

Leonard Cheshire Disability RQIA ID: 10796 The Meadows 3 Edenderry Road Banbridge

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Inspector: Jim McBride Inspection ID: IN22737

Unannounced Care Inspection of Leonard Cheshire Disability The Meadows

29 June 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: <u>www.rgia.org.uk</u>

1. Summary of Inspection

An unannounced care inspection took place on 29 June 2015 from 09.00 to 14.00. 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) issued as a result of 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
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: Tonya Mc Cormac	Registered Manager: Paula Smyth
Person in charge of the agency at the time of Inspection: The manager	Date Manager Registered: 06/11/2014
Number of service users in receipt of a service on the day of Inspection:	

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
- Incidents
- Records of contact with the agency since the last inspection

During the inspection the inspector met with four service users and four staff. The inspector spoke to one HSC professional following the inspection. Their comments have been added to this report.

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

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

The following records were examined during the inspection:

- Six care and support plans
- HSC Trust assessments of needs and risk assessments
- Care review records
- Recording/evaluation of care used by the agency
- Monthly monitoring reports for January, March, April and May 2015
- Tenants' individual meetings records
- Staff meeting minutes for October 2014, April and May 2015
- Staff training records:
 Human rights
 Whistleblowing
 - Whistleblowing Safeguarding Performance management Customer service Person centred Planning
- Records relating to staff supervision
- Complaints records
- Recruitment policy the policy was updated by Leonard Cheshire Disability on the 20 November 2014
- Records relating to recruitment process
- Induction procedures
- Records of induction For Three Staff
- Staff register and associated records
- Staff rota information

Four staff questionnaires were completed by staff during the inspection; these indicated that the majority of staff were either satisfied or very satisfied with the following:

- Service users' views are listened to
- The agency's induction process prepared staff for their 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 staff comments:

"The care provided n the meadows' is good."

"The training is excellent and covers all aspects of the job."

"Staff listen to the service users views and wishes on how they want things done."

"I feel that the meadows provide the highest quality of care and respect to the tenants." "We work in a person centred way."

During the inspection a number of questionnaires were circulated to the service users to be completed, asking them about various aspects of their care. Five completed questionnaires were returned to the inspector during the inspection.

These indicated that service users were either satisfied or very satisfied with the following.

- The support they receive. That staff help you feel safe and secure.
- Staff responds to your needs.
- Staff help you feel safe and secure here.

Individual service users' comments:

"Mostly staff who know me well respond well." "Mostly satisfied, but some staff are more clued in than others." "My opinions are sought through questionnaires." "I feel that some of the time staff don't feel appreciated." "I'm treated as an ordinary person."

However, a number of service users who spoke to the inspector raised some concerns that were worrying them. These comments referred to staff issues and the fact that on occasions they felt their views and opinions were not listened to.

The inspector spoke to the manager and the services manager about the concerns raised. The manager and services manager were already aware of the concerns and were managing these appropriately through the agency's procedures. The service users concerned stated that they had been supported by the senior management staff and that some decisions involving them had been made about staffs' individual involvement with them. This was confirmed by the HSC Trust staff member spoken to by the inspector.

5. The Inspection

The Meadows is a domiciliary care supported living type agency operating under the auspices of Leonard Cheshire Disability (a voluntary organisation).

The scheme provides supported living accommodation for six service users with a range of physical disabilities and acquired brain injuries.

All service users live within independently maintained bungalows and are provided with support in a range of activities and relationships, cooking, personal care, medication and care and appearance, where appropriate.

The scheme currently employs fifteen care and support staff, who provide service to six service users.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the LCD, The Meadows was an unannounced care inspection dated 8 May 2014. The completed QIP was returned and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the Last Care Inspection

No previous requirements and recommendations resulted from the last care inspection on 8 May 2014.

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

Is Care Safe?

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

The manager confirmed that there is a mechanism in place to ensure appropriate preemployment 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 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.

It should be noted that as per the agency's policy on recruitment, service users are involved in the staff interview process. This was discussed with staff who confirmed that some of their service users are involved.

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

Is Care Effective?

Following discussions with the 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 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 in place provided evidence 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. Training records examined provided evidence that staff providing supervision had the necessary skills/ training required. This training was completed on the 9 July 2014.

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

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

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 individual tenants' records. The manager was able to demonstrate that he discussed with service users significant staff changes. It was good to note that each individual tenant received a memo relating to any staff changes. The manager stated that staff are not supplied to work with service users without an appropriate induction.

Records examined by the inspector provided evidence 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. One staff member stated *"My induction was excellent and I was helped by all staff I shadowed."* The inspector read a number of staff competency assessments in place.

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

Service User Comments:

"Staff are good." "I'm satisfied with the service I receive." "Staff are helpful." "All the staff do their best for me."

HSC Trust staff Comments:

"The service has made improvements over a period of time."

"I feel the staff are very supportive to tenants."

"The staff communicate well with HSC Staff."

"Concerns raised on behalf of tenants by the HSC Trust are dealt with by the staff and the management."

Staff Comments:

"Training and induction prepares you for your job." "Staff communicate well with each other."

Areas for Improvement N/A

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 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 acknowledged their understanding of how to balance human rights with safety in service delivery.

Overall on the day of the inspection the inspector found care 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 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. One service user stated: *"All my needs are met by the staff that help and support me well."* The agency has a monitoring system in place to ascertain and respond to the views of service users and/or their representative's.

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

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. It should be noted that the service users have been invited to take an active part in Leonard Cheshire's (CAN) Consumer action network that intends to:

"Provide people who use services and tenants with the opportunity to join together to be the peoples' voice to effect change inside and outside Leonard Cheshire Disability."

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

Is Care Compassionate?

Through examination of six 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.

Staff interviewed by the inspector demonstrated 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.

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

Service User Comments:

"Some staff listen to what you have to say." "Staff are kind and appreciate you." "My Choice and opinions must be heard by staff."

HSC Trust staff Comments:

"We attend all reviews as required." "The tenants I deal with are satisfied with the service." "We are satisfied with the service provision." "Tenants concerns are dealt with appropriately by the agency."

Staff Comments:

"Person centred planning is important." "Listening to the tenants is important to me."

Areas for Improvement N/A

Number of Requirements:	0	Number of Recommendations:	0	1
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5.5 Additional Areas Examined

It was noted that a number of tenants meetings were arranged for service users; however tenants feel they do not want to attend group meetings. The inspector noted that the manager and/or staff meet individually with service users regularly to discuss issues. The inspector examined a number of the records in place.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.					
Registered Manager	Paula Smyth	Date Completed	29/7/15		
Registered Person	Tonya McCormac	Date Approved	29/7/15		
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	7/8/15		

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

Please complete in full and returned to <u>agencies.team@rqia.org.uk</u> from the authorised email address

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 agency. 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.