



The Regulation and  
Quality Improvement  
Authority

Praxis Care Group  
RQIA ID: 10824  
62 Killowen Street  
Coleraine  
BT51 3DD

Inspector: Jim McBride  
Inspection ID: IN022960

Tel: 02870352292  
Email: [michelleoneill@praxiscare.org.uk](mailto:michelleoneill@praxiscare.org.uk)

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**Announced Care Inspection  
of  
Praxis Care Group**

**10 August 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 short notice care inspection took place on 10 August 2015 from 09.30 to 15.00. 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

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.

	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.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Irene Sloan	<b>Registered Manager:</b> Michelle O'Neill
<b>Person in charge of the agency at the time of Inspection:</b> Michelle O'Neill	<b>Date Manager Registered:</b> 11 October 2011
<b>Number of service users in receipt of a service on the day of Inspection:</b> 15	

### 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:

Prior to inspection the following records were analysed:

- Previous inspection report and QIP
- Incident records
- Records of contact with the agency since the last inspection.

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

The following records were examined during the inspection:

- 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 March, April May June and July 2015.
- Tenants' meeting minutes for March, May June, and July 2015.
- Staff meeting minutes for April, May, June and July 2015.
- Staff training records:
  - Vulnerable adults*
  - Human rights*
  - Complaints*
  - Supervision for supervisors*
- Records relating to staff supervision
- Complaints records
- Recruitment policy the policy was updated by Praxis Care on the 6 November 2014.
- Records relating to recruitment process
- Induction procedure
- Records of induction
- Staff register and associated records
- Staff rota information.

Three questionnaires were completed by staff during the inspection; these indicated that the three staff were either satisfied or very satisfied with the following:

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

One questionnaire was returned following the inspection and it indicated the following:

**Individual staffs written comments:**

"I feel that all staff offer a fantastic service to the service users."

"I feel all the service users are very happy living at Praxis."

"Service users are well supported."

"Praxis provide an excellent induction for staff."

"All service users care plans are person centred."

"I have no concerns about the care and service we provide."

"Senior staff are very supportive."

"Service users are listened to in a sensitive manner."

"Group work is help regularly to suit service user's needs."

At the request of the inspector a number of questionnaires were circulated to the service users to be completed and returned to the RQIA asking them about various aspects of their care. Three questionnaires were returned. This indicated that service user was either satisfied or very satisfied with the following.

- The support they received
- Staff responds to my needs
- Staff help you feel safe and secure here.

## 5. The Inspection

Praxis Care at Killowen Street, Coleraine, is a domiciliary care type supported living agency that is part of the Praxis Care Group, a registered charity. This agency provides a range of services to adults who experience enduring mental health problems. Services are commissioned by the Northern Health and Social Care Trust, with additional funding from Supporting People. The Registered Manager, Mrs Michelle O'Neill, directs a staff group in various areas of service provision.

### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 28 August 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
<b>Requirement 1</b>  <b>Ref:</b> Regulation 1.2	Suggestions made regarding improvements, compliments given and issues raised by service users and their carers/representatives regarding the quality of services are listened and responded to.  This recommendation relates to the matters raised with the inspector by relatives regarding individuals' homes and the quality of the environment. The recommendation refers to repairs and housing matters that the agency will bring to the attention of the housing provider.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Service users are supported to contact Housing Associations in relation to repairs (as per Support plans). Manager & AD have previously raised concerns re: delays with repairs. Manager has also met with Housing Officer on 4th Sept 14 re schedule for repairs. Staff continue to liaise with relevant Housing Associations re: dates of completion of works. This was confirmed during 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 has a recruitment policy and a mechanism 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 has a structured induction programme lasting at least three days; this was confirmed by staff interviewed. 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 guidance.

The agency has a procedure for verifying the identity of all supply 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 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. One staff member stated: "*We provide a person centred individual service to all service users.*"

Staff who took part in the inspection described the induction as effective in preparing new staff for their role.

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 evidenced 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 and staff described a process of re-evaluating and improving training to suit the needs of staff and service users. Staff 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. These comments and the agency's response to them could be seen in daily recording, minutes of meetings with service users and staff.

Discussions with staff and the manager indicated that service users are prepared in advance of significant staff changes where possible. The staff were 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.

Agency staff who took part in the inspection clearly described having the knowledge and skills to carry out their roles and responsibilities. Service users confirmed that staff have appropriate knowledge and skills. One service users stated: "*The staff are well trained to provide care to me.*"

Agency 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.

**Staff Comments:**

“Both supervision and training are good.”

“Induction is comprehensive.”

“The manager is very supportive.”

“The service users are all treated with respect.”

**Service users’ comments:**

“Staff are great.”

“The staff treat you as a person.”

“Staff provide me with good support.”

“Staff speak to you at your level they never talk down to you.”

“I’m treated very well by everyone.”

“I have no complaints here it’s one of the best places I have been.”

“Staff relate to me well.”

“I feel very safe and secure here.”

**Areas for Improvement**

N/A

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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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 seen by the inspector reflected the views of service users and/or representatives. The inspector saw 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. This process results in individualised care and support plans seen by the inspector.

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.

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

**Is Care Effective?**

Records of reviews evidenced 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 seen by the inspector were written in a person centred manner and included the service users’ views. The manager described how care and support plans are written along with the service user and presented evidence of this.

Feedback from monthly monitoring reports and minutes of service users’ meeting presented 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.

Service users have been provided with information relating to human rights in a suitable format.

It was noted that individual care and support plans place importance on the human rights of individuals. Care and support plans are written and reviewed under the following subdivisions:

- *Improved Health*
- *Improved quality of life*
- *Making a positive contribution*
- *Choice and control*
- *Freedom from discrimination and harassment*
- *Emotional wellbeing*
- *Personal dignity*

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

### **Is Care Compassionate?**

Feedback from service users evidenced that service users receive care in an individualised manner. Care plans and agency records were written in a person centred manner.

Service users and/or their representatives are aware of their right to be consulted and have their views taken into account in relation to service delivery. The manager discussed examples of responding to service users' preferences.

Promotion of values such as dignity, choice and respect were evident through discussion with staff and service users. Human rights were explicitly outlined in care plans and were evident throughout other agency documentation such as review records. The individual choices made by service users regarding the way they wish to live their lives were seen in activity programmes, care and support plans and through discussion with two service users.

The agency collaborates with the HSC Trust regarding best interest practices for service users where there are capacity and consent issues.

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

### **Areas for Improvement**

N/A

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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### 5.3 Additional Areas Examined

N/A

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

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

<b>Registered Manager</b>	Michelle O'Neill	<b>Date Completed</b>	26/08/15
<b>Registered Person</b>	Andy Mayhew on behalf of Irene Sloan	<b>Date Approved</b>	01.09.15
<b>RQIA Inspector Assessing Response</b>	Jim Mc Bride	<b>Date Approved</b>	16/9/15

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\**