



The Regulation and
Quality Improvement
Authority

PCG Castle Lane Court
RQIA ID: 10816
45 Castle Lane
Lurgan
BT67 9BD

Inspector: Jim McBride
Inspection ID: IN15889

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**Unannounced Care Inspection
of
Castle Lane Court**

23 April 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An unannounced care inspection took place on 23 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.

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 previous inspection of the 2 October 2014.

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: Praxis Care Group- Irene Elizabeth Ringland nee Sloan	Registered Manager: Ms Justine Sneddon
Person in charge of the agency at the time of Inspection: Ms Justine Sneddon	Date Registered: 9 March 2009
Number of service users in receipt of a service on the day of Inspection: 20	

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

Theme 2 - Service User Involvement

4. Specific methods/processes :

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

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

During the inspection the inspector met five service users and spoke with nine care staff. The inspector spoke with one HSC professional following the inspection. The inspector had the opportunity to speak with one service users' relative and has added their comments to this report.

Prior to inspection the following records were analysed:

- Previous inspection reports
- Reportable Incidents
- Contact records since the previous inspection.

The following records were examined during the inspection:

- Six care and support plans
- HSC Trust assessment of needs and risk assessments
- Care reviews, other methods of recording/evaluation
- Monthly monitoring reports for December 2014, January 2015, February 2015 and March 2015.
- Tenants meetings for January 2015, February 2015 and March 2015.
- Minutes of staff meetings for January 2015, February 2015 and March 2015.
- Staff training records examined
- Vulnerable adults
- Human rights

- Challenging behaviour
- Whistleblowing
- Personality disorders
- Complaints records
- Recruitment policy/ process reviewed by Praxis Care on the 4 September 2014
- Pre-employment check list that included the following:
 - Job descriptions
 - Terms and conditions
 - Staff register/ information
 - Agency's rota information.

Nine staff questionnaires were completed by staff during the inspection and one was received by post following the inspection. These indicated that the majority of staff were either satisfied or very satisfied with the following:

- How satisfied are you that service users' views are listened to?
- How satisfied are you that the agency's induction process prepared you for your role?
- How satisfied are you that the agency operates in a person centred manner?
- How satisfied are you that service users receive care and support from staff who are familiar with their needs?
- How satisfied are you that you will be taken seriously if you were to raise a concern?

However, four staff questionnaires indicated that staff were unsatisfied when asked:

- How satisfied are you that there is at all times an appropriate number of suitably skilled and experienced persons to meet the service users 'needs'?

This area of concern was discussed with the registered manager who informed the inspector that current staffing levels meet the needs of the service users. The inspector discussed this with the staff interviewed and has suggested, if they have further concerns with staffing levels that they use the appropriate systems in place within the agency, to forward their concerns to the registered provider.

During the inspection a number of questionnaires were circulated to the service users to be completed asking them about various aspects of their care. Two completed questionnaire were returned to the inspector during the inspection and one was received following the inspection.

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

- How satisfied are you with the support you receive?
- How satisfied are you that staff responds to your needs?
- How satisfied are your staff help you feel safe and secure here?

5 The Inspection

Castle Lane is a supported living type domiciliary care agency provided by Praxis Care. The scheme provides care and support for 20 adults. There are two 'core houses' accommodating four people in each house; four people live in single apartments and there are four two bedded semi-detached bungalows in a courtyard type development. It is situated in a residential part of Lurgan, close to the town centre, and is convenient to shops, leisure centres and Lurgan Park.

A number of service users have moved from a long stay hospital. The service is currently managed by Ms Justine Sneddon, with 42 staff providing physical, social, emotional and spiritual support to service users. The aim of the service is to encourage service user's independence and social inclusion within the local community.

Services are commissioned by the Southern Health and Social Care Trust.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 2 October 2014. 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>Requirement 1</p> <p>Ref: Regulation 15 (6) (d)</p>	<p>The registered person is to specify the procedures to be followed where a domiciliary care worker acts as agent for, or receives money from a service user.</p> <p>This requirement relates to the agency staff who act as appointees for service users and the need to review these procedures with the Social Security Agency.</p> <p>Action taken as confirmed during the inspection: The agency has made contact with the social security agency to update and change, where appropriate, the named appointee details. The agency met with the HSC Trust on the 25 November 2014 and has reviewed the necessary arrangements.</p>	Met
<p>Requirement 2</p> <p>Ref: Regulation 14 (b)</p>	<p>Where the agency is acting otherwise than as an employment agency, the registered person shall make suitable arrangements to ensure that the agency is conducted, and the prescribed services arranged by the agency, are provided. (b) so as to safeguard service users against abuse or neglect.</p> <p>This requirement relates to the lack of capacity assessments in place for individual service users.</p> <p>Action taken as confirmed during the inspection: The agency met with the HSC Trust on the 25 November 2014 and the HSC Trust has facilitated the completion of a number of finance capacity assessments as required.</p>	Met

5.3 Theme 1 - Staffing arrangements

Is Care Safe?

