



The Regulation and  
Quality Improvement  
Authority

Triangle Housing Association  
RQIA ID: 10902  
Kilns Court  
2 Kilns Road  
Ballycastle  
BT54 6RY

Inspector: Rhonda Simms  
Inspection ID: IN 22957

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**Unannounced Care Inspection  
of  
Triangle Housing Association  
Kilns Court**

**17 July 2015**

The Regulation and Quality Improvement Authority  
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
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## 1. Summary of Inspection

An unannounced care inspection took place on 17 July 2015 from 14.00 to 17.45. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. 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

Following the care inspection of 30 September 2014, the registered person and their representatives attended a meeting at RQIA's offices on 22 October 2014. This meeting concerned matters regarding: charging for personal care; the financial agreement; and the situation of the agency's office.

During and subsequent to the meeting of 22 October 2014, the registered person provided satisfactory assurance to RQIA to ensure compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

### 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
<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> Christopher Alexander	<b>Registered Manager:</b> Maire Colette Sheppard
<b>Person in charge of the agency at the time of Inspection:</b> Danielle Madden	<b>Date Manager Registered:</b> 5 July 2009
<b>Number of service users in receipt of a service on the day of Inspection:</b> 8	

Triangle Housing Association at Kilns Court, Ballycastle, is a domiciliary care type supported living service which provides care and support for eight service users with a learning disability and/or complex needs.

Service users rent their accommodation in either single occupancy bungalows, or single accommodation apartments. Under the direction of the registered manager, Colette Sheppard, and the service manager, nine staff provide services on a 24 hour basis. Services can include assistance with daily living / life skills, involvement in the local community, and maintaining a tenancy, with the overall goal of promoting independence and maximising quality of life.

### 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:

- Report and QIP of previous RQIA care inspection
- Incidents
- Correspondence.

During the inspection the inspector met with three service users, the service manager, and three care and support staff. The inspector spoke with the registered manager, and received feedback from one community professional and three relatives.

Staff questionnaires were left for completion; three were returned. These indicated that staff were either satisfied or very satisfied:

- that service users receive care and support from staff who were familiar with their care needs
- that service users have their views and experiences taken into account in the way service is provided and delivered
- that an appropriate number of suitably skilled and experienced persons are available to meet the needs of service users
- that staff would be taken seriously if they were to raise a concern
- that the induction process had prepared them adequately for their role.

Questionnaires asking service users' views on the care they receive were left in the agency for completion; six were returned.

Service users were either satisfied or very satisfied:

- with the care and support they receive
- that their views and opinions are sought about the quality of service
- that staff know how to care for them and respond to their needs
- that staff help them feel safe and secure
- that staffing levels are appropriate.

Comments included:

‘I enjoy my one to one time with staff in the evenings.’

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
- Staff meeting minutes
- Records relating to staff training
- Records relating to staff supervision
- Supervision policy
- Complaints records
- Recruitment policy
- Induction procedure
- Records of induction
- Staff register
- Staff rota information
- Staff handover information
- Staff newsletter
- Tenant meeting minutes

## **5. The Inspection**

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

The previous inspection of the agency was an announced care inspection dated 30 September 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
<p><b>Requirement 1</b></p> <p><b>Ref:</b> Regulation 23 (1) (5)</p>	<p>The registered manager must ensure that (1)The registered person shall establish and maintain a system for evaluating the quality of the services which the agency arranges to be provided</p> <ul style="list-style-type: none"> <li>• The registered person must ensure that the ongoing evaluation of restrictive practice is included in the monthly monitoring reports</li> </ul> <p>(5)The system referred to in paragraph (1) shall provide for consultation with service users and their representatives.</p> <ul style="list-style-type: none"> <li>• The registered person must ensure that a system for evaluating the quality of services is maintained and includes consultation with service users and their representatives.</li> </ul> <p><b>Action taken as confirmed during the inspection:</b></p> <p>The inspector examined five reports of monthly monitoring undertaken on behalf of the registered person. The reports included the views of relatives and professionals, or explanations when comments could not be obtained.</p>	<p><b>Met</b></p>

