

**Unannounced Care Inspection
of
Mencap (10773)**

30 March 2016

1. Summary of Inspection

An unannounced care inspection took place on 30 March 2016 from 10.30 to 16.30. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. No areas for improvement were identified there is no Quality Improvement Plan (QIP) appended to this report. 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

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
Total number of requirements and recommendations made at this inspection	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.

2. Service Details

Registered Organisation/Registered Person: Mencap/Barry Joseph McMenamin	Registered Manager: Sinead Marie Murphy
Person in Charge of the Agency at the Time of Inspection: Sinead Marie Murphy	Date Manager Registered: 6 June 2012
Number of Service Users in Receipt of a Service on the Day of Inspection: 14	

Mencap, Bangor, is a supported living type domiciliary care agency located close to Bangor town centre. The agency can provide care and support to a maximum of 15 tenants with a learning disability. A number of service users previously lived in the residential care home which occupied the site prior to the re-development. Service users live in either single or double self-contained apartments.

Service users are provided with support to maintain their tenancy, to develop independent living skills and to be involved in the local community. Specific services can include assistance with personal care, medication, budgeting, shopping, cleaning, laundry and social activities, dependent upon service users' needs, interests and wishes.

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

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

- Discussion with the registered manager and person in charge
- Examination of records
- Consultation with service users/staff
- File audit
- Evaluation and feedback

During the inspection the inspector met with four service users, four staff members and the registered manager.

Prior to inspection the following records were analysed:

- Records of contact with the agency since the last inspection
- The previous inspection report

The following records were viewed during the inspection:

- Care and support plans of two service users
- Daily and monthly recording/evaluation of care records
- Monthly quality monitoring reports
- Minutes of tenants' meetings
- Minutes of staff meetings
- Staff training records
- Records relating to staff supervision and appraisal
- Staff induction records
- Complaints register
- Recruitment policy (October 2015)
- Induction policy
- Supervision and appraisal policy – 'Shape your Future' (January 2016)
- Disciplinary procedure (October 2014)
- Staff capability procedure (March 2015)
- Staff handbook (April 2013)
- Staff register/information
- Agency's staff rota information

- Whistleblowing policy (February 2015)

Staff questionnaires were completed by four staff following the inspection; they indicated the following:

- Service users' views are taken into account in the way the service is delivered.
- Staff are satisfied that the induction programme prepared them for their role.
- Staff are fully satisfied that care is delivered in a person centred manner.
- Staff are satisfied that concerns raised are taken seriously.
- Staff are fully satisfied that at all times there is an appropriate number of suitably skilled and experienced persons to meet the service users' needs.
- Staff are aware of the agency's whistleblowing policy.

Service users' questionnaires were issued during the inspection; to date none have been returned to RQIA.

The inspector would like to thank the registered manager, service users and staff for their support and co-operation during the inspection.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 10 July 2014; there were no requirements or recommendations made following the inspection.

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

Is Care Safe?

The agency's recruitment policy details the mechanism used to ensure that required pre-employment checks are completed prior to employment; a record is retained by the organisation's central resourcing team. It was identified from records viewed that an alphabetical index of domiciliary care workers supplied is maintained by the agency. The registered manager could describe the process for ensuring that staff supplied are physically and mentally fit for the purposes of their role. It was noted that staff are required to complete a health questionnaire prior to commencement of employment and on occasions may be required to undergo a medical assessment. The agency's absence management policy outlines the process for managing staff absence and for supporting staff to return to work.

The agency's Induction and Probationary Policy details the induction programme provided; it was noted that it is completed over a period of 12 weeks and that the probation period is six months. The registered manager stated that new staff are required to shadow existing staff members for a number of days during their initial induction period.

Staff could describe the content of the induction programme provided and stated that they were required to complete mandatory training.

The agency maintains a record of the induction programme provided to staff; it was identified that staff are required to complete an induction workbook indicating that they have received and understood the information provided. Staff confirmed that they have access to the agency's policies and procedures.

The agency has a procedure for verifying the identity of all staff prior to their supply; the registered manager stated that all staff supplied are employed by the organisation and have received appropriate training and induction.

The agency's policy and procedures for staff supervision and appraisal outline the frequency and procedures to be followed; it was identified that staff receive supervision six times per year and quarterly appraisal meetings. The agency maintains a record of staff supervision and appraisal; those viewed indicate that staff have received supervision and appraisal in accordance with the agency's policy and procedures.

Is Care Effective?

Discussions with staff and service users indicate that an appropriate number of skilled and experienced persons are available at all times to meet the needs of the service users. The agency's staff rota information reflected staffing levels as described by the registered manager. From records viewed it was identified that staff rota information detailed the full name of staff, their job role and timings of shifts.

Staff could describe the content of the induction programme provided; it was identified that the agency's induction process is completed over a 12 week period. Staff stated that they are provided with a job description at the commencement of their employment with the agency.

It was noted from records viewed and discussions with staff that they are required to complete mandatory training and in addition training specific to the needs of individual service users. Staff stated that they can discuss individual training needs during supervision or appraisal.

The agency's induction and probationary policy outlines the responsibilities of the registered manager and staff in highlighting and addressing training needs. The inspector viewed a copy of the agency's learning and development calendar developed annually to plan training for the forthcoming year. The agency maintains an electronic record of staff training; it highlights when training is required.

