



The Regulation and
Quality Improvement
Authority

Peacehaven Care Services Ltd,
Domiciliary Care Agency
RQIA ID: 10963
34 - 38 Newry Street
Rathfriland
BT34 5PY

Inspector: Caroline Rix

User Consultation Officer: Clair McConnell

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Inspection ID: IN021749

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**Unannounced Care Inspection
of
Peacehaven Care Services Ltd,
Domiciliary Care Agency**

23 February 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced care inspection took place on 23 February 2016 from 10.00 to 16.00 hours. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. 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

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Peacehaven Care Services Ltd/Mary O'Hanlon	Registered Manager: Mary O'Hanlon
Person in charge of the agency at the time of Inspection: Mary O'Hanlon	Date Manager Registered: 22 June 2009
Number of service users in receipt of a service on the day of Inspection: 128	

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following themes have been met:

Theme 1: The views of service users and their carers/representatives shape the quality of services provided by the agency.

Theme 2: Management systems and arrangements are in place that support and promote the quality of care services.

4. Methods/Process

Prior to inspection the following records were analysed:

- Previous inspection report
- Record of notifiable events for 2015/2016
- User Consultation Officer (UCO) report.

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

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

Prior to the inspection the User Consultation Officer (UCO) spoke with three service users and two relatives by telephone on 12 January 2016 to obtain their views of the service. The service users interviewed receive a sitting service and assistance with the personal care.

On the day of inspection the inspector met with three care staff to discuss their views regarding care provided within the agency, staff training and staffs general knowledge in respect of the theme areas reviewed. Staff feedback is contained within the body of this report. The inspector gave the registered person/manager ten questionnaires to distribute to randomly selected staff members for their completion, asking for their views regarding the service, and return to RQIA. It was disappointing to find that no staff questionnaires were received following the inspection.

The following records were examined during the inspection:

- Four service user records in respect of referral, assessment, care plan and review
- Information and agency initial visit information regarding service user guide and agreements
- Four service user records in respect of the agency quality monitoring via face to face contact and trust review process
- Three staff meeting agendas and minutes for December 2015 to February 2016
- Four staff quality monitoring records
- Staff duty rota for February 2016
- Staff Handbook
- Service user compliments received during 2015/2016
- Three complaints records
- Monthly monitoring reports for November 2015 to January 2016
- Annual quality report
- Procedure for management of missed calls
- Management staff daily contact log records/on call logs for November 2015 to February 2016
- On call rota
- Three communication records with trust professionals
- Duty file

- One incident reportable to RQIA in 2015/2016.

5. The Inspection

Peacehaven Care Services provides services to people in their own homes in the South Down area referred by the Southern Health and Social Care Trust and South Eastern HSC Trust. Services are provided to older people, those with physical disability, learning disability and mental health care needs. These services include personal care, social support and practical care along with day/night sits. The agency currently provides care to 128 service users living in their own homes and employs 60 staff. A small number of service users are privately funded.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an unannounced care inspection dated 6 and 8 August 2014. No requirements or recommendations resulted from the previous primary announced inspection.

5.2 Theme 1 - The views of service users and their carers/representatives shape the quality of services provided by the agency.

Is Care Safe?

Service user referral information received from the HSC Trust care managers contained information regarding service user and/or representatives. The referrals detailed the services being commissioned and relevant risk assessments recorded on DC1 forms. The agency care plans and risk assessments completed during their initial visits contained evidence that service users and/or representative's views had been obtained and incorporated.

The UCO was advised that new carers are usually 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 the carer's knowledge of the required care.

Is Care Effective?

The UCO was informed by all of the people interviewed that they had not made any complaints regarding the service, however they are aware of whom they should contact if any issues arise.

The complaints log was viewed by the inspector, with three received from March 2015 to February 2016. Each of the three complaints records reviewed evidenced each had been appropriately managed. Where possible, the complaints had been resolved to the service user/relatives satisfaction, with one investigation received February 2016 not yet concluded.

The compliments records reviewed during inspection contained extremely positive feedback regarding the care provided and this had been shared with staff at team meetings and individually.

The UCO was informed that management visits and phone calls are taking place on a regular basis to discuss the service user's care, as well as observation of staff practice. However none of the people interviewed were able to confirm that they had received questionnaires from the agency to obtain their views of the service.

Records evidenced that questionnaires are sent out by the agency to obtain the views of the service from service users or their representatives. Records of the 2015 Annual Quality Report was viewed which contained feedback from service users and/or representatives and planned areas for improvement. On the day of inspection the agency were preparing the postage to each of their service users with questionnaires/SAE's along with a copy of their full Annual Report dated December 2015.