Previous Inspection Recommendations		Validation of Compliance
<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standard 8.11</p>	<p>The registered manager must ensure that The registered person monitors the quality of services in accordance with the agency's written procedures and completes a monitoring report on a monthly basis. This report summarises any views of the service users and/or their carers/representatives ascertained about the quality of the service provided, and any actions taken by the registered person or the registered manager to ensure that the organisation is being managed in accordance with minimum standards.</p> <p>This refers to ascertaining the views of service users, and representatives, and professionals, in monitoring reports on a monthly basis.</p>	

	<p><b>Action taken as confirmed during the inspection:</b></p> <p>The inspector examined five reports of monthly monitoring undertaken on behalf of the registered person. The reports included the views of relatives and professionals, or explanations when comments could not be obtained.</p>	<p><b>Met</b></p>
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### 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 up to ten days, plus an additional five days training. The agency maintains a record of the induction provided to 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 service manager advised that the agency's own staff cover all shifts; this was supported by feedback from staff. The registered manager advised that the agency does not use employment agency staff; the agency has procedures and an induction in place regarding the use of employment agency staff which were examined by the inspector. The inspector noted that team meeting minutes included discussion regarding procedures to be used if employment agency staff are required in future.

The agency has a policy and procedure in place for staff supervision and appraisal which details frequency: four performance reviews each year, two of which are competency assessments. Staff who spoke to the inspector confirmed that they had received supervision in line with policy and procedure, and that they could access informal supervision or consultation with a senior member of staff at any time if required.

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

#### Is Care Effective?

Discussions with the service manager and staff indicated that an appropriate number of skilled and experienced persons are available to meet the assessed needs of service users at all times. Examination of staff rotas reflected staffing levels described by the service manager and staff. A professional made positive comments regarding the skills of staff and the manager in providing care to a service user with complex needs.

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.

Records indicated that the induction is effective in preparing new staff for their role. The service manager discussed the agency's process of evaluating the effectiveness of staff induction through monthly supervision during the probationary period, observation and staff evaluation. The inspector examined records of supervision provided during the probationary period which included a comprehensive assessment of the employee's progress towards objectives.

Discussion with staff and examination of training records showed that the agency has a process in place to identify and respond to training needs. Staff described how the agency has responded to additional training needs by providing bespoke specialist training tailored to the needs of individual service users.

Supervision is provided by the service manager, who has been appropriately trained to carry out the role. Staff described receiving supervision and appraisal in line with the agency's policy, and having open access to a manager on shift, and an on call manager out of hours.

Staff interviewed by the inspector were aware of how to raise issues regarding poor practice and were confident of an appropriate management response. Staff knew how to access and use the whistleblowing policy.

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

### **Is Care Compassionate?**

The agency maintains a record of comments made by service users/representatives in relation to staffing arrangements, including through monthly monitoring reports and tenants' meetings. Service users expressed an awareness of the staff rota and knew how to access information about staffing arrangements.

During the inspection staff described how significant staff changes are discussed with service users, including the introduction of new staff. The inspector noted that the agency has good continuity of staff with few changes.

Service users discussed impending changes regarding the situation of the registered office and staffing arrangements with the inspector. It was clear that service users had been consulted with and involved in a process of preparing for change. A service user commented, 'The staff talked to me about the office moving and why'.

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 described how the induction process involves meeting service users and learning about their care needs with an experienced 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.

Agency staff who took part in the inspection confirmed that they have the knowledge and skills to carry out their roles and responsibilities. A professional commented positively on the skills of the manager, the staff team, and the person centred ethos of the service.

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

## Areas for Improvement

There were no areas for improvement identified.

<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 reviewed a range of care and support plans devised with service users which reflected assessments of need and risk assessment. A service user commented, 'The staff talk to me about my care plan, they ask me what I want to put in it'.

Staff discussed examples of positive risk taking in practice, where service users were supported by staff to maintain or promote independence by taking part in activities of their choice. Staff described working with relevant professionals to increase the independence of service users through positive risk taking. Feedback from service users indicated that appropriate support is provided to extend independence.

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

#### Is Care Effective?

Records were maintained which showed that care is regularly evaluated and reviewed within procedural guidelines and as the service user's needs change. This process was particularly evident in documentation concerning a service user with complex needs. The views of service users and/or their representatives were recorded in review records.

