

**Unannounced Care Inspection
of
Hanna Street Supported Living**

9 June 2015

1. Summary of Inspection

An unannounced care inspection took place 9 June 2015 from 10.30 to 16.45. 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

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: Hanna Street/Martin Dillon	Registered Manager: Barbara McGarrity
Person in charge of the agency at the time of Inspection: Barbara McGarrity	Date Manager Registered: 27/08/2009
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:

- Report and QIP of previous RQIA care inspection
- Incidents and risk assessments
- Correspondence

During the inspection the inspector met with six service users, the registered manager, five staff, spoke with one professional and two relatives.

Staff questionnaires were left at the agency for completion, five were returned. These indicated that staff were either satisfied or very satisfied:

- that service users receive care and support from staff who are 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.

Comments included:

‘I feel management, staff and service users work together to create a safe and happy environment where service users wishes and concerns are addressed in a caring environment.’

‘I’m very pleased with the care and service residents gets from all the staff working in Hanna Street.’

‘The clients have made me welcome into their home.’

Questionnaires asking service users’ views on the care they receive were provided; five were completed.

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:

'love it'
'happy here'

The following records were examined during the inspection:

- Care and support plans
- HSC Trust assessments of needs and risk assessments
- Care review records
- Minutes of service users' meetings
- Recording/evaluation of care used by the agency
- Records of service user consultation
- Monthly monitoring reports
- Staff meeting minutes
- Staff training records
- Records relating to staff supervision
- Supervision policy
- Complaints records
- Recruitment policy
- Induction procedure
- Records of induction
- Staff handbook
- Staff register
- Staff rota information
- Information provided to staff regarding their roles and responsibilities

5 The Inspection

Hanna Street Supported Living Service is a supported living type domiciliary care agency which provides care and support to thirteen service users who have learning disability and additional complex needs. Ten service users live in a shared house at Hanna Street, and three service users are supported in single occupancy accommodation in the local area. The agency's aim is to promote and encourage independent living for adults with learning disabilities.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 18 July 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
Requirement 1 Ref: 23 (2) (5)	<p>(2) At the request of the Regulation and Quality Improvement Authority; the registered person shall supply to it a report, based upon the system referred to in paragraph (1), which describes the extent to which, in the reasonable opinion of the registered person, the agency-</p> <ul style="list-style-type: none"> (a) Arranges the provision of good quality services for service users; (b) Takes the views of service users and their representatives into account in deciding- <ul style="list-style-type: none"> (i) What services to offer them, and (ii) The manner in which such services are to be provided <p>(5) The system referred to in paragraph (1) shall provide for consultation with service users and their representatives</p> <p>The registered person must ensure</p> <ul style="list-style-type: none"> • That the ongoing assessment of restrictive practice is included in the monthly monitoring reports. • That reports are of consistent quality and note if the visit was announced or unannounced. • That the reports relate clearly to the domiciliary care agency. <p>Action taken as confirmed during the inspection:</p> <p>The inspector examined reports of monthly reports which related clearly to the domiciliary care agency, noted if the visit was announced or unannounced, and included an ongoing report of restrictive practice. The inspector noted that the reports were consistently of a good quality.</p>	Met
Requirement 2 Ref: 6 (1) (b)	<p>((1)The registered person shall produce a written service user's guide which shall include-</p> <p>(b) the terms and conditions in respect of the services to be provided to service users, including details as to the amount and method of payment of fees, if appropriate.</p>	

	<p>The registered person must ensure that RQIA is informed in writing of the terms, conditions and costs to service users relating to the new transport scheme, taking into account the assessed transport needs and preferences of service users. The agency's policies and procedures should include an explanation and specific details of the associated costs contributing to the charges to be made to service users.</p> <p>The agency should arrange to share its revised transport policy and procedures with the relevant HSC Trusts involved with the service users.</p> <p>The registered person must ensure that a transport agreement is in place between the agency and each service user and/or their representative. A copy of the agreement signed by the service user and/or their representative and the registered person must be retained in the service user's records.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>The registered manager advised that the agency does not have a transport scheme which incurs costs for service users. The Trust currently provides a vehicle for use of service users which is free of charge.</p> <p>The registered manager provided assurance that the agency will inform RQIA of terms and conditions if a scheme is devised which results in costs to service users.</p>	
Previous Inspection Recommendations		Validation of Compliance
<p>Recommendation 1</p> <p>Ref: Standard 1.1</p>	<p>It is recommended that: The values underpinning the standards inform the philosophy of care and staff of the agency consistently demonstrate the integration of these values within their practice.</p> <p>This recommendation refers to the arrangements in place to promote the service users' independence with regard to budgeting, their receipt and management of household and utility bills.</p>	

	<p>Action taken as confirmed during the inspection:</p> <p>The registered manager discussed how staff promote the independence of service users by providing appropriate support with personal budgeting and the payment of bills.</p> <p>The registered manager advised that the Trust is reviewing its current practice of meeting all utility costs.</p>	Met
<p>Recommendation 2</p> <p>Ref: Standard 2.2</p>	<p>Prospective service users are provided with information on the services provided by the agency.</p> <p>2.2 The service user's guide contains information on the following:</p> <ul style="list-style-type: none"> • The name of the registered manager and the general staffing arrangements <p>It is recommended that the registered person ensures that the agency's documentation does not describe staff working in a supported living service as residential workers. Staff should be described in terms appropriate to a supported living ethos.</p> <p>The relevant documentation should be forwarded to RQIA.</p> <p>Action taken as confirmed during the inspection:</p> <p>The Trust has amended agency documentation to describe staff in terms appropriate to a supported living ethos.</p>	Met

Recommendation 3 Ref: Standard 8.11	<p>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 professionals in monitoring reports on a monthly basis.</p> <hr/> <p>Action taken as confirmed during the inspection:</p> <p>The monthly monitoring reports examined by the inspector included the views of community based professionals. The inspector noted that the views of professionals provided assurance regarding the quality of care supplied to service users.</p>	<p>Met</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 is maintained, including those supplied on a temporary basis. The registered manager discussed the agency's processes to ensure that domiciliary care workers supplied are physically and mentally fit for the purposes of work and showed the inspector relevant documentation.

