



The **Regulation** and
Quality Improvement
Authority

Leonard Cheshire Disability
RQIA ID: 020044
The Maples
Chief Street
Belfast
Antrim
BT13 3JR

Inspector: Jim McBride
Inspection ID: IN021673

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**Announced Care Inspection
of
Leonard Cheshire Disability
9 April 2015**

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

Summary of Inspection

An announced care inspection took place on the 9 April 2015 from 09:00 to 13:30. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. There was no Quality Improvement Plan (QIP) as a result of the inspection. This inspection was underpinned by the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

I.1 Actions/Enforcement Taken Following the Last Inspection

No requirements or recommendations were issued during the previous inspection of the 28 August 2014.

I.2 Actions/Enforcement Resulting from this Inspection

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

I.3 Inspection Outcome

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

2. Service Details

Registered Organisation/Registered Person: Leonard Cheshire Disability	Registered Manager: Mrs Vicki McQuoid
Person in Charge of the Agency at the Time of Inspection: Mrs Vicki McQuoid	Date Registered: 24 October 2014
Number of service users in receipt of a service on the day of Inspection: 12	

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:

Themes:

Theme 1 - Staffing arrangements

Theme 2 - Service user Involvement.

4. Methods/Process

Prior to inspection the following records were analysed:

- Previous inspection report
- Incidents.

During the inspection the inspector met with two service users, five care staff and two service users' relatives. The inspector spoke to one HSC professional following the inspection.

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

- Discussion with the registered manager
- Examination of records
- Consultation with stakeholders/staff
- File audit
- Evaluation and feedback.

The following records were examined during the inspection:

- Five care and support plans
- HSC Trust assessment of needs and risk assessments
- Care reviews, other methods of recording/evaluation
- Monthly quality monitoring reports for January 2015, February 2015 and March 2015
- Tenants' meetings October 2014, February 2015 and April 2015,
- Minutes of staff meetings October 2014, November 2014, February 2015 and March 2015

- Staff training records examined:
Human rights
Safeguarding
Behaviour Awareness
Customer focus
- Complaints records
- Recruitment policy/ process was reviewed on the 20 November by Leonard Cheshire Disability in 2014
- Pre-employment checks
- Job descriptions
- Terms and conditions of employment
- Staff register/ information
- Agency's rota information.

Four staff questionnaires were completed by staff during the inspection and two were returned post inspection. These indicated the following:

- Staff stated that the agency's induction process prepared them for their role
- The induction process was rated as good or excellent.
- Staff stated that they had received human rights training specific to the service users that they provide care and support to.
- Staff stated that the whistle blowing policy was accessible to them.
- Staff stated that service users views and experiences are taken into consideration within the service.
- Staff rated the agency's service users involvement process as good.
- Staff stated that tenants' meetings are in place.

5. The Inspection

The Maples is a Supported living type domiciliary care agency. The agency provides care and support for adults with physical/sensory disabilities.

The purpose of The Maples is to provide disabled people with care and support within their accommodation which is jointly managed by the agency and the housing provider. Staff promote empowerment and encourage service users to exercise choice and control over their lives, promoting their rights and supporting them to fulfil their full potential.

The agency provides care and housing support to up to 17 service users, who live in the main building which is divided into two floors.

The management of the agency is under the direction of Mrs Vicki McQuoid. At the time of the inspection there were 12 individuals receiving a service from 22 staff.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of Leonard Cheshire Disability, The Maples was a pre-registration care inspection dated 28 August 2014. The completed Quality Improvement Plan was returned and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the last Care Inspection

There were no previous requirements or recommendations.

5.3 Theme 1: Staffing arrangements

Is Care Safe?

The agency has in place a recruitment policy; this was updated on the 20 November 2014.

The registered manager confirmed that there is a mechanism in place to ensure appropriate pre- employment checks are completed and satisfactory records maintained were examined by the inspector. The agency maintains an alphabetical index of all domiciliary care workers supplied or available for supply for the agency.

The agency has a structured induction programme lasting at least three days. This was confirmed by the staff interviewed. The agency maintains a record of staff induction provided to staff; and included details of the information provided during the induction period.

