representatives. The review of the records evidenced that personal care needs had not been met, which included being assisted to the toilet and being assisted to bed. Fourteen service users had missed their medicines and ten had missed their meals. The records reviewed identified one bedtime call had been so late the house was in darkness when the carer arrived. There was also another entry in the missed calls records describing how another service user had specific difficulty getting into bed. One relative spoken with described the heightened anxiety they experience due to staff being late, describing instances where they had not been given appropriate notice that the call would be cancelled.

Failure to provide care in keeping with the care plan places the safety and well-being of service users at risk of harm.

Following the inspection and in accordance with RQIA's Enforcement Policy and Procedures, the registered individual was advised of RQIA's intention to issue failure to comply notices in respect of Regulation 14 (a) and (b) of The Domiciliary Care Agencies Regulations (Northern Ireland) 2007. A meeting with the responsible individual and the registered manager was held at RQIA offices on 20 March 2020.

During this meeting the management response to the missed and short calls were discussed and the responsible individual was informed of RQIA's expectation that he must develop and implement a robust system for ensuring that service users receive their care calls in a timely manner.

A failure to comply notice was issued on 9 April 2020 in respect of Regulation 14 (a) and (b) and the registered individual is required to demonstrate compliance with this regulation on or before 9 July 2020. The registered individual is also required to submit a written report of the audits undertaken to RQIA on a monthly basis.

Staffing arrangements

During the inspection, the inspectors reviewed the agency's arrangements for ensuring that appropriate staffing numbers were in place to meet the service users' needs. 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. Given the spread of service users across many parts of Northern Ireland, the staffing rotas reviewed were from a number of different regions. This evidenced that staffing shortages were not isolated to a particular geographical area.

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 inspectors were informed that they had planned to provide this to the agency staff at the end of March 2020. An area for improvement has been made in this regard.

The review of six care records identified 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.

Failure to ensure appropriate staffing numbers places the safety and well-being of service users at risk of harm.

Following the inspection and in accordance with RQIA's Enforcement Policy and Procedures, the registered individual was advised of RQIA's intention to issue failure to comply notices in respect of Regulation 16 (1)(a). A meeting with the responsible individual and the registered manager was held at RQIA offices on 20 March 2020.

During this meeting the management response to the staffing shortages were discussed and the responsible individual was informed of RQIA's expectation that he must ensure that appropriate numbers of staff must be in place to ensure service users' needs are met.

A failure to comply notice was issued on 9 April 2020 in respect of Regulation 16 (1)(a) and the registered individual is required to demonstrate compliance with this regulation on or before 9 July 2020. The registered individual is also required to submit a written plan to RQIA on a monthly basis outlining 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.

NISCC registrations

Information received by RQIA prior to this inspection reported that not all care staff were registered with NISCC. The review of the records identified three care staff were not registered within the agreed timeframe of six months. The person in charge was instructed by the inspectors that the carer workers must not be permitted to work, until they are registered and assurance were provided by the person in charge that the identified staff would remain off rota until their registrations were completed. The review of the NISCC records identified that eight staff had left employment, having worked in Extra Care for two to six month periods. NISCC confirmed to the inspectors that applications had not been submitted for these staff. A ninth care worker's six month deadline was on 11 March 2020 and they were leaving the agency on 13 March 2020.

The review of records identified that a number of applications to NISCC had been submitted on the eve of the six month deadline. One care worker had submitted their application the night before the six month deadline. A second care worker had submitted an application 15 days before the six month deadline and a third care worker, whose six month deadline was in January 2020, had not submitted an application to NISCC. The inspectors were informed by the person in charge that a number of staff applications had been endorsed. A NISCC representative informed the inspectors that this was not the case as a number of applications were incomplete and therefore would not be at the stage for endorsing.

Failure to ensure that care staff are registered with NISCC has the potential to place the safety and well-being of service users at risk of harm.

Following the inspection and in accordance with RQIA's Enforcement Policy and Procedures, the registered individual was advised of RQIA's intention to issue failure to comply notices in respect of Regulation 13 (d)(e). A meeting with the responsible individual and the registered manager was held at RQIA offices on 20 March 2020.

