

Announced Care Inspection Report 28 January 2021



Johnston Way

Type of Service: Domiciliary Care Agency
Address: 1 Johnston Way, Ballymacoss, Lisburn, BT28 2AQ
Tel No: 028 9260 1895
Inspector: Corrie Visser

www.rqia.org.uk

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 provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

Johnston Way is a, supported living type domiciliary care agency, situated in Lisburn. The agency provides personal care and housing support to up to eight individuals whose accommodation consists of separate bedrooms and bathrooms, with some shared living areas. The tenant group includes people with disabilities, autism or mental health issues and who require support to increase independence and enhance their quality of life.

The services are commissioned by the South Eastern Health and Social Care Trust (SEHSCT).

3.0 Service details

Organisation/Registered Provider: The Cedar Foundation Responsible Individual: Mrs Margaret Cameron	Registered Manager: Ms Monica Owen
Person in charge at the time of inspection: Ms Monica Owen	Date manager registered: 2 July 2019

4.0 Inspection summary

Due to the coronavirus (Covid-19) pandemic the Department of Health (DoH) directed RQIA to continue to respond to ongoing areas of risk identified in services.

The last care inspection was undertaken on 4 March 2019. An inspection was not undertaken in the 2019-2020 inspection year, due to the risks associated with the spread of Covid-19.

Since the date of the last care inspection, a small number of correspondences were received in respect of the agency.

In consideration of the agency's regulatory history, in addition to RQIA not being made aware of any specific risk to the service users within the agency, the decision was made to undertake a remote inspection approach, to reduce any risk in relation to the spread of Covid-19.

An announced inspection took place on 28 January 2021 from 10.00 to 12.00 hours.

This inspection was completed following a review of information requested to be submitted to RQIA prior to the inspection. During the inspection, we focused on discussing aspects of the submitted information, in order to substantiate the information. We also focused on contacting stakeholders to obtain their views on the service quality.

We reviewed the dates that criminal records checks (AccessNI) had been completed to ensure that they were in place before staff visited service users. We checked that all staff were registered with the Northern Ireland Social Care Council (NISCC) and that there was a system in place for ongoing monitoring of staff registrations. Staff adherence to the Covid-19 guidance was also reviewed through discussion with them. This was also verified through discussion with the manager, service users and service users' representatives. We also reviewed the list of all Covid-related information, disseminated to staff and displayed throughout the agency.

The agency's provision for the welfare, care and protection of service users was reviewed. We viewed the regional guidance 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 which is maintained by the agency in relation to the safeguarding of adults.

Evidence of good practice was found in relation to recruitment practices, staff registrations with NISCC and the monthly quality monitoring reports. Good practice was also found in relation to infection prevention and control; all staff and service users had been adhering to the current Covid-19 guidance on the use of personal protective equipment (PPE).

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.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Domiciliary Care Agencies Regulations (Northern Ireland) 2007, the Domiciliary Care Agencies Minimum Standards, 2011 and the Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms Monica Owen, 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.

4.2 Action/enforcement taken following the most recent care inspection dated 4 March 2019

No further actions were required to be taken following the most recent inspection on 4 March 2019.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA in relation to the agency. This included the previous inspection report and written and verbal communication received since the previous care inspection.

Following a review of the information submitted to RQIA, the inspection took place remotely, using technology, with the manager.

During and following our inspection we focused on contacting the service users, their relatives, staff and health and social care (HSC) representatives to find out their views on the service.

To ensure that the appropriate staff checks were in place before staff visited service users, we reviewed the following:

- Recruitment records specifically relating to Access NI, NISCC

We also reviewed the infection prevention and control (IPC) procedures to ensure that they were compliant with the Covid-19: guidance for domiciliary care providers in Northern Ireland, updated 16 June 2020.

We discussed any complaints and incidents during the inspection with the manager and we also reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in line with Regulation 23.

RQIA provided information to service users, staff and other stakeholders that will support feedback on the quality of service delivery. This included service users/relative questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA.

6.0 What people told us about this agency

The information received shows that people were very satisfied with the current care and support. No electronic feedback was received. During the inspection we spoke with the manager and two care workers using technology. All those spoken with confirmed that staff wore personal protective equipment (PPE) as necessary.