It was identified that persons providing supervision have received appropriate training. Staff stated that they receive supervision and appraisal in line with the agency's policy; this was verified from records viewed.

Staff were aware of their responsibility in highlighting concerns and had knowledge of the agency's whistleblowing policy.

Is Care Compassionate?

The registered manager stated that service users are involved in the interview process; they describe how one service user had recently been a member of the interview panel.

Service users stated that they are familiar with staff supplied to support them; staff could describe the impact of staff changes on service users and the benefits in providing continuity

of care. The registered manager stated that the agency aims to use a minimal amount of agency staff.

Induction records viewed indicate that staff have received, where appropriate, training specific to the needs of service users.

Staff could describe the importance of respecting the privacy, dignity and views of service users; service users who met with the inspector stated that staff respect their privacy and dignity.

The agency's capability policy and disciplinary procedure outline the processes for highlighting and managing unsatisfactory performance of staff.

Service User Comments:

- "I like it here; the staff are good."
- "Staff help me with my food."
- "Staff talk to me about the help I need."
- "If I was not happy I wouldn't be here."
- "I like the people I live with."
- "If I am worried I speak to the staff."
- "Staff go on holiday with me; I choose who I want to go with."
- "There is nothing I am unhappy about."
- "I love going out."

Staff Comments:

- "I enjoy working here."
- "I received induction and shadowed other staff."
- "Supervision is worthwhile; we get appraisal and it is reviewed every few months."
- "I love it here; the care provided is individualised."
- "Staff get on well with each other and have a good rapport with the service users."
- "I feel supported in my role; supervision is beneficial."
- "We have had some staff changes; we have enough staff."

Areas for Improvement

There were no areas for improvement identified within Theme 1:

Number of Requirements:	0	Number of Recommendations:	0
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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 viewed indicated that the views and choices of service users and where appropriate their representatives had been included. The agency has in place 'About Me' assessments for individual service users. Discussion with service users indicated that they are encouraged to participate in the assessment of their needs and in developing their care plan.

Staff could describe the benefits of positive risk taking and their role in supporting service users to live as full a life as possible. Records viewed and discussions with staff indicated evidence of positive risk taking in collaboration with the service user and/or their representative. Staff stated that during their induction they are required to reflect on the principles of service users having the right to take risks. Staff stated that a risk assessment is completed in conjunction with the service user and their representatives.

Is Care Effective?

It was noted from records viewed and discussion with staff that they record daily the care and support provided to service users and that risk assessments and care plans are reviewed six monthly or as required. Staff stated that they are required to complete a monthly report in conjunction with individual service users. Care plans viewed outline the routines of service users and were written in an individualised manner. Service users stated that they are encouraged to participate in an annual review of their care and support involving the HSCT.

Staff could describe the methods used to capture the views and opinions of service users and their representatives. The agency facilitates monthly tenants' meetings; service users stated that they are encouraged to attend. Service users stated that they can make their own choices and can choose what care and support they wish to receive.

Service users and their relatives are provided with information relating to the agency's complaints procedure; a record of complaints is maintained.

Service users have been provided with the Ministry of Justice human rights information.

Is Care Compassionate?

The majority of the service users live in individual flats; a number of service users share a flat with another tenant. Discussions with staff and service users indicate that care is provided in an individualised manner. Service users stated that they are involved in developing their care plans; those viewed are written in a person centred manner.

Staff could describe the methods used for engaging with service users and where appropriate their representatives; service users stated that they are encouraged to express their views and opinions and that they can speak to staff about any issues or concerns.

Promotion of values such as dignity, choice and respect were evident through discussion with staff and service users.

Staff could describe the process of engaging with HSCT representatives regarding best interest practices for service users where there may be capacity issues.

Service User Comments:

- "I decide what I want to do."
- "Staff help me with the laundry and my food."
- "I am going to the Highland show."
- "I go to the tenants' meeting."

- “Staff go shopping with me.”
- “I like my key worker; they listen to me.”

Staff Comments:

- “We encourage service users to be independent.”
- “Service users are involved in care planning.”
- “Service users are supported to take positive risks; risk assessments are completed and it is a staged approach.”
- “Service users are given choice.”
- “We complete New Opportunity Plans with the service users to support them to develop new skills.”
- The support provided can vary depending on the needs or wishes of the individual service user.”

Areas for Improvement

There were no areas for improvement identified within Theme 2.

Number of Requirements:	0	Number of Recommendations:	0
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5.5 Additional Areas Examined

5.5.1 Monthly Quality Monitoring

The inspector viewed the agency’s quality monitoring records; it was identified from discussions with the registered manager that monthly unannounced quality monitoring visits are completed by a manager from another of the organisation’s facilities. Records viewed record the views of service users, their relatives and where appropriate relevant professionals. It was identified that the documentation contained information relating to incidents, safeguarding concerns, staffing issues, staff supervision and training needs and contained an action plan.

5.5.2 Complaints

The agency’s complaints policy outlines the procedure for handling complaints. The agency has had one complaint for the period 1 January 2014 to 31 March 2015; this was verified from records viewed and discussion with the registered manager. Records viewed indicate that the agency has dealt with the complaint appropriately.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Sinead Murphy	Date Completed	23/6/16
Registered Person	Barry McMenamin	Date Approved	23/6/16
RQIA Inspector Assessing Response	JOanne Faulkner	Date Approved	23/06/16

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

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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 service. 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.