During this meeting the management response to identified concerns were discussed. The responsible individual provided a full account of the actions the agency had taken and plan to take to ensure the required improvements are made to achieve full compliance with the regulations identified. Based on the assurance provided, a decision was taken by RQIA not to issue a failure to comply notice in this regard. An area for improvement has been made and will be followed up at the next inspection.

Governance and management arrangements

During the inspection the agency's arrangements for evaluating the quality of service provision were examined.

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). The inspectors identified that there had been no meaningful analysis of the missed and late calls records. 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.

Those consulted with 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. An area for improvement has been made in this regard.

The quality monitoring reports from January and February 2020 were not available for inspection. The person in charge agreed to forward these to the inspectors following the inspection. These were submitted to RQIA by email 12 March 2020 and were reviewed by the inspector. An area for improvement has been made in relation to the availability of records. The quality monitoring reports from October to December 2019 were reviewed. Whilst there was evidence that the monitoring officer had obtained feedback from service users, relatives and staff, there was limited evidence available regarding any follow up action taken, where concerns had been raised.

Concerns were also 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 7 and 9 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 effectively evaluate the provision of good quality services has the potential to place service users and staff at risk or harm.

Following the inspection and in accordance with RQIA's Enforcement Policy and Procedures, the registered individual was advised of RQIA's intention to issue failure to comply notices in respect of Regulation 23(1)(2)(3)(4)(5). A meeting with the responsible individual and the registered manager was held at RQIA offices on 20 March 2020.

During this meeting the management response to the quality monitoring arrangements were discussed and the responsible individual was informed of RQIA's expectation that there is appropriate governance and management oversight of all associated action plans arising out of the quality assurance processes.

The registered individual is required to 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. Additionally, the responsible individual is required to consider the current size and organisational structure of the agency registration, 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 no later than 9 July 2020.

Areas for improvement

Areas for improvement related to care delivery, staff induction, appropriate staffing numbers, NISCC registrations, complaints records, the availability of records and the quality monitoring processes.

	Regulations	Standards
Total number of areas for improvement	7	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Brian Hutchinson, responsible individual, as part of the inspection process. The timescales commence from the date of inspection.

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 The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007

<p>Area for improvement 1</p> <p>Ref: Regulation 14 (a)(b)</p> <p>Stated: First time</p> <p>To be completed by: 9 July 2020 (as outlined in failure to comply notice: FTC000091)</p>	<p>The registered person shall make suitable arrangements to ensure that the agency is conducted, and the prescribed services arranged by the agency, are provided—</p> <p>(a) so as to ensure the safety and well-being of service users;</p> <p>(b) so as to safeguard service users against abuse or neglect;</p> <p>The registered person must develop and implement a robust system for ensuring that service users receive their care calls in a timely manner.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>Ref: 6.2</p>
	<p>Response by registered person detailing the actions taken:</p> <p>Extra Care continues to monitor, and record missed and late calls on a weekly basis and discuss with managers.</p> <p>All calls between 30 and 60 minutes late have now been reclassified as missed. Communication with the Trust is frequent and open. Disciplinary processes allow for clear escalation if appropriate. While figures show these failures at a “low percentage” level Extra Care explicitly recognises the detrimental effect they can have in an individual’s life.</p> <p>A full schedule review will commence to further firm up run order and increase the element of “Rolling rota”.</p>
<p>Area for improvement 2</p> <p>Ref: Regulation 16 (1)(a)</p> <p>Stated: First time</p> <p>To be completed by: 9 July 2020 (as outlined in failure to comply</p>	<p>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—</p> <p>(a) there is at all times an appropriate number of suitably skilled and experienced persons employed for the purposes of the agency;</p> <p>The registered person must ensure that the agency assesses risk and can guarantee the safety, health and well-being of vulnerable</p>