The agency provides all staff with a handbook. The agency has a procedure in place for induction of staff for short notice/ emergency arrangements. The agency has in place a procedure for verifying the identity of all staff prior to their supply. The agency maintains a record of all staff supervision and appraisal. The agency could demonstrate that supervision and appraisal is provided in accordance with their policy and procedure. It should be noted that as per the agency's policy on recruitment one service user was involved in the staff interview process. The inspector met with the service user who stated " It's good to know what staff we are getting" and "I enjoy the staff interviews".

Staff comments:

"I had a comprehensive induction".

Relatives' comments:

"Very good staff".

Service user comments:

"I get well supported by staff"
"Staff are always available to me"
"My views are taken into account".

HSC Trust Comments:

"Staff respond well to the needs of the service users"
Overall on the day of the inspection the inspector found care to be safe.

Is Care Effective?

Following discussions with the registered manager the inspector was provided with assurances that there is at all times an appropriate number of suitably skilled and experienced persons providing care to service users. Examination of available records reflected staffing numbers outlined by the registered manager.

The registered manager described to the inspector the arrangements in place to assess the suitability of staff. The agency provides staff with a clear outline of their roles and responsibilities.

Records available show that agency staff receive induction prior to providing care/support to service users. This was confirmed by the staff interviewed by the inspector. The agency has a process for evaluating the effectiveness of staff induction, this includes competency assessments.

The agency has a process in place for identifying individual training needs. Staff described to the inspector how they are given the opportunity to identify their individual training needs. Agency staff have in place personal development plans.

Training records examined show that staff providing supervision have the necessary skills/ training required. Agency staff receive supervision/annual appraisal in accordance with the agency's policy.

Agency staff are aware of the whistleblowing procedure for highlighting concerns/ issues; this was confirmed by staff during discussions with the inspector.

Four staff questionnaires were received during the inspection; the inspector also spoke to five members of staff on duty during the inspection and has added their comments to this report. All four staff advised the inspector that they have attended training on the protection of vulnerable adults.

Staff comments:

"I was supported by other staff during my induction"

"Training is flexible and is encouraged by the agency".

Service user comments:

"The staff are excellent"

"I have no complaints".

HSC Trust comments:

"Good service"

"Good communication with staff".

Relatives' comments:

"Great care and support"

"Staff are excellent".

Is Care Compassionate?

The agency maintains a record of any comments made by service users/ representatives in relation to staffing arrangements, evidence of this was seen in the minutes of tenants' meetings. The manager was able to demonstrate that she discussed with service users significant staff changes. The manager stated that staff are not supplied to work with service users without an appropriate induction.

Records examined by the inspector show that staff receive induction training specific to the needs of individual service users. This was confirmed by the staff interviewed by the inspector.

The needs of individual service users are clearly identified within the induction process.

Agency staff could demonstrate that they have the knowledge and skills to carry out their roles and responsibilities.

The induction process takes into account the consent, privacy and dignity of service users. Staff receive ongoing supervision and assessment of competency to fulfil the requirements of their job role. The inspector read a number of staff competency assessments in place.

Staff comments:

"I had a comprehensive induction"

"Training is excellent".

Relatives' comments:

"The service is ideal for *****"

"***** has been a changed person with the support he receives".

Service user comments:

"Staff listen to me and my concerns and I have been well supported by them"

"I have been involved in a number of interview panels for new staff".

HSC Trust Comments:

"I have good communication with staff"

Overall on the day of the inspection the inspector found care to be compassionate.

Areas for Improvement

N/A

Theme: 2 Service User Involvement**Is Care Safe?**

Assessments of need and risk assessments examined by the inspector reflect the views of service users and their representatives. Assessments of need and risk assessments are reflected in care and support plans. There is evidence of positive risk taking in collaboration with the service user and/or their representative, the agency and the HSC Trust.

The agency staff interviewed showed an understanding of how to balance human rights with safety in service delivery. The views of service users and their representatives are considered in the assessment and implementation of restrictive practices.

