

# Unannounced Care Inspection Report 30 January 2018



## Extra Care

**Type of Service: Domiciliary Care Agency**  
**Address: Lucas Exchange, 1 Orchard Way, Greystone Road,  
Antrim, BT41 2RU**  
**Tel No: 02894482939**  
**Inspector: Jim McBride**  
**User Consultation officer (UCO): Clair Mc Connell**

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Assurance, Challenge and Improvement in Health and Social Care

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

Extra Care is a domiciliary care agency providing services to all Health and Social Care Trust (HSCT) areas in Northern Ireland with exception to the Western HSCT area. Services provided include personal care, assistance with meals and respite sits (day and night). The agency currently provides services to 689 individuals living in their own homes. Services are provided by 345 Staff.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Northern Health & Social Care Trust  <b>Responsible Individual:</b> Brian Hutchinson	<b>Registered Manager:</b> Mary Collins
<b>Person in charge at the time of inspection:</b> Mary Collins	<b>Date manager registered:</b> 4 November 2016.

### 4.0 Inspection summary

An unannounced inspection took place on 30 January 2018 from 09.00 to 13.00.

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

Evidence of good practice was found in relation to:

- Staff training
- Staff recruitment
- Quality monitoring
- Care planning

The inspector discussed with the manager some areas highlighted below from information received by RQIA in relation to:

- Care plans in people's homes
- Communication with the registered office
- Equipment in people homes

The inspector noted from eight care plans examined that care plans are placed in people's homes prior to service commencement, following the initial visit from a member of the agency's management team. Records examined were satisfactory.

Discussion with the manager and records in place indicate that staff can communicate with the office, as well as on call managers if required outside office hours. Records in place were satisfactory.

The care plans examined indicate clear risk assessments in place and if required equipment in people's homes prior to service commencement. Records in place were satisfactory.

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
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mary Collins, 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.

## 5.0 How we inspect

The findings of the inspection were provided to the registered manager at the conclusion of the inspection.

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

- Discussion with the registered manager
- Examination of records
- User consultation officer report (UCO)
- Evaluation and feedback

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- The previous RQIA inspection report
- Any correspondence received by RQIA since the previous inspection

As part of the inspection the User Consultation Officer (UCO) spoke with one service user and seven relatives, by telephone, on 1 and 5 February 2018 to obtain their views of the service. The service users spoken with have received assistance with the following:

- Personal care
- Meals
- Sitting service
- Management of medication

During the inspection the inspector spoke with the manager regarding the care and support provided by the agency, staff training and staff's general knowledge in respect of the agency.

The inspector would like to thank the agency staff for their warm welcome and full co-operation throughout the inspection process.

At the conclusion of the inspection a poster was provided to the manager to encourage staff to contact RQIA via Survey Monkey to provide their views on the quality of this service. At the time of issuing this report no staff views had been returned to RQIA.

A number of questionnaires were also left with the manager to distribute to service users seeking their views about the service. Five questionnaires were returned stating satisfaction with the service.

**Questionnaire Comments:**

- “I’m very pleased with the care Extra care provides.”
- “I know the carers are so pleasant and helpful in everything they do for me.”
- “I appreciate what’s done for me I could not do without them.”
- “They are all lovely girls and are so good at their job.”
- “Every one of my carers are like a breath of fresh air coming into my home.”

The following records were examined during the inspection:

- Monthly quality monitoring reports
- Staff meeting minutes
- A number of care and support plans
- Staff recruitment information
- Supervision policy (2017)
- Whistleblowing policy (2015)
- Safeguarding policy (2017)
- Confidentiality policy (2015)
- Risk management policy (2015)
- Complaints policy (2015)

Staff training records including:

- Safeguarding
- Health and safety
- Communication skills
- Equality and diversity
- Record keeping
- Complaints records
- Safeguarding policy and procedures
- Staff induction policy and procedures
- Service user guide (June 2016)
- Statement of purpose (June 2016)

The manager stated that the policies due for update will be completed in the early part of 2018.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 30 March 2017

The most recent inspection of the agency was an unannounced care inspection.

### 6.2 Review of areas for improvement from the last care inspection dated 30 March 2017

No areas for improvement were highlighted during the previous inspection.

## 6.3 Inspection findings

### 6.4 Is care safe?

**Avoiding and preventing harm to service users from the care, treatment and support that is intended to help them.**

The UCO was advised by all of the service users and relatives interviewed that there were no concerns regarding the safety of care being provided by Extra Care. New carers had been introduced to the service user by a regular member of staff; this was felt to be important both in terms of the service user's security and that the new carer had knowledge of the required care.

