



The Regulation and  
Quality Improvement  
Authority

Clogrennan SLS  
RQIA ID: 10770  
302 Old Glenarm Road  
Larne  
BT40 1TU

Inspector: Jim McBride  
Inspection ID: IN023036

Tel: 028 2827 2428  
Email: [rosemary.wray@northerntrust.hscni.net](mailto:rosemary.wray@northerntrust.hscni.net)

---

**Announced Care Inspection  
of  
Clogrennan SLS  
4 September 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](http://www.rqia.org.uk)

## 1. Summary of Inspection

An announced care inspection took place on 4 September 2015 from 09.00 to 12.30. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. No quality improvement plan was issued during this inspection. 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
<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 can be found in the main body of the report.

Overall on the day of inspection the staffing arrangements and service user involvement was found to be safe, effective and compassionate. The outcome of this inspection found no areas of concern. A quality improvement plan (QIP) was not included in this report.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Anthony Stevens	<b>Registered Manager:</b> Rosemary Wray
<b>Person in charge of the agency at the time of Inspection:</b> Rosemary Wray	<b>Date Manager Registered:</b> 12/12/2009
<b>Number of service users in receipt of a service on the day of Inspection:</b> 17	

### 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: Staffing Arrangements - suitable staff are supplied to meet the assessed needs of service users**

**Theme 2: Service User Involvement - service users are involved in the care they receive**

### 4. Methods/Process

Prior to inspection the following records were analysed:

- Previous inspection report and Quality Improvement Plan (QIP)
- Incidents
- Records of contact with the agency since the last inspection

During the inspection the inspector met with three staff and the registered manager. Staff spoke positively about their role and staff morale, teamwork and managerial support. Staff stated that they feel well supported by training and are given the necessary resources to fulfil their role. The inspector spoke with four service users and has added their comments to this report. The service users indicated that they are happy in their homes. Their relationship with support staff was noted to be comfortable and they were at ease in their environment.

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

- Discussion with the registered manager/staff and service users
- Examination of records
- File audit.

The following records were examined during the inspection:

- Care and support plans
- HSC Trust assessments of needs and risk assessments
- Care review records for six service users
- Recording/evaluation of care used by the agency
- Monthly quality monitoring reports for March, May, June, July and August 2015
- Service users meetings minutes for November 2014, June and September 2015
- Staff meeting minutes for January, May, July and September 2015
- Staff training records for:
  - *Vulnerable adults*
  - *Complaints*
  - *Human rights*
  - *Respect*
  - *Supervision*

*It was good to note that staff avail of training other than the mandatory training requirements.*

- Records relating to staff supervision
- Complaints records
- Records relating to recruitment process
- Induction procedures
- Records of induction
- Staff rota information.

Four staff questionnaires were completed during the inspection and three were received following the inspection. These indicated that the staff were either satisfied or very satisfied with the following:

- Service users' views are listened to
- The agency's induction process prepared me for my role
- The agency operates in a person centred manner
- Service users receive care and support from staff that are familiar with their needs.
- Staff will be taken seriously if they were to raise a concern.

**Individual staffs written comments:**

"The move to dispersed housing has been very positive for the tenants."

"Staff have been very enthusiastic in supporting the move."

"Tenants have been empowered to live independent fulfilled lives."

"I like the fact that the tenants live in a homely environment where they all seem happy and relaxed."

"Care and support centres around the service user."

"Service users are involved in all aspects of their care."

Questionnaires were completed by five service users during the inspection and five were received following the inspection. These indicated that they were either satisfied or very satisfied with the following:

- The care and support they receive
- Staff respond to their needs
- They feel safe and secure

**Individual service user's written comments:**

"I like staff staying over in my house."

"I'm very satisfied at the moment."

"I'm glad staff helped me with the move."

"It's great here."

## **5. The Inspection**

Clogrennan is a domiciliary care service supported living type scheme, which supports people to live independently in their local community. It provides support to 17 adults with a learning disability.

Their mission statement states that staff are trained to provide care and support for adults with learning disabilities, to enable them to live independent, fulfilled lives, respecting individuals' rights, responsibilities and choices.

The support provided by staff includes advising and assisting service users with physical and social needs, such as daily living tasks, food preparation, budgeting and develop friendships and hobbies.

## 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 4 September 2015. The completed QIP was returned and approved by the care inspector.

