

**Announced Care Inspection
of
PCG Dunmisk Manor**

6 August 2015

1. Summary of Inspection

An announced short notice care inspection took place on 6 August 2015 from 09.00 to 13.00. 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

N/A

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
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 Sloan	Registered Manager: Caroline Haughey
Person in charge of the agency at the time of Inspection: Caroline Haughey	Date Manager Registered: 9 March 2009
Number of service users in receipt of a service on the day of Inspection: 12	

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.

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

4. Methods/Process

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

Prior to inspection the following records were analysed:

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

The following records were examined during the inspection:

- Six care and support plans
- HSC Trust assessments of needs and risk assessments
- Care review records
- Monthly monitoring reports for January, February, March and April 2015
- Tenants' meeting minutes for March, May June, and July 2015
- Staff meeting minutes for 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
- Induction procedures
- Records of induction
- Staff register and associated records
- Staff rota information.

Five questionnaires were completed by staff during the inspection; these indicated that the five 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 who are familiar with their needs
- Staff will be taken seriously if they were to raise a concern.

Individual staffs written comments:

"Praxis care is working hard as an organisation at scheme level to deliver the best service possible for service users."

"Dunmisk staff work in partnership with service user."

"All the work with service users is person centred."

"The induction programme ensures staff are competent."

"All our practice is underpinned by the principles of person centred care."

At the request of the inspector a number of questionnaires were circulated by the manager to the service users to be completed asking them about various aspects of their care. These indicated that service users were either satisfied or very satisfied with the following.

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

5. The Inspection

Praxis Care Group, Dunmisk Manor, is a domiciliary care type supported living scheme for adults who have experienced severe and enduring mental ill health problems.

Services are commissioned by the Belfast Health and Social Care Trust and South Eastern Health and Social Care Trust Community Mental Health Teams.

Dunmisk Manor is located in the Andersonstown area of West Belfast and is convenient to shops, a leisure centre, transport systems and a variety of community resources.

Under the direction of the Registered Manager, Mrs Caroline Haughey, a staff team provides 24 hour support to enable service users to live as independently as possible in a community setting. All service users have shared or individual flats with en suite facilities.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 18 August 2014.

5.2 Review of Requirements and Recommendations from the last care inspection

No previous requirements or recommendations.

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. One staff member stated: *"The induction prepared me for my role."* 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 inspector examined the record of two recently inducted staff.

The agency has a procedure for verifying the identity of all supply prior to their supply, and 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 showed 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. Records of induction examined 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 evidenced that the agency has a process in place to identify and respond to training needs. The agency provides a range of training in addition to the 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. This was evidenced in the records of a tenants' meeting held on 20 May 2015. 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 user stated: *"The staff are well trained to meet my needs."*

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:

"Excellent induction."

"Staff training is good"

"A range of other training is available to staff."

Service users' comments:

"Staff are very good."

"Staff always listen to me and my view is important."

"Staff make my life worth it."

"Staff respect you and your autonomy."

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 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. One service user stated: *"My review gives me the chance to discuss my needs and what I want to do."*

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. 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 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. Staff described how care and support plans are written along with the service user and produced evidence of this.

Feedback from staff, monthly monitoring reports, minutes of service users' meeting 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.

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 staff and service users evidenced that service users receive care in an individualised manner. Care plans and agency records were written in a person centred manner. One staff member stated: *“In Dunmisk the staff work in partnership with service users to ensure all their needs are meet.”*

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. Staff discussed examples of responding to service users’ preferences; service users described having their views taken into account; minutes of meetings with service users clearly reflected their involvement.

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 including 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 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.

Staff comments:

“Person centered care and support is paramount to this service.”

“Service users are involved in decision making and in all aspects of the support they receive.”

Service users’ comments:

“This place has changed my life.”

“I feel safe and secure here.”

“This has been a very positive experience for me.”

“I see a clear road ahead.”

“I have no restrictions placed on me here. I’m free to come and go as I please.”

“The support I get is second to none.”

“I’m well cared for and supported here.”

Areas for Improvement

N/A

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

The inspector noted the agency's report on "service users views" completed in 2014; the positive results show satisfaction levels were high.

Service users' comments:

"I'm happy with staff; they are very good and help me with anything I do."

86% of service users felt that staff were responsive to their needs.

80% of service users felt that praxis has helped them to reach their goals.

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	Caroline Haughey	Date Completed	14 Aug 15
Registered Person	Andy Mayhew on behalf of Irene Sloan	Date Approved	2 Sept 15
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	2 Sept 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 from the authorised email address