No issues regarding the carers' training were raised with the UCO by the service users or relatives; examples given included manual handling and management of medication. All of the service users and relatives interviewed confirmed that they could approach the carers and office staff if they had any concerns. Examples of some of the comments made by service users or their relatives are listed below:

- "Carers are very good."
- "We work together. They let me know if anything is wrong with XXX."
- "It has been a great help to us."

A number of policies and procedures were reviewed during the inspection. The inspector reviewed a number of recruitment records, which verified that the pre-employment information and documents had been obtained as required for each of the care workers. The documents reviewed were satisfactory.

An induction programme had been completed with each staff member and incorporated elements of the Northern Ireland Social Care Council (NISCC) induction standards.

Discussions with the manager indicated that the agency endeavours to ensure that there is at all times an appropriate number of skilled and experienced persons available to meet the assessed needs of the individual service users.

All of the staff members' recruitment records reviewed confirmed that they were or had applied to be registered with The Northern Ireland Social Care Council (NISCC) in line with NISCC timeframes and guidelines. The agency's manager confirmed the majority of staff are registered with (NISCC), with the remaining staff moving towards registration.

The agency's policies and procedures in relation to safeguarding adults and whistleblowing were reviewed. The 'Safeguarding' policy and procedure provided information and guidance in accordance with the required standards. The draft policy has been updated in line with the Department of Health, Social Services and Public Safety Northern Ireland (DHSSPSNI) updated adult safeguarding guidance issued in July 2015 ('Adult Safeguarding Prevention and Protection in (Partnership)'). The agency has highlighted the identification and role of an Adult Safeguarding Champion.

Staff training records viewed for 2016-17 confirmed all care staff had completed the required mandatory update training programme. The training plan for 2016-17 was viewed and contained each of the required mandatory training subject areas. Discussion during inspection with the manager confirmed that the quality of training offered was satisfactory.

Records reviewed for training evidenced mandatory training, quality monitoring and supervision as being compliant with agency policy timeframes. Review of records management arrangements within the agency supported appropriate storage and data protection measures were being maintained. The agency's registered premises include offices suitable for the operation of the agency in line with the Statement of Purpose (2016).

### Areas of good practice

There were examples of good practice identified throughout the inspection in relation to: Staff recruitment, induction, training, supervision and appraisal; adult safeguarding and management of risks.

Five returned questionnaires from service users indicated that safe service meant:

- There are enough staff to help you
- You feel protected and free from harm
- You can talk to staff if you have concerns

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0



## 6.5 Is care effective?

**The right care, at the right time in the right place with the best outcome.**

The UCO was informed by the majority of the service users and relatives interviewed that there were no concerns regarding the carers' timekeeping or that care has been rushed. The service users and relatives interviewed also advised that they had not experienced any missed calls from the agency. Service users are usually introduced to new carers by a regular member of staff.

No issues regarding communication between the service users, relatives and staff from Extra Care were raised with the UCO. The service users and relatives advised that home visits and phone calls have taken place to obtain their views on the service; however no one was able to confirm that they had received a questionnaire seeking their views.

Examples of some of the comments made by service users or their relatives are listed below:

- "Would be lost without them."
- "Trying to be independent but the carers help me if necessary."
- "Never needed to ring the office."

Service user records viewed in the agency office included referral information received from the HSC Trust. The referrals detailed the services being commissioned and relevant risk assessments. The agency individual service user care plans and risk assessments completed by staff during their initial service visits contained evidence that service users' and/or relatives' views had been obtained and where possible, incorporated.

A sample of service user files confirmed that the agency's management had carried out care review meetings with service users/representatives to ensure service user needs were being met. The manager explained that the agency attend the HSCT arranged care review meetings with service users/representatives.

The inspector noted some of the comments made by service users during their annual review:

- "I appreciate the support."
- "Happy with the service and the additional calls."
- "I'm happy with the girls, they are all so good."

Service user files also contained evidence of communications between the agency and HSCT key workers; where changing needs were identified and reassessments resulted in amended care plans. The manager confirmed that the agency is provided with details of the care planned for each new service user or with changes to existing service users' care plans. The manager demonstrated an awareness of the importance of accurate, timely record keeping and reporting procedure if any changes to service users' needs are identified.