Records viewed in the agency office confirmed that direct observation of staff practice was carried out within service user's homes on a regular basis, most recently during February 2016. No staff practise issue were identified during these spot checks. The monitoring visit records noted positive comments received from service users/relatives regarding staff.

Is Care Compassionate?

The people interviewed by the UCO raised no concerns regarding the quality of care being provided by the carers from Peacehaven Care Services. Great importance was placed on the benefit of care being provided by consistent carers as it enables a good relationship to develop; this is accommodated by the agency as far as possible.

Three staff members spoken to on the day of inspection emphasised the importance of dignity and respect when working with service users.

No concerns were raised regarding the carers treating the service users with dignity or respect, or that care is being rushed. Examples of some of the comments made by service users or their relatives are listed below:

- "Great service. More than happy."
- "Couldn't do without them."
- "No complaints about any of them."
- "Nothing to complain about."

Service users or their relatives informed the UCO that they felt that the carers are appropriately trained and knowledgeable regarding working with service users with limited mobility.

It was good to note that service users or their representatives are included in decision making regarding their care plan, either at service commencement or during reviews. They are also given the opportunity to comment on the quality of service either during home visits or telephone calls from the agency.

Service user records viewed in the agency office found that service users' feedback had been recorded during care review meetings in service users' homes, with details of requests being implemented, where possible, in liaison with the trust care manager.

Areas for Improvement

No areas for improvement were identified regarding this theme.

Number of Requirements:	0	Number of Recommendations:	0
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5.3 Theme 2 – Management systems and arrangements are in place that support and promote the quality of care services.

Is Care Safe?

A range of management systems and processes were reviewed in operation within the agency to ensure communication channels with service users and their relatives are maintained. These included daily contacts, on call arrangements and management of missed and/or late calls. The agency has procedures for management of 'Missed Calls' and 'On call' which were reviewed during inspection and found to provide staff with clear guidance. The agency's records verified all staff had been provided with these procedures as part of their staff induction programme. Staff meeting minutes evidenced that service user changing needs had been discussed along with their on call arrangements.

Staff interviewed on the inspection day described the positive value and support provided from the availability of the on call arrangements.

Is Care Effective?

The UCO was informed by the service users and relatives interviewed that there were no concerns regarding the carer's timekeeping and they are usually contacted by the agency if their carer has been significantly delayed. The people interviewed also advised that they had not experienced any missed calls from the agency. The registered person/manager confirmed that no service user had experienced a missed call by carers, however, on occasions a call had not been carried out when the service user was not at home but the agency had not been informed.

Staff interviewed on the day of inspection had a clear understanding of their role and responsibility in these situations and described their process if/when are unable to access a planned service users call.

The records evidenced an effective process was in place to reduce the risk of any service user not receiving their planned call and where staff had been significantly delayed, this was communicated to the service users representative immediately. Communications with the referring HSC Trust had taken place via telephone calls and emails. The on call log and changes log viewed for three dates in February 2016 found matters were being communicated and appropriate follow up actions taken by senior staff.

There were records of monthly monitoring available on the day of inspection which evidenced working practices are being systematically reviewed with service users/representatives, other professionals and staff views being obtained.

Review of the February 2016 staff rota for two staff groups within two service areas reflected a process for allocating the staff numbers to service user calls; however the inspector was unable to verify the effectiveness of this rostering system given that the inspection day only presents an overview of the system. Staff interviewed on the day of inspection confirmed that their rota was achievable and allocations had been made with staff input.

Is Care Compassionate?

No concerns were raised regarding the carers treating the service users with dignity or respect, or that care is being rushed.

Staff spoken with on the inspection day demonstrated clear knowledge regarding communication and reporting processes where calls were delayed. They discussed communicating such matters with service users and with the office management and indicated that this situation rarely happened.

Areas for Improvement

No areas for improvement were identified regarding this theme.

Number of Requirements:	0	Number of Recommendations:	0
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Additional Areas Examined

The inspector reviewed the agency's RQIA notification of incidents log, with one report received during the past year. Review of this incident report evidenced that it had been recorded and report to RQIA and the referring HSC Trust within the required timeframes. Records confirmed that appropriate action had been taken and the matter has been concluded.

The registered person/manager discussed the value of having completed the QCF Level 5 Health and Social Care course in July 2015 when reviewing her service, and this is to be commended.

6. No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Mary O'Hanlon	Date Completed	13.4.16
Registered Person	Mary O'Hanlon	Date Approved	13.4.16
RQIA Inspector Assessing Response	Caroline Rix	Date Approved	10/05/16

Please provide any additional comments or observations you may wish to make below:

Please complete in full and returned to agencies.team@rqia.org.uk from the authorised email address

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.