Four service user/relative questionnaires were received and the feedback indicated that all the respondents were 'very satisfied' that the care being delivered is safe, effective, compassionate and well led.

We also spoke with one service user, three service users' representatives and one HSC professional, who indicated that that they were very happy with the care and support provided by the agency. Comments are detailed below:

Staff

- "I've loved it from the minute I started working here and still do. The service users make it a good place."
- "Our work is all about the service users' needs."
- ""As long as the guys get what they need, I go home happy."
- "A change of manager can be unsettling."
- "When the rules of covid change, our leaflets are updated."
- "We have received good guidance and support through the pandemic."
- "Staffing levels are safe."
- "There is an open door policy."
- "There is always someone there is I need to talk about anything."
- "The service users are really lovely."
- "There is good support from management."
- "The team leaders support the staff."
- "The support was good and they were patient with me while I was learning my role."
- "Actions are put into place if I have raised any issues."
- "My induction was good and quite detailed."
- "I had a lot of opportunities to shadow other staff."

Staff spoken with praised the manager for their approachability and responsiveness.

Service users

- "The staff are my friends."
- "The staff help me stay calm."
- "I want to get my own house."
- "We used to go to restaurants before covid."

- “I’ve got a big bed.”
- “I like going to gaming shops.”
- “I made a bracelet for the manager.”

Service users’ representatives

- “I am entirely happy with the care.”
- “They are doing a very good job.”
- “I think it is the best possible setting for people with learning disabilities.”
- “There is good communication.”
- “The staff are doing an excellent job.”
- “I am very pleased xxxx was able to get a place there.”
- “I didn’t expect xxxx to settle but they did and seem happy.”
- “The staff are brilliant.”
- “The staff gel well and are well co-ordinated.”
- “The staff are very good to xxxx and are very accommodating.”
- “I get my temperature checked when I arrive for a visit.”
- “xxxx hasn’t moved in yet but the staff and management have been great with the transition period.”
- “The staff have been very helpful.”
- “It’s a nice place.”
- “We feel xxxx will be well looked after in Johnston Way.”

HSC professionals

- “The process of introducing a new service user to Johnston Way has been managed well. The service user has had several extended tea visits to enable them to become accustomed to the new environment. I have found the management of their transition to supported living to be satisfactory and both the needs of the service user and that of their family have been taken into account.”

7.0 The inspection

7.1 Inspection findings

Recruitment

The agency’s staff recruitment processes were noted to be managed in conjunction with the organisation’s human resources (HR) department. Discussion with the manager identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 and Standard 11 relating to AccessNI. The review of the records confirmed that recruitment was managed in keeping with the regulations and minimum standards, before staff members commence employment and have direct engagement with service users.

A review of the staff records confirmed that all staff are currently registered with NISCC. We noted that there was a system in place each month for monitoring staff registrations. The manager advised that staff are not permitted to work if their professional registration lapses.

Covid-19

Discussion with the manager and staff identified that they had a good understanding of the procedure to follow in the event of service users or staff being diagnosed with Covid-19.

Staff had also completed training in relation to infection, prevention and control, Covid awareness training and environmental cleanliness. This included training on the donning (putting on) and doffing (taking off) of PPE. The manager described how a range of other Covid-related information was available for staff to read.

Staff described how they wore PPE for activities that brought them within two metres of service users. The staff members spoken with reported that there was an appropriate supply of PPE and sufficient bins available to allow the safe disposal of PPE. There was a system in place to ensure that infection control procedures were being adhered to. This included spot checking care staff in relation to their adherence to the guidance, handwashing audits and cleanliness of the building. The service user and relatives spoken with confirmed that the staff wore PPE appropriately.

The manager described the availability of hand sanitisers which are accessible throughout the setting for service users and staff to use. Hand-washing posters were displayed as visual aids to ensure that handwashing was being done correctly.

Service users had been supported to maintain a two metre distance from other people.

Enhanced cleaning schedules were in place, to minimise the risk of cross contamination. This included the frequently touched points throughout the building.

