

# Unannounced Care Inspection Report 30 January 2017



## Peacehaven Care Services Ltd, Domiciliary Care Agency

**Type of Service: Domiciliary Care Agency**  
**Address: 34 - 38 Newry Street, Rathfriland BT34 5PY**  
**Tel No: 02840638855**  
**Inspector: Caroline Rix**

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Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An unannounced inspection of Peacehaven Care Services Ltd, Domiciliary Care Agency took place on 30 January 2017 from 09.45 to 13.00 hours.

Information received by the Regulation and Quality Improvement Authority (RQIA) prior to this inspection reported that domiciliary care workers have not received updated training in the area of service user moving and handling, and failure by management to investigate concerns raised by staff about poor practice by colleagues.

In light of the concerning information received by RQIA, the inspection sought to examine the agency's staff training and monitoring processes, and review incident reports and complaints records.

On the day of inspection the agency was found to be in compliance with the required regulations. The inspector did not find any evidence to substantiate the reported concerns regarding lack of domiciliary care worker refresher training or the management of incidents or complaints.

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

## 1.1 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Mary O'Hanlon, registered person/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.

## 1.2 Actions/enforcement taken following the most recent care inspection

There were no further actions required to be taken following the most recent inspection.

## 2.0 Service details

<b>Registered organisation/registered person:</b> Peacehaven Care Services Ltd/Mary Helen O'Hanlon	<b>Registered manager:</b> Mary Helen O'Hanlon
<b>Person in charge of the home at the time of inspection:</b> Mary Helen O'Hanlon	<b>Date manager registered:</b> 22 June 2009

### 3.0 Methods/processes

Prior to inspection the inspector analysed the following records:

- Previous inspection report of 31 October 2016
- Record of notifiable events for 2016/2017
- Intelligence received from our duty call system

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

- Discussion with the registered person/manager
- Discussion with the training officer
- Examination of records
- Evaluation and feedback

The inspector met with the registered person/manager, Mary O'Hanlon, and examined the following records during the inspection:

- Staff training schedule and records
- Two staff updated training content/competency records
- Staff supervision records
- Complaints records
- Incident reports

### 4.0 The inspection

#### 4.1 Inspection Findings

The agency currently provides services to 110 service users living in their own homes.

The inspector discussed the training programme with the agency training officer, who provided details of the various methods used to ensure staff have the necessary skills and competence to fulfil their role.

The training officer stated that staff refresher training on a variety of subjects takes place 18 monthly for all care workers, and includes moving and handling, safeguarding adults and whistleblowing. Training records viewed for 2016/17 on the agency's computerised system confirmed all care workers had completed the required mandatory update training programme. Details of training during 2016/17 were reviewed on the agency training plan/scheduling tool and verified in two care worker files examined during inspection. The agency's scheduling tool clearly highlights when refresher/update training is due for all care workers on each mandatory training subject area, along with other training relevant to service users' care needs.

A competency assessment tool is in place on completion of each training session for all subject areas including moving and handling, safeguarding adults and whistleblowing. The records were reviewed within two care worker files which confirmed appropriate post training assessments had been completed following their individual refresher training in August and October 2016.

The content of the moving and handling training was examined, with records viewed to verify that the theory, assessment and practical training had been included within the training sessions, and each domiciliary care worker had satisfactorily completed this training.

The inspector found evidence that observations of staff practice had been carried out within service users' homes on a regular basis. From the records viewed within a sample of two domiciliary care worker files, and discussion with the registered person/manager, no staff practice issues had been identified during spot checks and monitoring visits.

The complaints log was viewed for the period 1 April 2015 to inspection date 30 January 2017 with a range of complaints recorded. The inspector reviewed records of the two complaints received since the agency previous inspection 31 October 2016, which supported appropriate management, review and resolution of each complaint. The registered person/manager confirmed that no whistleblowing reports had been received by herself or any agency supervisors.

Discussion with the registered person/manager and a review of the records regarding notification of events found that systems were in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately. One incident report had been received during the past year; during the previous inspection on 31 October 2016 the records relating to this incident had been reviewed and confirmed that appropriate action had been taken. The registered person/manager confirmed that the HSC Trust investigation into this matter has not yet been concluded.

The registered person/manager explained that due to the current senior staffing team not at full capacity because of staff illness, the agency had reviewed their services. The registered person/manager confirmed that, in liaison with the commissioning HSC Trust, a reduced number of people are now receiving their services.

**Areas for improvement**

No areas for improvement were identified during the inspection.

<b>Number of requirements:</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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**5.0 Quality improvement plan**

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards.



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