<p>notice: FTC000092</p>	<p>service users.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>Ref: 6.2</p>
	<p>Response by registered person detailing the actions taken:</p> <p>Extra Care contracts are Northern Ireland wide and we maintain a small fleet of vehicles (8) to enhance responsiveness. We have supplied the regulator with contracted hours from the Trust for this period alongside “payroll” reports on hours paid to staff that show capacity match. Travel time is shown separate.</p> <p>In addition, Extra Care are currently recruiting for a rapid response team of 3 staff who can respond to fluctuating demand.</p> <p>Senior carers have one 8 hours shift a week that is not focused at direct care and may be called upon to meet additional demand.</p> <p>An office release office diary ensures that the equivalent of 5x8 hour shifts are available from team leaders at short notice release. The operational team leader establishment is one position more than is actually required for co-ordination duties to facilitate release.</p> <p>Alongside the recruitment of the rapid response team a review of terms and conditions was completed with the Board in February, the focus is to target increased retention. All staff will receive a 4% increase above the “minimum wage increase”. This will give a standard care contact rate of £9.20 and travel rate of £8.75.</p> <p>A refreshed recruitment plan is prepared with our external partners Rumourmill.</p> <p>Recruitment continues to be a core challenge</p>
<p>Area for improvement 3</p> <p>Ref: Regulation 23 (1)(2)(3)(4)(5)</p> <p>Stated: First time</p> <p>To be completed by: 9 July 2020 (as outlined in failure to comply notice: FTC000093</p>	<p>(1) The registered person shall establish and maintain a system for evaluating the quality of the services which the agency arranges to be provided.</p> <p>(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—</p> <p>(a) arranges the provision of good quality services for service users;</p> <p>(b) takes the views of service users and their representatives into account in deciding—</p> <p>(i) what services to offer to them, and</p> <p>(ii) the manner in which such services are to be provided; and</p>

(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.

(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.

(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.

(5) The system referred to in paragraph (1) shall provide for consultation with service users and their representatives.

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 by 9 July 2020.

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

	<p>monthly basis. These should be submitted to RQIA no later than 5 days after the last day of the month and until further notice</p> <p>Ref: 6.2</p>
	<p>Response by registered person detailing the actions taken: Extra Care needs to more fully receive feedback in this area regarding the current reporting.</p> <p>A clear Regulation/Quality monitoring process and protocol that “pulls together” the focus of the Quality managers work, checks by managers, checks by Operational Team Leaders during office release and the role Senior Carers will be prepared along with clear reporting lines and timetabled areas.</p>
<p>Area for improvement 4</p> <p>Ref: Regulation 16 (5)(a)</p> <p>Stated: First time</p> <p>To be completed by: Immediately, from the date of the inspection</p>	<p>The registered person shall ensure that staff are provided with an appropriately structured induction training lasting a minimum of three full working days.</p> <p>This refers to the induction of all staff regardless of how they have been recruited.</p> <p>Ref: 6.2</p>
	<p>Response by registered person detailing the actions taken: The Extra Care induction process maps that set out within the N.I.S.C.C. guidelines</p>
<p>Area for improvement 5</p> <p>Ref: Regulation 13 (d)(e)</p> <p>Stated: First time</p> <p>To be completed by: Immediately, from the date of the inspection</p>	<p>The registered person shall ensure that no domiciliary care worker is supplied by the agency unless-</p> <p>(d) full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 3.</p> <p>(e) subject to sub-paragraphs (f) and (g), he is registered in the relevant part of the register;</p> <p>Ref: 6.2</p>
	<p>Response by registered person detailing the actions taken: Extra Care only use domicilliary care workers supplied through R.Q.I.A. approved agencies.</p>
<p>Area for improvement 6</p> <p>Ref: Regulation 22 (6)</p> <p>Stated: First time</p> <p>To be completed by: Immediately, from the date of the inspection</p>	<p>The registered person shall ensure that every complaint made under the complaints procedure is fully investigated.</p> <p>Ref: 6.2</p> <p>Response by registered person detailing the actions taken: All complaints are captured on a comprehensive service failure database. Complaints are reviewed by the management team and investigated and notes made within the database along with any action points arising. Where appropriate, learning points are shared with the relevant staff to help prevent a recurrence.</p>

<p>Area for improvement 7</p> <p>Ref: Regulation 21 (1)(c)</p> <p>Stated: First time</p> <p>To be completed by: Immediately, from the date of the inspection</p>	<p>The registered person shall ensure that the records specified in Schedule 4 are maintained, and that they are— (c) at all times available for inspection at the agency premises by any person authorised by the Regulation and Improvement Authority.</p> <p>Ref: 6.2</p>
	<p>Response by registered person detailing the actions taken: All records are maintained and retained at the head office available for inspection.</p>

Please ensure this document is completed in full and returned via Web Portal



The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)