The inspector viewed a range of care and support plans which were written in a person centred manner, clearly included the service users' views throughout, and showed evidence of updating.

Service users discussed an area of change in the way services are delivered which indicated that the agency was responsive to the views of service users during implementation of the change process.

The agency has processes in place to ascertain and respond to the views of service users and their representatives, including through surveys, monthly monitoring, the complaints process and tenants' meetings. The inspector met with service users who were able to describe the decisions they make about how they lead their lives.

Service users have been provided with information relating to human rights and advocacy in a suitable format. Some service users have received training from the agency and been involved in advocating on behalf of other service users across the organisation, and in the local community.

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

## Is Care Compassionate?

Feedback from service users indicated that they receive care in an individualised manner; this was supported by care records. A professional provided feedback regarding an individualised care and support plan which has been reviewed and updated over time to suit the needs and wishes of the service user.

A professional commented:

‘(The service manager) does not see problems, she sees solutions.’  
 ‘The staff are constantly thinking of ways to alleviate (the service user’s) fears.’

Discussions with staff showed that they knew and understood the needs and wishes of service users. Comments made to the inspector with regard to the needs of a service user were discussed with the service manager.

Triangle Housing Association involves service users in tenants’ meetings and with consultation and advocacy groups across the wider organisation. The inspector noted that staff issues, safeguarding, and human rights are included in each tenants’ meeting and reflected in the minutes.

It was evident from discussion with service users and relatives that they are aware of their rights to be consulted and have their views considered in relation to service delivery. A service user commented, ‘I speak to (the service manager) if I am not happy...or Colette Sheppard’.

The inspector observed service users expressing their views and receiving appropriate considered responses from staff. Staff discussed how the agency facilitates service users to make choices regarding their daily routines and activities. This was supported by discussions with service users.

The agency could demonstrate that the service users’ views, capacity and consent have been taken into account in service delivery. The agency was able to demonstrate ongoing promotion of human rights and the values underpinning the Minimum Standards. Discussions with staff indicated that values underpinning the Minimum Standards are embedded in service delivery.

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

### Service users’ comments

‘I took part in a recent choice checker chat through Triangle.’  
 ‘I have a section in the staff newsletter called ‘\*\*\* Blogs.’  
 ‘I’m happy down here.’  
 ‘Colette Sheppard (the registered manager) came here and asked me....’  
 ‘The staff are great.’  
 ‘I love it here.’  
 ‘I do my own cooking, the staff help me.’  
 ‘The staff tell me how much my bills are, the staff help me with my money.’

### Relatives' comments

'\*\*\*\* absolutely loves it.'

'I cannot fault the care and support at Kilns Court or the staff.'

'The staff care about the people.'

'(The service manager) is very understanding about the needs of the clients, she is very approachable.'

'(The staff) are all very kind and understanding.'

'We are very happy with the relationship \*\*\*\* has with the staff.'

### Professionals' comments

'The manager is fantastic, there is a great ethos.'

'With a very complex service user, the staff have excelled themselves with social and interpersonal skills.'

'The staff have the clients' best interests at heart, they treat people very well.'

'The staff team are excellent, they are very proactive.'

'The service user is learning new skills and re learning old skills.'

'The staff are mindful and respectful of (the service user's) home.'

### Areas for Improvement

There were no areas for improvement identified.

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

### Quality monitoring

Reports of monthly quality monitoring completed on behalf of the registered person were examined during inspection. The reports ascertain and respond to the views of service users, relatives, professionals and staff. The reports progress on improvement issues identified by monitoring and RQIA Quality Improvement Plans.

### Complaints

The inspector examined records of complaints received from 1 January 2014 - 31 March 2015 which had been appropriately addressed.

### Safeguarding

The inspector was advised that no safeguarding referrals have been made since the last inspection.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

<b>Registered Manager</b>	Colette Sheppard	<b>Date Completed</b>	17/08/15
<b>Registered Person</b>	Chris Alexander	<b>Date Approved</b>	17/08/15
<b>RQIA Inspector Assessing Response</b>	Rhonda Simms	<b>Date Approved</b>	15/09/15

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\**