Staff comments:

"The induction process prepared me for my role".

Service user comments:

"I get well supported by staff".

HSC Trust comments:

"A good service and a good setting".

Relatives' comments:

"I have no issues he's very safe and secure in his home".

Overall on the day of the inspection the inspector found the care/support to be safe.

Is Care Effective?

Care provision is regularly evaluated and reviewed. The review process includes involvement with service users and/or their representatives. This was confirmed by the manager and during the examination of review records.

Care and support plans are written in a person centred manner which includes the service user's views. There is evidence that the delivery of the service is responsive to the views of service users and/or their representatives. The agency has a monitoring system in place to ascertain and respond to the views of service users and/or their representatives.

The agency's human rights information examined shows evidence that service users are provided with information relating to their human rights in a suitable format.

The service provided to service users maximises their choice, independence and control over their lives. Service users and their representatives are made aware of representation and advocacy services.

Staff comments:

"Training is excellent".

Service user comments:

"I have help from an advocate if I need it".

HSC Trust comments:

"The staff communicate well with the Trust".

Relatives' comments:

The service is excellent and the staff are good they care well for *****".

Overall on the day of the inspection we found the management to be effective.

Is Care Compassionate?

Through examination of five service users' care and support plans, the inspector found that service delivery has a person centred ethos.

Service users and their representatives are aware of their right to be consulted and have their views considered in relation to service delivery.

Agency staff who participated in the inspection understand and implement the values of respect, choice, dignity and independence daily to service users. Staff stated that service users can make choices regarding their daily routines and activities, within the resources available to them.

Explicit consideration of human rights was evident in the care and support plans examined by the inspector. Consideration of human rights includes the involvement of service users and/or their representatives. Service users, HSC trust staff and agency staff spoken to described to the inspector how service users' views have been taken into account and shaped service provision.

One service user stated "Staff listen to my concerns".

Staff interviewed by the inspector showed an understanding of:

- Human rights
 - Promoting human rights in supported living
- Staff who participated in the inspection could describe aspects of service provision which show a reflection of choice, dignity, and respect.

Four staff questionnaires were received during the inspection; the inspector also spoke to five members of staff on duty during the inspection and has added their comments to this report. All four staff agreed that service users' views and experiences are taken into account in the way service is delivered.

Staff Comments:

"We promote choice and independence daily".

Service user comments:

"Staff are always available to me".

HSC Trust comments:

"Staff respond well to the needs of my clients".

Relatives' comments:

"Staff are excellent".

Overall on the day of the inspection the inspector found care/support to be compassionate.

Areas for Improvement

N/A

Additional Areas Examined

Complaints

Monthly quality monitoring

Statement of purpose

The inspector read the monthly monitoring visits for January 2015, February 2015 and March 2015 and the reports showed clear evidence of discussion with service users, relatives and HSC professionals. The reports contain an action plan that clearly shows actions to be completed and by whom within agreed timescales. The agency's statement of purpose was reviewed by the agency in March 2015. The manager confirmed that the agency has had no complaints.

6. Quality Improvement Plan

No quality improvement plan was issued during this inspection.

6.1 Statutory Requirements

No requirements were identified during this inspection.

6.2 Recommendations

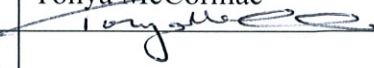
No recommendations were identified during this inspection.

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP will be completed by the registered manager to detail the actions taken to meet the legislative requirements stated/if applicable. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to supportedliving.services@rqia.org.uk and assessed by the inspector.

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 LCD – The Maples. 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. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within LCD – The Maples.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Vicky McQuoid	Date Completed	8/6/15
Registered Person	Tonya McCormac 	Date Approved	8/6/15
RQIA Inspector Assessing Response		Date Approved	

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

Please complete in full and returned to RQIA from the authorised email address

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Vicky McQuoid	Date Completed	8/6/15
Registered Person	Tonya McCormac	Date Approved	8/6/15
RQIA Inspector Assessing Response	<i>[Signature]</i>	Date Approved	24.6.2015

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

Please complete in full and returned to RQIA from the authorised email address