The inspector reviewed a number of staff meeting records facilitated by the agency. Staff are required to sign the minutes of meetings to indicate that they have read and understood the matters discussed and the information provided.

**Some of the areas discussed during meetings:**

- NISCC
- PPE
- Missed calls
- Run orders
- Report books

**Areas of good practice**

There were examples of good practice identified throughout the inspection in relation to communication between service users, agency staff and other relevant stakeholders and the monitoring of the quality of the services provided.

Five returned questionnaires from service users indicated that effective service meant:

- You get the right care, at the right time in the right place
- The staff knew their care needs
- You are kept aware of your care plans
- Your care meets your expectations

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

**6.6 Is care compassionate?**

**Service users are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.**

All of the service users and relatives spoken to by the UCO felt that care was compassionate. The service users and relatives advised that carers treat them with dignity and respect, and care has not been provided in a rushed manner. Service users, as far as possible, are given their choice in regards to meals and personal care.

Views of service users and relatives have been sought through home visits and phone calls to ensure satisfaction with the care that has been provided by Extra Care. Examples of some of the comments made by service users or their relatives are listed below:

- “Couldn’t be nicer or more helpful.”
- “XXX looks forward to them coming.”
- Very helpful and caring.”

The agency monitors the quality of service provided to service users on an ongoing basis through home visits, telephone contact and through the annual quality survey. Records reviewed during inspection support the ongoing review of service users' needs. Comments from quality monitoring of service user contacts alongside monthly quality reports and annual quality surveys evidenced positive feedback from service users and their family members.

Observation of staff practice carried out within service users' homes on an ongoing basis was confirmed during inspection through records viewed in the agency office and discussions with the manager. Records reviewed by the inspector highlighted no concerns regarding staff practice during spot checks/monitoring visits.

**Areas of good practice:**

There were examples of good practice identified throughout the inspection in relation to the provision of individualised compassionate care and the effective engagement of service users.

Five returned questionnaires from service users indicated that compassionate care meant:

- Staff treat you with kindness
- Staff ensure you are respected and that your privacy and dignity is maintained
- Staff inform you about your care
- Staff support you to make decisions about your care

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

**6.7 Is the service well led?**

**Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.**

All of the service users and relatives interviewed confirmed that they are aware of whom they should contact if they have any concerns regarding the service. No complaints had been made regarding the service or management of the agency.

The RQIA registration certificate was up to date and displayed appropriately. Under the direction of the manager, Mary Collins, a team of 345 care workers provide domiciliary care and support to 689 people living in their own homes.

Review of the statement of purpose and discussion with the manager evidenced that there was a clear organisational structure within the agency. The manager was able to describe staff roles and responsibilities and was clear regarding reporting responsibilities in line with the agency procedures. The Statement of Purpose (2016) was reviewed and found to be

appropriately detailed regarding the nature and range of services provided. It contained all information in line with Regulations and Standards. The agency's complaints information viewed within the service user guide was found to be appropriately detailed, including the contact information of independent advocacy services.

It was identified from records viewed that the agency has received eight complaints since the previous inspection which were resolved to the satisfaction of the complainant.

The inspector reviewed a number of monthly quality monitoring reports. The reports evidenced that the registered person monitors the quality of service provided in accordance with minimum standards.

The inspector noted the following comments from service users, relatives, staff and the HSC Trust representatives:

**Service users:**

- "Warmth and professionalism from the staff."
- "Thoughtful, pleasant and professional staff."

**Staff:**

- "Staff go the extra mile to ensure support exceeds expectations."

**Relatives:**

- "Service users are informed of staff changes."
- "I'm positive about the standard of care."

**HSC Trust:**

- "Positive feedback in relation to safeguarding and the quality of care."
- "Good support offered by Extra care."
- "They deliver a person centred service."

The registered provider has worked effectively with RQIA and maintained their roles and responsibilities in accordance with legislation. The Statement of Purpose and Service User Guide are kept under review, and have been revised when necessary. A recent review of the documents was completed by the agency in (2016). The registered person has shown an ability to respond appropriately to regulatory matters and led the organisation in maintaining compliance with Regulations and Minimum Standards.

**Areas of good practice**

There were examples of good practice identified throughout the inspection in relation to the agency's management and governance arrangements, management of complaints, incidents, quality monitoring and improvement.

Five returned questionnaires from service users indicated that a well led service meant:

- You always know who is in charge at any time
- You feel the service is well managed
- Your views are sought about your care and the quality of the service
- You know how to make a complaint

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	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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