



RQIA Provider Guidance 2018-19

Voluntary Adoption Agencies

What We Do

The Regulation and Quality Improvement Authority (RQIA) is the independent body that regulates and inspects the quality and availability of Northern Ireland's health and social care (HSC) services. We were established in 2005 under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to drive improvements for everyone using health and social care services.

Through our programme of work we provide assurance about the quality of care; challenge poor practice; promote improvement; safeguard the rights of service users; and inform the public through the publication of our reports. RQIA has three main areas of work:

- We register and inspect a wide range of independent and statutory health and social care services.
- We work to assure the quality of services provided by the HSC Board, HSC trusts and agencies - through our programme of reviews.
- We undertake a range of responsibilities for people with mental ill health and those with a learning disability.

We inspect and report on the following four domains:

- Is care safe?
- Is care effective?
- Is care compassionate?
- Is the service well led?

RQIA registers and inspects a wide range of health and social care services. These include: nursing, residential care, and children's homes; domiciliary care agencies; day care settings/centres; independent health care; nursing agencies; independent medical agencies; residential family centres; adult placement agencies; voluntary adoption agencies, school boarding departments and young adult supported accommodation (inspected only).

The Four Domains



How We Will Inspect

We will inspect every voluntary adoption agency on a three yearly basis. This will be an announced inspection.

During our inspections we will inspect and report on the following four domains:

- Is care safe?
- Is care effective?
- Is care compassionate?
- Is the service well led?

When we inspect a voluntary adoption agency, we aim to:

- Seek the views of the service users, where appropriate
- Talk to the chief executive and other key staff on the day of the inspection
- Examine a range of records including incidents, complaints and policies related to the agency
- Provide feedback on the day of the inspection to the chief executive
- Provide a report of our inspection findings and outline any areas for quality improvement where failings in compliance with regulations and/or standards are identified.

Our inspections are underpinned by:

- The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Voluntary Adoption Agencies Regulations (Northern Ireland) 2010
- The Adoption Agencies Regulations (Northern Ireland) 1989
- The Adoption (Northern Ireland) Order 1987

What We Look For When We Inspect

To help us to report on whether the care is safe, effective and compassionate and whether the service is well led, we will look for evidence against the following indicators. The evidence listed for each indicator provides examples of what may be reviewed and should not be considered exhaustive.

Is Care Safe?

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

Indicator S1

There are, at all times, suitably qualified, competent and experienced persons working in the service in such numbers as are appropriate for the health and welfare of service users.

Examples of Evidence

Staffing

- A training programme is in operation which includes safeguarding and relevant issues such as bullying and child sexual exploitation
- There are robust human resource policies and procedures in place to ensure:
- the deployment of staff who have requisite skills and experience and qualities to undertake their duties

Recruitment and Selection

- Records are available and up to date in relation to staff employed by the Agency.

Indicator S2

The service promotes and makes proper provision for the welfare, care and protection of service users.

Examples of Evidence**Safeguarding**

- Staff are knowledgeable about and have a good understanding of safeguarding and bullying
- All suspected, alleged or actual incidents of abuse are fully and promptly referred to the appropriate agencies for investigation in accordance with written procedures and records maintained
- Co-operating to Safeguard Children and Young People in Northern Ireland, 2016 and the Area Child Protection Committee (2005) Regional Child Protection Policies and Procedures are and there is a child protection policy in place
- There are written policies and procedures in place in respect of safeguarding, allegations of misconduct, incidents, whistle blowing and the reporting/ management of serious adverse incidents. These policies are included in the induction/training manual for staff
- Investigations into allegations or suspicions of harm are handled fairly, consistently and quickly in a way which safeguards the service users and the person making the allegation whilst the same time appropriately supporting the staff member who is the subject of the allegation
- Written records are created and available in respect of any investigation including outcomes and subsequent action taken

Indicator S3

There are systems in place to ensure that unnecessary risks to the health, welfare or safety of service users are identified, managed and where possible eliminated.

