

Inspection Report Adult Placement Agency

13 May 2021



Positive Futures – Families Matter Shared Lives Service

Type of service: Adult Placement Agency
Address: Castleton Centre, 30a-34a York Road,
Belfast, BT15 3HE
Telephone number: 028 9074 1271

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

<p>Organisation/Registered Provider: Positive Futures</p> <p>Responsible Individual: Ms Agnes Lunny</p>	<p>Registered Manager: Ms Alison Milford</p> <p>Date registered: Awaiting Registration</p>
<p>Person in charge at the time of inspection: Ms Alison Milford</p>	
<p>Brief description of the accommodation/how the service operates: Families Matter Shared Lives Service offers people with a learning disability, acquired brain injury or autistic spectrum condition short breaks or longer stays with approved individuals or families (known as Shared Lives Carers).</p> <p>Within this report, adults in receipt of a service from the agency will be referred to as 'people supported', in accordance with their wishes. The agency has placed 21 people supported within a number of placements.</p>	

2.0 Inspection summary

An announced inspection took place on 13 May 2021 from 09-00am to 11-00 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 the people supported was in place. There was evidence of comprehensive contingency plans in the event of Covid-19 being present.

We would like to thank the manager, people supported 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 people supported 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

A number of returned questionnaires were received from both carers and people supported who were very satisfied with the service.

Comments included:

- "I love going to ***** and ***** house. I have missed them".
- "I love eating out and watching movies".
- "All staff do a great job and go over and above, they ae only a phone call away".
- "I love going to *** and *****.They take me out everywhere, I love them".
- "I am extremely impressed with the staff".
- "I'm always made feel part of the team".

Review of the "How happy are you" quality survey completed by the agency, shows good satisfaction levels and comments included:

- "I love going to ****" they are like my family."
- "If I need help I can talk to them."
- "My visits with ***** & ***** are lovely."

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 02 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 people supported 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). The ASC report for 2020 was available for review and the 2021 report is currently being populated.

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 people supported. 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 people supported and carers included:

- "I'm missing my carer."
- "We can call staff at any time."
- "***** feels well supported."
- "All is good and I'm happy."
- "This has made a difference to my life."
- "I'm doing ok it has made me feel good."

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 a number of adult safeguarding referrals have been made since the last inspection. These were appropriately dealt with by the agency in line with policy 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 2 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 people supported 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.

Comments included:

- "Happy to have training refreshers."
- "Clear and easy to understand."
- "I have more awareness."
- "I enjoy having training."
- "All well explained."
- "I found the training helpful."

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 Ms Alison Milford Manager as part of the inspection process and can be found in the main body of the report.



The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
Twitter @RQIANews

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