The manager provided a list to RQIA, by email, regarding the signage that was available throughout the agency, in relation to Covid-19 precautions. Daily updates in relation to Covid-19 are provided to staff via email and the manager communicated these to staff on a regular basis. Other information in relation to Covid-19 was displayed throughout the building and retained in a Covid-19 folder. This included information related to:

- Advice on visiting hospitals, other care settings.
- PHA HSC Staff Q&A.
- PPE in Community Settings- Covid19.
- Guidance for Domiciliary Care Providers in Northern Ireland.
- Covid19: PPE Advice for H&SC Workers in Community/Priority Care.
- NIAIC Alert – Risks Associated with the use of Alcohol based Sanitisers .
- Letter to services re: Adult Safeguarding referrals during Covid19.
- Managing Covid-19 in Care Homes and Other Residential Facilities.
- Symptom checklist for COVID-19 in nursing and residential care homes.
- COVID-19: Regional Principles for Visiting in Care Settings in Northern Ireland.
- Letter re: Reducing Workforce Movement in HSC settings.
- Interim Protocol for testing.
- What should I do if I think I have Coronavirus?
- Supported Living COVID-19 Guidance'
- Guidance on rollout of vaccination programme for domiciliary care staff.
- Letter to staff re: essential services and free public transport.
- Accommodation Services contingency planning for preventing and managing Covid19.
- Supported Living COVID checklist.
- Visitors Guide – Visiting Arrangements for Residential and Supported Living Services.

- Risk Assessment: Visiting During Covid19 Crisis.
- Temporary Amendment to Visiting Policy during Covid-19 Pandemic.
- Individual Visitor Declaration During Covid19 Pandemic.
- Letter for staff providing essential services during Covid19 – Free transport etc.

Signage displayed around the building included information on:

- Hand cleaning techniques poster (handwashing and use of alcohol gel).
- Preventing the spread of Coronavirus (PHA).
- Disposal of Masks, Gloves Aprons (Cedar policy).
- Guidance or staff working within Residential and Supported Living Services.
- Algorithm for Covid19 testing in Care Homes (SE Trust).
- Sources for Support for Nursing Care Homes, Residential Care Homes, and Supported Living Services in the South Eastern Trust Area.
- 'Additional Considerations of Covid19 Poster' (Table 4).
- Recommended PPE for primary, outpatient and community care by setting, NHS and independent sector (Table 2).
- PPE: Safe Use of Visors.
- Principles for Visiting within Cedar Residential and Supported Living Services.
- 'Covid10 Precautions: Donning and Doffing of PPE'.
- Easy Visual Guide to PPE .
- NI Direct poster on Coronavirus: 'We all must do it to get through it'.
- Test & Trace information.
- NI Direct Covid19 'NI Executive Restrictions'.
- The Cedar Foundation 'General Information to all visitors'.
- 'Amber Zone' posters throughout the building with instructions on PPE use.
- A mental health guide to coping with lockdown in the Winter.

The agency also had access to easy-read material, which they could access if needed.

Information has also been provided to service users to help them understand the current situation which included:

- SU information leaflet on coronavirus (The Cedar Foundation).
- Coronavirus Easy-Read booklet (PHA).
- Autism Little Learners – 'Getting a Coronavirus test'.
- Autism Little Learners – 'Going for walks'.
- Autism Little Learners – 'Masks, face shields, gloves'.
- Autism Little Learners – 'What is social distancing?'
- Social Story – 'What does social distancing mean?'
- Social Story – 'What to expect if someone I know goes into hospital'.
- Social Story - 'All About Covid19'.
- Social Story – 'What will happen if I have to go into hospital'.
- Social Story - 'Safer Shopping during Covid19'.
- Supporting people who have learning disabilities or autism.
- Poster from NHS England: 'Being Mindful of our communication whilst wearing PPE'.
- Individual social stories created to support individual visits over the Christmas period.

The business continuity plan had also been updated to include staffing contingency measures.

Areas of good practice

Evidence of good practice was found in relation to recruitment practices, staff registrations with NISCC and the monthly quality monitoring reports. Good practice was also found in relation to infection prevention and control; all staff and service users had been adhering to the current Covid-19 guidance on the use of personal protective equipment (PPE).

Areas for improvement

No areas for improvement were identified during this inspection.

	Regulations	Standards
Total number of areas for improvement	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.



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](https://twitter.com/RQIANews)