Examples of Evidence

- Safeguarding

Indicator S4

The premises and grounds are safe, well maintained and suitable for their stated purpose.

Examples of Evidence**Environment**

- There are adequate security arrangements at the premises, with specific reference to the storage of records

Is Care Effective?

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

Indicator E1

The service responds appropriately to and meets the assessed needs of the people who use the service.

Examples of Evidence

Records

- Up to date records are maintained
- Recordings are in line with professional codes of practice

Indicator E2

There are arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users at appropriate intervals.

Examples of Evidence

- Supervision and appraisal records are up to date and available
- Staff training records are up to date and available
- Audits and monitoring reports are available

Indicator E3

There are robust systems in place to promote effective communication between service users, staff and other key stakeholders.

Examples of Evidence

- Staff meetings are held on a regular basis, issues arising are discussed and minutes are retained
- Learning from complaints/incidents/near misses is effectively disseminated to staff

Is Care Compassionate?

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

Indicator C1

There is a culture/ethos that supports the values of dignity and respect, independence, rights, equality and diversity, choice and consent of service users.

Examples of Evidence

- There is evidence of staff awareness of children's rights

Indicator C2

Service users are listened to, valued and communicated with, in an appropriate manner.

Examples of Evidence

- There are arrangements for providing information in alternative formats/interpreter services, if applicable

Indicator C3

There are systems in place to ensure that the views and opinions of service users, and or their representatives, are sought and taken into account in all matters affecting them.

Examples of Evidence

- The RQIA questionnaire responses support the view that compassionate care is in place

Is the Service Well Led?

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

Indicator L1

There are management and governance systems in place to meet the needs of service users.

Examples of Evidence

Governance Arrangements

There are governance arrangements in place such as:

- clearly identified lines of professional accountability
- effective systems to monitor and report in relation to safeguarding
- Policies and procedures in place to protect service users and to safeguard their rights and welfare in line with regional child protection procedures
- effective systems for identifying any escalation in risk

Complaints

- There is a complaints policy and procedure in place
- Records are kept of all complaints and these include details of all communications with complainants, the result of any investigation, the outcome and the action taken
- Information from complaints is used to improve the quality of care at within the boarding department
- Staff know how to receive and respond to complaints
- Arrangements are in place to audit complaints to identify trends

Incidents

- There is incident policy and procedure in place
- Incidents are effectively documented and reported to the relevant authority

Indicator L2

There are management and governance systems in place that drive quality improvement.

Examples of Evidence

Quality Improvement

- There is evidence of a systematic approach the review within the agency, in order to make changes that improve quality, and add benefit to the service
- The Chief Executive encourages continuous improvement within the service

Indicator L3

There is a clear organisational structure and all staff are aware of their roles, responsibility and accountability within the overall structure.

Examples of Evidence

- There is a defined organisational and management structure that identifies the lines of accountability, specific roles and details responsibilities within all areas of the agency
- Staff are aware of their roles and responsibilities and actions to be taken should they have a concern about the welfare or safety of a service user

Indicator L4

The registered person/s operates the service in accordance with the regulatory framework.

Examples of Evidence

- The Chief Executive or their representative responds to regulatory matters (e.g. reports and quality improvement plans)
- There are clear and documented systems in place for the management of records in accordance with regulation

Indicator L5

There are effective working relationships with internal and external stakeholders.

Examples of Evidence

- There is a whistleblowing policy and procedure and staff are aware of this
- Arrangements are in place for staff to access senior management
- There are arrangements in place to support staff (e.g. staff meetings, appraisal and supervision)
- Discussion with staff confirm that there are good working relationships and that senior staff are responsive to suggestions/concerns

Inspection Reports

Our inspection reports will reflect the findings from the inspection. Where it is appropriate, a Quality Improvement Plan (QIP) will detail those areas requiring improvement to ensure the service is compliant with the relevant regulations and standards.

It should be noted that inspection reports should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in a service. The findings reported on are those which came to the attention of RQIA during the course of the inspection. The findings contained within inspection reports do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.



The Regulation and
Quality Improvement
Authority

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