

Inspection Report Adult Placement Agency

10 May 2021



Lakeview Adult Placement Agency

Type of service: Adult Placement Agency
Address: Lakeview Hospital, Gransha Park, Londonderry,
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

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| Organisation/Registered Provider: Western Health & Social Care Trust | Registered Manager: Mrs Eileen Maguire |
| Responsible Individual: Dr Anne Kilgallen | Date registered: 8 January 2020 |
| Person in charge at the time of inspection: Registered manager | |
| Brief description of the accommodation/how the service operates: Lakeview Adult Placement Agency aim is to provide a quality service to adults with a learning disability in a home from home environment. The adult placement scheme is a community based shared care project that promotes the rights of the individual users to access a home from home adult placement in the community. This is through the provision of permanent placement/host placements in family homes in the community where the individual has the opportunity to share family life. The agency has currently placed 47 adults within placements supported by 34 Adult Placement Carers. | |

2.0 Inspection summary

An announced inspection took place on 10 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

- "We feel we are getting great support from the team."
- "No problems at all."
- "Very supportive and helpful."

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 05 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 their 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, reviews and their annual quality report.

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

- "I'm happy with my placement."
- "I'm very happy and have and have trips out with the family."
- "Everything is great at home."
- "Everything is going well for *****."
- "All is going good in spite of Covid-19."
- "It's a pleasure to provide care to *****."
- "We are well supported by the community team."
- "I love staying with ***** she is lovely as are all the family."
- "My carer is great and helps me with everything."
- "It's the best experience seeing ***** doing so well."
- "The joy of looking after **** we have a special bond."

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 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 no adult safeguarding referrals have been made since the last inspection

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 5 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 that included easy read
- 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 Eileen Maguire Registered Manager as part of the inspection process and can be found in the main body of the report.



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