The agency has in place a recruitment policy. This was updated on the 4 September 2014 by Praxis Care.

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. Two staff members stated:

“My induction was comprehensive and prepared me for my role”. The agency maintains a record of staff induction provided to staff; and included details of the information provided during the induction period. Staff who were interviewed by the inspector were clear, that the induction period is essential for staff and the induction period lets them get to know the service users care and support needs.

Praxis care 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.

Service user comments:

“This is one of the best places I have lived; it’s good here. I have my own place and its private”.

Staff comments:

“The service users are protected and supported to maintain their tenancy”.

Relatives’ comments:

“Excellent service ***** is safe and secure”.

HSC Trust Comments:

“The service has improved greatly”.

Areas for Improvement

N/A.

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 and was outlined by the registered manager. One staff member stated: *“The needs of the service users are prioritised.”*

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. One staff member stated: *“Training is important to us and is effective for the service users as we put into action our learning.”*

Records available show that agency staff receive induction prior to providing care/support to service users. This was confirmed by the staff interviewed during inspection. 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 show that staff providing supervision have the necessary skills/ training required.

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

Nine staff questionnaires were received during the inspection; the inspector also spoke to nine members of staff on duty during the inspection and has added their comments to this report. All nine staff advised the inspector that they have attended training on the protection of vulnerable adults. Staff have requested further training on acquired brain injury and sign language.

Service user comments:

“The staff are great and support me well”.

Staff comments:

“I believe the service should be expanded to encourage the service user’s future goals of greater independence”

“Since the last inspection we have improved the service greatly, including financial recording, support plans and the general day to day running of the scheme”.

HSC Trust comments:

“We have good communication with the staff”.

Relatives’ comments:

“The staff have supported ***** to change his life”.

Areas for Improvement

N/A

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 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, this was confirmed by staff interviewed by the inspector.

Staff receive induction training specific to the needs of individual service users. This was confirmed by the staff interviewed by the inspector.

Agency staff could demonstrate that they have the knowledge and skills to carry out their role and responsibility. Staff receive ongoing supervision and assessment of competency to fulfil the requirements of their job role.

Staff who participated in the inspection could describe aspects of service provision which show a reflection of choice, dignity, and respect.

Service user comments:

"Staff and keyworkers listen to my view and help me with my daily life".

Staff comments:

"Care and support takes into account the views of the tenants, we meet with tenants each month to review their needs with them".

Relatives' comments:

"Staff communicate with me well and keep me informed of all decisions".

"***** is having a difficult time at the moment but the staff have supported *** well".

HSC Trust Comments:

"The staff support tenants well".

Areas for Improvement

N/A

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

5.4 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, these 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 care practices.

Service user comments:

"I'm asked what I think by staff".

Staff comments:

"Tenants are involved each day in the decision making process".

Relatives' comments:

"***** and I are involved in all decision about care and support, staff communicate with ***** and I about changes".

Areas for improvement

N/A

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

Is Care Effective?

Care plan records showed that care is regularly evaluated and reviewed by the agency staff. The agency staff review care and support plans monthly or as required. Care and support plans seen by the inspector were written in a person centred manner and included the service users' views. Staff described how care and support plans are written along with the service user.

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.

It should be noted that Praxis care the registered provider does have in place an "Up in Policy Group. " where service users meet to review, update and devise policies that affect the lives of

tenants. The service users of Castle lane have in place a newsletter that keeps them up to date with activities in Castle lane.

Service user comments:

“I meet with my keyworker regularly to discuss how I feel”

Areas for improvement

N/A

Overall on the day of the inspection the inspector found the management 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 recognise 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 shape service provision.

Service user comments:

“I have an independent advocate who helps me with any concerns I have”.

Staff comments:

“We have requested further training to enhance the care and support we provide to individual Tenants”.

Relatives’ comments:

“This is the best place for my relative, the staff are excellent and I have no complaints. I can’t speak highly enough about the staff” .

Areas for Improvement

N/A

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

Additional Areas Examined

The inspector examined the recent "Views from users. "Audit completed by the agency and has noted the positive comments.

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. 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 the agency.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Justine Sneddon	Date Completed	15/5/15
Registered Person	Justine Sneddon	Date Approved	15/5/15
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	15/5/15

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

****Please complete in full and returned to RQIA supportedliving.services@rqia.org.uk from the authorised email address****