## 5.2 Review of Requirements and Recommendations from the Last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
<p><b>Requirement 1</b></p> <p><b>Ref:</b> Regulation 15 (6) (d)</p>	<p>The registered person shall specify the procedure to be followed where an agency acts as agent for, or receives money from, a service user. This refers to the charges made from personal income. In relation to the following costs:</p> <ul style="list-style-type: none"> <li>• Utilities bills</li> </ul> <p>The service user's individual financial agreements will have to be further developed to reflect any payments made by them for food, utilities costs and any reimbursements received.</p> <p>This requirement is in relation to the agency's arrangements to reimburse service users for costs relating to the agency office space within the service users home.</p>	<p><b>Met</b></p>
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>Within Individual Financial Agreements, all utility bills are budgeted for either on a weekly or monthly basis. In relation to Agency costs for use of office in 302 Old Glenarm Road, an amount for rental of office and utility costs(based on previous 9 months costing's) has been agreed with individuals. An agreed monthly amount is paid by the Agency to the individuals and all outstanding arrears in respect of the above have been reimbursed to the Service Users.</p> <p>The inspector saw evidence of individual tenant's reimbursements. The individual Tenants agreements have been updated to reflect the current finance position.</p>	

### 5.3 Theme 1: Staffing Arrangements - suitable staff are supplied to meet the assessed needs of service users

#### Is Care Safe?

The agency has a recruitment policy updated by the NHSCT in September 2014. A mechanism is in place to ensure that appropriate pre-employment checks are completed and satisfactory. An alphabetical index of all domiciliary care workers supplied or available to work for the agency was maintained. The agency's statement of purpose and service users guide was updated in August 2015.

The agency has a structured induction programme lasting at least three days; this was confirmed by the manager and one staff member interviewed by the inspector who stated *"My induction has been comprehensive and is being facilitated by other staff."* The agency maintains a record of the induction provided to all staff, including details of the information provided during the induction period. Staff are provided with a handbook, and have access to policies, procedures, and other guidance documents.

The agency has a procedure for verifying the identity of all staff prior to their supply; the registered manager assured the inspector that no staff are supplied unless this procedure is followed.

The agency has a policy and procedure in place for staff supervision and appraisal which details the frequency of both. Records maintained of supervision and appraisal demonstrated that the frequency was in accordance with the agency's policy and procedure.

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

#### Is Care Effective?

Discussions with the registered manager and staff members indicated that an appropriate number of skilled and experienced persons are available at all times. Examination of staff rotas reflected staffing levels described by the registered manager and staff.

The registered manager described the agency's processes to assess the suitability of staff. The inspector viewed a range of documentation which evidenced how staff are provided with a clear outline of their roles and responsibilities. Staff who took part in the inspection were clear about what the agency expected of them.

Staff who took part in the inspection described the induction as effective in preparing new staff for their role. The inspector examined the records of two staff inductions; records of induction supported staff feedback.

The agency's process of evaluating the effectiveness of staff induction was seen within records reviewed by the inspector.

Discussion with staff and examination of training records provided evidence that the agency has a process in place to identify and respond to training needs. The agency provides a range of training outside of mandatory training. The registered manager described a process of re-evaluating and improving training to suit the needs of staff and service users. Staff interviewed provided positive feedback about the nature and frequency of supervision and appraisal.

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

**Is Care Compassionate?**

The agency maintains a record of comments made by service users/representatives in relation to staffing arrangements. This was verified by the inspector in the minutes of tenants meetings on the 9 November 2014 and both the 3 June and 1 September 2015.

The manager was aware of the possible impact of staff changes on service users and discussed with the inspector the importance of induction and introduction of new staff.

The registered manager described the process of recruitment undertaken by the agency in order to improve the continuity of staff to service users and minimise the disruption to service users. Induction records seen by the inspector showed that staff receive induction specific to the needs of service users, this was supported by the comments of one staff member who has received recent induction.

Staff members who took part in the inspection clearly described having the knowledge and skills to carry out their roles and responsibilities.

Staff described how the induction process involves meeting service users and learning about their care needs with another member of staff. The agency's induction process is implemented in a manner which takes into account the consent, privacy and dignity of service users.

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

**Service users' comments:**

"I love living with my friends here."

"Staff are all very good."

