

Connaught House RQIA ID: 10828 1 Arthur Street Newry BT34 1HR

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Announced Care Inspection of Connaught House

1 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 announced care inspection took place on 1 June 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

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:	Registered Manager:
Irene Sloan	Gerard Heatley
Person in charge of the agency at the time of	Date Manager Registered:
Inspection:	9 March 2009
Gerard Heatley	
Number of service users in receipt of a	
service on the day of Inspection:	
8	

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 two service users, three care staff and the registered manager.

The following records were examined during the inspection:

- Eight 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 March, April and May 2015
- Staff meeting minutes for March, April and May 2015
- Staff training records for:
- Vulnerable adults
- Challenging behaviour
- Human rights
- Staff supervision
- Records relating to staff supervision
- Complaints records
- Recruitment policy the policy was updated by Praxis Care on the 4 September 2014
- Records relating to the recruitment process
- Induction procedure
- Records of induction
- Staff register and associated records
- Staff rota information.

Five staff questionnaires were completed by staff during the inspection, and three were returned following 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?

Individual comments made by staff in their questionnaire:

"Staff turnover does affect the workload."

"Staff speak to service users daily and listen to any suggestions or concerns."

"Staff and team leaders attend tenant meetings monthly."

"We meet with service users one to one with menu planning, activities planning, service users meetings and suggestion boxes."

"I am satisfied that I would be taken seriously if I was to ever raise a concern."

"I feel I was well prepared for my role after induction. I learned about values as well as confidentiality, areas important to my role as a support worker."

"The level of care is of a very high standard."

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

However one service user was unsatisfied when asked:

• How satisfied are you that staff help you feel safe and secure?

The service user stated "I want to go back home to *********"

The inspector discussed this matter with staff who stated that ****** feels that the best place is home. The inspector spoke to the service user concerned who stated "The staff are good and that they are safe here but I would like to go back home, although this is not an option currently."

Another service user was unsatisfied when asked:

• How satisfied are you that your views and opinions are sought about the quality of the service?

The inspector spoke with the service user who stated that *"I'm satisfied with this service and I know my views are listened to by staff but I feel the HSC Trust are slow in making a decision about my goal of moving home."*

5. The Inspection

Connaught House, Newry, is a supported living type domiciliary care agency provided by Praxis Care, providing a service specifically for individuals diagnosed as having alcohol related brain damage. Under the direction of the Registered Manager, Gerry Heatley a staff of twelve provides care and support for up to eight service users within a supported living environment. The services provided include all aspects of daily living, enabling service users to maintain an optimum level of independence, inclusion and autonomy, whilst relearning lost daily living skills.

The Southern Health and Social Care Trust commission services.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of Connaught House was an announced care inspection dated 25 September 2014. The completed QIP was returned and approved by the care inspector.

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: 15 (6) (d)	 The registered person shall specify the procedure to be followed where an agency acts as agent for, or receives money from, a service user. This refers to the charges made from personal income. In relation to the following costs: Utilities bills The service users' individual financial agreements will have to be further developed to reflect any payments made by them for, utilities costs and any reimbursements received. This requirement has been restated in relation to reimbursements of costs associated with utilities. Action taken as confirmed during the inspection: 	Met
	The agency has provided a satisfactory explanation/outcome in relation to this requirement.	

5.2 Review of Requirements and Recommendations from the Last Care 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 preemployment 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 including one staff member who is currently in the process of completing her induction. 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 staff 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 the management of 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 demonstrated 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 in place provided evidence that the agency has a process to identify and respond to training needs. The agency provides a range of training outside of mandatory training, but relevant to the care and support needs of service users. The registered manager and staff described a process of re-evaluating and improving training that enhances 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 records examined and within the 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.

The registered manager described a process of recruitment undertaken by the agency in order to improve the continuity of staff to service users whilst minimising the disruption.

Induction records examined by the inspector evidenced that staff receive an induction specific to the needs of service users; this was supported by staff comments during discussion with the inspector.

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. One service user stated *"The staff here know me well and do help with my moods or when I have concerns."*

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:

"Staff are excellent." "I have no problems here."

Staff Comments:

"Induction is good and positive; it encourages you in your role." "Staff supervision is a process that helps you with all aspects of your work." "Praxis is aware of new or requested training needs."

HSC Trust Comments:

"No complaints from me or the tenant."

"The service is excellent and the staff communicate well with the HSC Trust." "I'm in the service a lot and have a good relationship with staff."

Relatives Comments:

"My ******* Is safe and secure in the house." "The staff are excellent and tell me if there are any concerns." "The staff treat *** well and make *** happy."

N/A				
Number of Requirements:	0	Number of Recommendations:	0]

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 reflected the views of service users and their representatives. The inspector saw records of a process involving the service user and their representatives, 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. 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 their representative. This was evidenced through a variety of records including risk assessments, care plans. 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 provided evidence 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 examined 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.

Feedback from relatives, records of monthly monitoring reports and minutes of service users' meetings provided examples of how the agency delivers services in response to the views of service users and 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 service user meetings provided 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 evidence that service users receive care in an individualised manner. Care plans and agency records were written in a person centred manner. One service user stated: *"The staff know what I need and help me achieve my goals."*

Service users and 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; one relative described having their views taken into account; minutes of meetings with service users 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 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.

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

Service user comments:

"Staff listen and are concerned about us." "Staff make me feel good about myself."

Staff Comments:

"Training enables us to be positive and helps us provide tenants with effective support." "Consistency of approach is important and can be seen as helping with support needs." "Person centred planning is of great benefit to tenants."

HSC Trust Comments:

"****** family are happy with the service as there were problems in the past with other services."

"The staff do have great relationships with the tenants."

Relatives Comments:

"We are very satisfied with the service." "I have no concerns about my ******* welfare." "Staff ensure *** views are heard." "The staff are very good and friendly to ***."

Areas for Improvement N/A

Number of Requirements:	0	Number of Recommendations:	0
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5.5 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 were no complaints within the time period specified.

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.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Gerry Heatley	Date Completed	9/6/15
Registered Person	Willie McAllister on behalf of Irene Sloan	Date Approved	10/6/15
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	19/8/15

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

Please complete in full and returned to <u>Supportedliving.services@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.