

# Inspection Report Adult Placement Agency

6 May 2021



## Causeway Share the Care Scheme

Type of service: Adult Placement Agency  
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Assurance, Challenge and Improvement in Health and Social Care

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## 1.0 Service information

<b>Organisation/Registered Provider:</b> Northern HSC Trust	<b>Registered Manager:</b> Mrs Beverley Spence
<b>Responsible Individual:</b> Ms Jennifer Welsh	<b>Date registered:</b> 24 December 2019
<b>Person in charge at the time of inspection:</b> Registered manager	
<b>Brief description of the accommodation/how the service operates:</b> Causeway Share the Care Scheme aims to promote the rights of individuals, to access respite care in the community. The scheme, through the provision of a range of adult placements, ensures that needs are met. Whilst on placement, individuals have the opportunity to share the family life of the adult placement carer, in a home from home environment.  The agency currently has 125 carers and 215 service users.	

## 2.0 Inspection summary

An announced inspection took place on 6 May 2021 from 09-10 am to 11-15 am by the care inspector

This inspection focussed on:

- The carer recruitment records
- Training records
- Covid-19 arrangements with carers
- Monitoring records
- Reviews
- Annual quality report

Evidence of good practice was found in relation to Access NI. Good practice was also found in relation to all current Covid-19 guidance, the use and provision of personal protective equipment (PPE).

Covid-19 education and management, It was also noted that a number of comprehensive systems of capturing feedback from both carers and service users was in place.

We would like to thank the manager, service users and carers for their support with the inspection process.

### **3.0 How we inspect**

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

Prior to inspection we reviewed the information held by RQIA about this service. This included the previous inspection report, any notifiable events, written and verbal communication received since the previous care inspection.

Both service users and carers were contacted to find out their views on the service.

A range of relevant documents, policies and procedures relating to the agency were reviewed.

### **4.0 What people told us about the service**

We received a number of returned questionnaires from both carers and service users who were very satisfied with the service.

#### **Carer comments**

- "Our team of share the care social workers provide an excellent support service."
- "My social worker is excellent. She never stops working and is 100% committed to her carers and clients."
- "The manager has done an amazing job in difficult circumstances."
- "2020 was different and difficult year. My social worker was very good at keeping me up to date, on how things were progressing, or how thing were at the time."

### **5.0 The inspection**

#### **5.1 What has this service done to meet any areas for improvement identified at or since last inspection?**

The last inspection to the service was undertaken on the 9 March 2020 by a care inspector; no areas for improvement were identified.

## 5.2 Inspection findings

### 5.2.1 Are there systems in place for identifying and addressing risks?

The agency's provision for the welfare, care and protection of service users was reviewed. The organisation's policy and procedures reflect information contained within the Department of Health's (DOH) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlines the procedure for staff in reporting concerns. The organisation has an identified Adult Safeguarding Champion (ASC).

Discussions with the manager demonstrated that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting adult safeguarding concerns. The manager could describe the process for reporting concerns.

It was noted that carers are required to complete adult safeguarding training during their induction programme and updates thereafter in line with training guidance. Records reviewed show clear evidence of training and training content.

### 5.2.2 Are there robust systems in place for Carer Recruitment?

Carer recruitment is completed in conjunction with the organisations carer recruitment process. The review of the agency's recruitment records confirmed that recruitment was managed in accordance with the regulations and minimum standards, before carers commence direct engagement with service users. Records viewed evidenced that criminal record checks (Access NI) had been completed for carers and others. Confirmation of carer recruitment records show that all required documentation was in place as outlined in legislation and the agency's own policies and procedures.

### 5.2.3 Are there robust governance processes in place?

There was evidence that confirmed the agency completed a number of monitoring visits and their annual quality report.

Comments reviewed in the above records from service users and carers included:

- "The family are so nice."
- "I'm very pleased with the service."
- "I'm happy to stay with. \*\*\*\*\*"
- "We are well supported by staff."
- "The matching process is important."

Service user and carers comments during the annual quality monitoring review:

- "I like to go out for drives and go to shops for treats."
- "I can go to \*\*\*\*\* for anything."

- “We are a family.”
- “They look after me well.”
- “I am more than satisfied with all the help I get.”
- “The share the care scheme provide good support, our social worker is excellent.”
- “Good contact with Covid-19, always very helpful with calls to keep in touch.”
- “I have a great relationship with me social worker.”

Comments from carers during the annual review show clear evidence of satisfaction levels. Comments included:

- “I’m happy with the efficient and effective service the team provide.”
- “\*\*\*\*\* has been here for \*\*\*\*\* years and is very contented living with us.”
- “There is a close bond between us.”

It was noted that carers are required to complete adult safeguarding training during their induction programme and updates thereafter.

The agency has a system for retaining a record of referrals made to the HSCT in relation to adult safeguarding. Records viewed and discussions with the manager indicated that a number of adult safeguarding referrals have been made since the last inspection. These were actioned by the agency in line with legislation and their own policies and procedures

The agency maintains a policy relating to complaints and compliments; these records are recorded and managed in accordance with the agency’s policy and procedure. On the day of the inspection it was noted that the agency had received no complaints since the last inspection 9 March 2020.

#### **5.2.4 What Covid-19 arrangements were in place to support carers?**

It was established that carers were made aware of covid-19 plans in line with the agency’s guidance documents.

Personal protective Equipment training (PPE) and were made available in easy read documents.

Confirmation of current practices relating to the following areas of guidance and good practice relating to Covid-19 was noted and included.

- Dissemination of information to carers and service users
- Monitor carer practice
- IPC policies and guidance
- Procedures have been updated to address all current guidance in relation to Covid-19.
- Used PPE storage and disposal

### **5.2.5 Are their arrangements in place for carer training?**

Examination of training records show that all required training was completed with carers either by electronic communication or face to face home visits.

Review of training records show that carers were satisfied with training.

## **6.0 Conclusion**

As a result of this inspection no areas for improvement were identified. Based on the inspection findings and discussions held we are satisfied that this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the manager/management team.

## **7.0 Quality Improvement Plan/Areas for Improvement**

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Beverly Spence registered manager, as part of the inspection process and can be found in the main body of the report.



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