"Staff help me and support me at all times."

"This is so different from living in hospital it's better for me and us all."

"I'm free to come and go as I please, I have no restrictions and no locked doors."

"I now have alone time just for me and I really love that."

"Very positive here."

"I can live now."

**Staff Comments:**

"Induction prepares you for your role."

"We have good team work."

"Supervision is one to one and is good."

"Supported living means being part of the community."

"The tenants have settled well into supported living."

**Areas for Improvement**

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
--------------------------------	----------	-----------------------------------	----------

**5.4 Theme 2: Service User Involvement - service users are involved in the care they receive****Is Care Safe?**

Assessments of need and risk assessments examined by the inspector reflected the views of service users and/or representatives. The inspector viewed records of a process involving the service user and/or their representative, the referring HSC Trust and the Agency, to ascertain

the needs of the service user and their views. One service users stated:” *I have my own care plan and I agree what I want to do with the help of \*\*\*\*\* my worker.*”

There was evidence of positive risk taking in collaboration with the service user and/or their representative. This could be seen throughout a variety of records including risk assessments, care plans, and records of adult safeguarding referrals. Discussion with staff confirmed that they understood the concept of a balance of safety with service user choice. Both the manager and staff could provide examples of positive risk taking in practice.

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

### **Is Care Effective?**

Records of six annual reviews examined by the inspector indicated that care is regularly evaluated and reviewed. The agency has a policy of reviewing care and support plans every month or as required.

Care and support plans examined by the inspector were written in a person centred manner and included the service users’ views.

Records examined within monthly monitoring reports, minutes of service users’ meetings provided examples of how the agency delivers the service in response to the views of service users and/or their representatives.

The agency has processes in place to ascertain and respond to the views of service users and their representatives. E.g.

- *Individual reviews of care and support*
- *Tenants meetings*
- *Monthly quality monitoring*
- *Complaints procedure*
- *Staffs daily contact with service users*

Service users have been provided with information relating to human rights in a suitable format. The inspector noted that the following information was shared with service users during the following meetings:

- Human Rights August 2015
- Complaints procedures August 2015
- Safeguarding June 2015

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

### **Is Care Compassionate?**

Feedback from the manager and staff indicated that service users receive care in an individualised manner. Care plans and agency records were written in a person centred manner. One service user stated. *“The staff have time for me and my needs, all the time we come first.”*



Service users and/or their representatives were aware of their right to be consulted and have their views taken into account in relation to service delivery. One service user stated: “\*\*\*\*\* and \*\*\*\*\* always tell us to talk to them if we have a problem.”

The promotion of values such as dignity, choice and respect was evident through discussion with staff. The individual choices made by service users regarding the way they wish to live their lives were seen in activity programmes and care and support plans.

The agency collaborates with the HSC Trust regarding best interest practices for service users where there are capacity and consent issues. The agency’s response to comments made by service users and their representatives shows how individual views are taken into account and responded to.

Records in place show clear evidence that staff meet with service users to review individual care and support plans.

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

### Areas for Improvement

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
--------------------------------	----------	-----------------------------------	----------

### 5.3 Additional Areas Examined

The inspector noted the positive comments received from both service users and relatives, during the annual quality review of the service. The inspector particularly noted the following comments from relatives:

*“\* Has a life of her own now, where she takes responsibility for the good and the bad.”*

*“\* Gets to make up her own mind about things.”*

*“We are glad he is so well settled and that we still involved in his life.”*

Reports of monthly quality monitoring completed on behalf of the registered person were reviewed. The reports ascertain and respond to the views of service users, relatives, professionals and staff. The agency’s reports of monthly monitoring are comprehensive and provide assurance of a robust system of quality monitoring.

### Complaints

Records of complaints from 1 January 2014-31 March 2015 were examined. There was one complaint within the time period specified, this was resolved satisfactorily.

**No requirements or recommendations resulted from this inspection.**

**I agree with the content of the report.**

<b>Registered Manager</b>	Rosemary Wray	<b>Date Completed</b>	01/10/15
<b>Registered Person</b>	Tony Stevens	<b>Date Approved</b>	2/10/15
<b>RQIA Inspector Assessing Response</b>	Jim Mc Bride	<b>Date Approved</b>	2/10/15

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](mailto:agencies.team@rqia.org.uk) from the authorised email address\**