The agency has a structured induction programme which includes two days training, a one day corporate induction, and a five days induction on site. 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 registered manager advised that the agency's own staff or a regular pool of staff employed in other services operated by the agency is usually available to cover shifts; this was supported by feedback from staff. The registered manager discussed the agency's procedures for use of staff supplied by a domiciliary care employment agency and showed the inspector documentation relating to this. The arrangements used to cover shifts at short notice were satisfactory.

The agency has a policy and procedure in place for staff supervision and appraisal which details frequency. Staff feedback and the examination of records relating to supervision confirmed that staff receive supervision in line with policy and procedure. Staff described how they can 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 registered manager and staff indicated that an appropriate number of skilled and experienced persons are available at all times. The inspector noted that a number of staff have worked with the agency for a period of years. Examination of staff rotas reflected staffing levels described by the registered manager and staff. During the inspection the inspector observed appropriately skilled staff responding to service users' needs. Feedback from professionals in the monthly monitoring reports indicated that skilled staff provide an effective service to service users.

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 and could describe effective methods of communication within the agency.

Staff feedback and examination of records indicated that the induction programme is effective in preparing new staff for their role.

The registered manager discussed the agency's process of evaluating the effectiveness of staff induction through supervision, observation, feedback from staff and service users.

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 reported that the agency responds to their requests for additional training.

Supervision and appraisal is currently provided by the registered manager who is appropriately trained for the role. Staff described receiving supervision and appraisal in line with the agency's policy.

Staff have access to all policies and procedures including the whistleblowing policy.

Staff comments

'Management in the unit are very approachable if staff have any concerns and will act to resolve any problems any staff member has.'

‘Training is very well organised.’

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

Is care compassionate?

The inspector viewed a record of comments made by service users in relation to staff changes. The records indicated that service users are involved in the evaluation of new staff.

The agency has been able to maintain continuity of staff through a stable staff team and use of former permanent staff on a ‘bank’ basis. Feedback from a professional indicated that the consistency of staff has a positive benefit 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 confirmed that they have appropriate knowledge and skills to carry out their roles and responsibilities; this was supported by comments from relatives. The agency’s induction process is implemented in a manner which takes into account the consent, privacy and dignity of service users.

The registered manager discussed the agency’s processes to address unsatisfactory performance of a domiciliary care worker.

Relatives’ comments

‘There is great help and support’

‘It couldn’t be any better.’

‘We are very happy with the service.’

‘The service is excellent, ****’s needs are well met.’

‘The key worker is excellent.’

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

Areas for Improvement

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 their representatives. The inspector reviewed a range of care and support plans devised with service users which reflected assessments of need and risk assessment.

There was evidence of positive risk taking in collaboration with the service users and/or their representatives. Agency staff discussed examples of positive risk taking where service users were supported by staff to maintain or promote independence and choice.

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

Is care effective?

Records of reviews showed that care is regularly evaluated and reviewed. The agency has a process of reviewing care and support plans monthly with service users, with at least a yearly review including a community worker from the Trust. 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.

The agency has processes in place to ascertain and respond to the views of service users and their representatives, including monthly reviews with service users, an annual survey, and the monthly monitoring reports.

The service user meeting minutes provided evidence of how the agency delivers the service in response to the views of service users. The views of professionals stated in monthly monitoring reports reflected positive working relationships between the agency and community professionals.

Service users who met with the inspector described how the agency had responded to their views. Observation during the inspection showed that the agency has an ethos of ascertaining and responding to the views and choices of service users.

Service users have been provided with information relating to human rights and advocacy in a suitable format.

Service users' comments

'I get on alright.'

Relatives' comments

'I can speak to staff if there are any issues, staff would be very helpful.'

'There is never any problem, I can approach staff if need be.'

Staff comments

'Staff and residents have regular meetings where everyone can discuss any issues or topics and try to resolve any problems.'

'Care and support plans are reviewed from week to week.'

Professional's comments

'Communication is particularly good.'

'Staff are committed.'

'The support (for service users) is tremendous.'

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

Is care compassionate?

During the inspection, the inspector observed staff providing care to service users in an individualised manner. The inspector observed service users making choices about their daily activities and had discussions with service users about their individual lifestyles. Discussions with staff showed that they knew and understood the needs and wishes of service users.

It was evident from documentation and 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.

The agency could demonstrate that the service users' views, capacity and consent have been taken into account in service delivery; examples of this were observed by the inspector during the inspection. The agency was able to demonstrate ongoing promotion of human rights and the values underpinning the Minimum Standards. This was supported by the views of professionals ascertained in written form as part of monthly quality monitoring.

Relatives' comments

'**** is content and we're content.'

'It is home, **** is content.'

'We are fully aware of what is going on, we are kept in the picture.'

Staff comments

'Everyone's needs are different.'

Professional's comments

'The atmosphere is positive.'

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

Areas for Improvement

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

Complaints

Records of one complaint made from 1 January 2014 - 31 March 2015 were examined.

The complaint record examined by the inspector had been satisfactorily investigated and documented.

Safeguarding issues

Records of safeguarding referrals were examined and discussed.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Barbara McGarrity	Date Completed	25-06-2015
Registered Person	Martin Dillon	Date Approved	06/05/15
RQIA Inspector Assessing Response	Rhonda Simms	Date Approved	14/07/2015

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

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.