



The **Regulation** and
Quality Improvement
Authority

PCG Kilmorey House
RQIA ID: 10827
3 Arthur Street
Newry
BT34 1HR

Inspector: Jim McBride
Inspection ID: IN22635

Tel: 02830269150
Email: gerryheatley@praxiscare.org.uk

**Announced Care Inspection
of
Kilmorey House**

7 May 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

1. Summary of Inspection

An announced care inspection took place on 7 May 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. 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

N/A No enforcement actions were 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: Praxis Care Group	Registered Manager: Gerry Heatley
Person in charge of the agency at the time of Inspection: Gerry Heatley	Date Manager Registered: 9/3/2009
Number of service users in receipt of a service on the day of Inspection: 13	

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

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

The following records were examined during the inspection:

- Four 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, February, March and April 2015.
- Tenants' meeting minutes for February, March, April and May 2015.
- Staff meeting minutes for February, March, April and May 2015.
- Staff training records
- 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.

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 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
- You will be taken seriously if you were to raise a concern.

During the inspection a number of questionnaires were circulated to the service users to be completed asking them about various aspects of their care. Seven 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 you receive
- Staff responds to your needs
- Staff help you feel safe and secure here.

However one service user was very unsatisfied when asked:

- How satisfied are you that staffing levels are appropriate at all times?

The service user stated "I know the staff team is short at the minute and I would like to see more people come on board."

The inspector discussed this matter with the manager who stated that indeed, there were two staff vacancies at the moment. The inspector examined the staff rota that showed clear evidence of the staff supplied to cover shift patterns. It was noted that the shifts were being covered by the agency's permanent staff.

The inspector noted that staffing issues had been discussed with both staff and service users on the 18 February and the 24 February, 2015. One new staff member has commenced employment and the manager stated that two more permanent staff have now been appointed and will be commencing their induction soon.

5. The Inspection

Kilmorey House is a supported living type domiciliary care agency provided by Praxis Care. Based at Arthur Street Newry the service is provided to people who experience mental ill health. One building accommodates seven service users who have their own bedroom, sharing communal areas. Six service users live alone in self-contained flats on the second floor of the main accommodation. The accommodation is located close to Newry city centre, with the main local amenities within walking distance.

Under the direction of the registered manager Mr Gerry Heatley, seven staff provide various levels of support to thirteen and service users who are encouraged and supported daily in order to maximise their independence.

5.1 Review of Requirements and Recommendations from Previous Inspection

N/A

5.2 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 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 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 showed 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 inspector noted this in meetings held with staff and service users on the 18th & 24th February 2015. 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.

The registered manager described a process of recruitment undertaken by the agency in order to improve the continuity of staff to service users and minimise the disruption to service users. Induction records seen by the inspector showed that staff receive an induction specific to the needs of service users, this was supported by staff comments.

Agency staff who took part in the inspection clearly described having the knowledge and skills to carry out their roles and responsibilities. Service users and relatives confirmed that staff have appropriate knowledge and skills.

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.

Service user comments

"I'm very much at home here."

"I'm well supported here."

"Staff engage with me well."

Relatives' comments

"First class service."

"Don't know what ***** would do without the support from staff."

"I'm very satisfied."

HSC Trust comments

"My client is very happy."

"Both *** and I attend the comprehensive reviews."

"The staff are excellent."

Staff comments

"Induction and training was excellent and helped me in my work."

"We have an excellent flexible staff team."

"We communicate well with each other."

Areas for Improvement

There were no areas for improvement identified in relation to Theme 1.

Number of Requirements	0	Number 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.

The inspector noted that each service user has a completed task analysis that in conjunction with the agency staff highlights personal goals, which the service users would aspire to. These goals are reviewed monthly. One service user stated: “My goals are important to me I can see my progress.” It would appear that this positive interaction by staff has increased participation, independence and choice.

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 showed 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 showed evidence of this.

Feedback from relatives, monthly monitoring reports, minutes of service users’ meeting showed 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. Minutes of a service user meeting held on the 2 April 2015 shows clear evidence of human rights being discussed by the service users and staff together.

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, service users, relatives and a HSC Trust staff member 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 were 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; relatives described having their views taken into account; minutes of meetings with service users reflected their involvement. The inspector observed some service users in their home and observed them exercising choice regarding their daily lives.

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 service users.

The agency collaborates with the HSC Trust regarding best interest practices for service users where there are capacity and consent issues. The agency's response to complaints and comments made by service users and their representatives shows how individual views are taken into account and responded to.

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

Service user comments

"My careplan belongs to me. I have good support to achieve my goals."

"My keyworker is very supportive."

"I attend all tenants meetings and say what I feel."

Relatives' comments

"Staff are excellent."

"**** keeps well and has good contact with the family."

"The staff treat people well and help and support them with activities."

HSC Trust comments

"My client feels safe and secure in Kilmorey."

"Both ***** and I are satisfied with the care and support."

"The staff are friendly and supportive."

Staff comments

"We encourage tenants to speak for themselves."

"The tenants are supported to become involved in community activities."

"The care and support plans promote individuality and human rights."

Areas for Improvement

There were no areas for improvement identified in relation to Theme 2.

Number of Requirements	0	Number of Recommendations:	0
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5.2 Additional Areas Examined**Reports of Monthly Quality Monitoring**

Reports of monthly quality monitoring completed on behalf of the registered person were reviewed. The reports ascertain and respond to the views of service users, relatives, professionals and staff. The agency's reports of monthly monitoring are comprehensive and provide assurance of a robust system of quality monitoring and service improvement.

Complaints

Records of complaints from 1 January 2014-31 March 2015 were examined. There was one complaint within the time period specified. The complaint examined by the inspector had been satisfactorily investigated and documented.

The registered manager advised the inspector that the agency classifies all comments of concern as a complaint and investigates them accordingly.

Annual service survey

The inspector noted the positive comments made by service users during the 2014 annual review of the quality of service provision, completed by Praxis Care.

Some comments received:

"The staff treat me nicely."

"The staff have respect for me and I respect them."

"I find it help to me living here."

"My keyworker is positive and helpful."

"I feel I can talk to the staff."

No requirements or recommendations resulted from this inspection.

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.

I agree with the content of the report.			
Registered Manager	Gerry Heatley	Date Completed	18/05/15
Registered Person	Willie McAllister on behalf of Irene Sloan	Date Approved	20/05/15
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	20/5/15

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

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