



The Regulation and  
Quality Improvement  
Authority

Northern Ireland Institute for the  
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**Announced Care Inspection  
of  
Northern Ireland Institute for the Disabled**

**14 May 2015**

The Regulation and Quality Improvement Authority  
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## 1. Summary of Inspection

An announced care inspection took place on 14 May 2015 from 09.00 to 13.30. 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
<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> Northern Ireland Institute for the Disabled	<b>Registered Manager:</b> Paula Brittain
<b>Person in charge of the agency at the time of Inspection:</b> Mrs Gillian O Conner	<b>Date Manager Registered:</b> 18 January 2010
<b>Number of service users in receipt of a service on the day of Inspection:</b> 23	

## 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, four care staff and the senior support worker and Team leader. The inspector also had the opportunity speak with two relatives and a staff member from the HSC Trust and has added their comments to this report.

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 October 2014.
- Staff meeting minutes for October 2014, December 2014, January and March 2015.
- Staff training records
- Records relating to staff supervision

- Complaints records
- Recruitment policy the policy was updated by the agency on the 9 February 2014.
- Records relating to recruitment process
- Induction procedure
- Records of induction
- Staff register and associated records
- Staff rota information.

Nine 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 that are familiar with their needs.
- You will be taken seriously if you were to raise a concern.

**Individual staff comments:**

*"NIID provide plenty of training courses for staff."*

*"Our manager has an open door policy."*

*"Our manager listens to our concerns."*

*"I think the care and support given to everyone is excellent."*

*"I feel care and support is of an excellent standard."*

*"Everyone works together as a team."*

*"I feel privileged to be part of this agency."*

*"I have been given a warm welcome and been well supported by my work colleagues and mentor."*

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

**Individual comments made by service users.**

*"I have a bedroom that looks over rocks and a golf course. What more do I want?"*

*"I think of everyday as a holiday."*

*"We are surrounded by shops if I had more space, I would make more use of them."*

## 5. The Inspection

NIID (The Northern Ireland Institute for the Disabled) is a supported living type domiciliary care agency. The agency provides care / support to disabled people in their own individual bungalows, in Strickland's Glen, Bangor.

The agency's aim is to "provide the highest standard of person centred care and support, promoting independence and integration within the local community". The agency's values are to "provide a safe environment which is service user focused, open and transparent, promoting team-work and personal development".

Service is provided to twenty three tenants by forty five staff; service includes personal care, preparation of meals, as well as assistance. All services required are agreed by the tenant and the HSC Trusts care managers.

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

The previous inspection of the agency was an announced care inspection dated 19 May 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: Regulation 15 (6)d</b></p>	<p>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:</p> <ul style="list-style-type: none"> <li>• Utilities bills</li> </ul> <p>The service user's individual financial agreements will have to be further developed to reflect any payments made by them for utilities costs and reimbursements received.</p> <p>This requirement is in relation to the agency's arrangements for documenting in detail the nature of all charges made to service users. The agency must inform RQIA of reimbursements made in respect of utilities charges.</p>	<p><b>Met</b></p>
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>The inspector saw a number of records relating to the charges made by the agency. The records in place were satisfactory.</p>	

### 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 at least three days; this was confirmed by staff interviewed. One staff member interviewed stated: "The induction and training has prepared me well for the job." 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 one recently inducted staff member. The following topics are covered during the induction period:

- *Introduction*
- *Orientation*
- *Roles and responsibilities*
- *Key personnel*
- *Supporting people principles*
- *Support and care*
- *Policies and procedures*
- *Shadow working*

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 in place a staff support policy that outlines supervision and appraisal and details the frequency of both. The policy discusses the two way process recognising the need to establish a respectful and purposeful working relationship. Records maintained of supervision and appraisal demonstrated that the frequency was in accordance with the agency's policy and procedure.

One relative stated: "Our relative now has a life and is safe and secure."

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

##### Is Care Effective?

Discussions with the senior support worker 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 senior support worker 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 senior support worker and staff described a process of re-evaluating and improving training to suit the needs of staff and service users. Staff also described the evaluation of training and induction by them and their supervisor. 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 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 senior support worker 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.

One relative described the care and support received by their son as, going from "Darkness to Light" in comparison to other long term institutional care."

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

**Service user comments**

“Staff have my interests in mind.”

“What I want to do is important.”

“Staff listen to me and help me to be independent.”

**Relatives' comments**

“The staff are excellent.”

“The staff make the family feel very welcome, and support us well.”

“I can only describe the service as fantastic.”

**HSC Trust comments**

“An excellent service.”

“I attend all my clients' reviews, and any difficulties/issues are resolved by the staff.”

**Staff comments**

“Training is excellent.”

“I have good support from other staff.”

“The manager and seniors are excellent.”

“Induction and supervision are good and help with my work.”

**Areas for Improvement**

N/A

<b>Number of Requirements</b>	<b>0</b>	<b>Number 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 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.

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.

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 suggest that service users receive care in an individualised manner. Records in place provided evidence that care plans and care 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.

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**

"This is the best place I have lived."

"Staff are great."

"Staff support me well."

"My keyworker understands me and we have a good relationship."

### **Relatives' comments**

"An excellent high standard of care and support."

"People are treated as individuals."

"The support staff provide is excellent."

### **HSC Trust comments**

"The staff manage any difficulties with professionalism."

"My Client is very happy there and has improved well."

**Staff comments**

“The manager communicated well with all staff and tenants.”

“Tenants are encouraged to be independent.”

“This is the best place for encouraging the tenants to be involved.”

“We listen to the tenants and support their needs.”

“We respond to the views of the tenants.”

**Areas for Improvement**

N/A

<b>Number of Requirements</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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**5.5 Additional Areas Examined****Statement of Purpose**

The agency’s statement of purpose was examined and reflected the nature and range of services provided by the agency.

**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 eight complaints within the time period specified. The complaints examined by the inspector had been satisfactorily investigated and documented.

**No requirements or recommendations resulted from this inspection.**

<b>I agree with the content of the report.</b>			
<b>Registered Manager</b>	Paula Brittain	<b>Date Completed</b>	9/6/15
<b>Registered Person</b>	John Miskimmon	<b>Date Approved</b>	29/6/15
<b>RQIA Inspector Assessing Response</b>	<b>Jim Mc Bride</b>	<b>Date Approved</b>	<b>15/7/15</b>

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

This is a very good report and speaks well for all staff involved in the Strickland's Care Village

***\*Please complete in full and returned to [Supportedliving.services@rqia.org.uk](mailto: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. 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.