



The Regulation and
Quality Improvement
Authority

The Pines
RQIA ID: 11309
48 Steeple Road
Antrim
BT41 2QA

Inspector: Jim McBride
Inspection ID: IN22319

Tel: 028 9442 8752
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**Unannounced Care Inspection
of
The Pines**

8 June 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced care inspection took place on 8 June 2015 from 08:30 to 12:30. 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
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: Anthony Stevens	Registered Manager: Robin Luke
Person in charge of the agency at the time of Inspection: The registered manager	Date Manager Registered: 24 June 2014
Number of service users in receipt of a service on the day of Inspection: 11	

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

Prior to inspection the following records were analysed:

- Previous inspection report and QIP
- Incidents
- Records of contact with the agency since the last inspection.

During the unannounced inspection the inspector had no opportunity to meet with service users, but did observe them interacting with staff and going about their daily activities.

The inspector contacted one service users' relative. The inspector also spoke to two HSC professionals on site during the inspection. During the inspection the inspector met with four care staff and the registered manager.

Specific methods/processes used in this inspection include the following:

- Discussion with the registered manager
- Examination of records
- Consultation with stakeholders/staff
- File audit
- Evaluation and feedback.

The following records were examined during the inspection:

- Six 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 January 2015, February 2015 and May 2015.
- Staff meeting minutes for February 2015 and May 2015.
- Staff training records
- Records relating to staff supervision
- Complaints records
- Recruitment policy the policy was updated by the agency on the 20 November 2014.
- Records relating to recruitment process
- Induction procedure
- Records of induction
- Staff register and associated records
- Staff rota information.

Four staff questionnaires were completed by staff during the inspection. One was returned following 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:

“Needs are assessed and support provided appropriately.”

“Tenants are listened to.”

“Tenants can come to the staff at any time.”

“We have built up a good staff tenant relationship and are available at all times to give support.”

During the inspection a number of questionnaires and envelopes were circulated to the service users to be completed, asking them about various aspects of their care. The inspector has had no response from service users prior to the report being published.

5. The Inspection

The Pines is a supported living type domiciliary care agency based in Antrim and managed by the Northern Health and Social Care Trust. It was purpose built by Helm Housing and provides accommodation for 12 tenants.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the “The Pines” was an announced care inspection dated 9 October 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: Regulation 5 (1) Schedule 1	The registered person shall compile in relation to the agency a written statement (in these Regulations referred to as “the statement of purpose”) which shall consist of a statement as to the matters listed in Schedule 1. This requirement relates to the inclusion of the nature and range of the services provided. The completed document should be forwarded to the RQIA.	Met
	Action taken as confirmed during the inspection: The agency’s statement of purpose was examined and reflected the nature and range of services provided by the agency at the time of the inspection.	

5.3 Theme 1: Staffing Arrangements - suitable staff are supplied to meet the assessed needs of service users

Is Care Safe?

The agency has in place a recruitment policy; this was updated on the 9 November 2014 by The Northern Health and Social Care Trust.

The manager confirmed that there is a mechanism in place to ensure appropriate pre-employment checks are completed and satisfactory records maintained were examined by the inspector. The agency maintains an alphabetical index of all domiciliary care workers supplied or available for supply for the agency.

The agency has a structured induction programme lasting at least three days. This was confirmed by the staff interviewed. The agency maintains a record of induction provided to staff; and included details of the information provided during the induction period.

The agency provides all staff with a handbook. The agency has a procedure in place for induction of staff for short notice/ emergency arrangements. The agency has in place a procedure for verifying the identity of all staff prior to their supply.

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

Is Care Effective?

Following discussions with the manager the inspector was provided with assurances that there is at all times an appropriate number of suitably skilled and experienced persons providing care to service users. Examination of available records reflected staffing numbers outlined by the registered manager.

The manager described to the inspector the arrangements in place to assess the suitability of staff. The agency provides staff with a clear outline of their roles and responsibilities.

Records in place provided evidence that agency staff receive induction prior to providing care/support to service users. This was confirmed by the staff interviewed by the inspector. The agency has a process for evaluating the effectiveness of staff induction, this includes competency assessments.

The agency has a process in place for identifying individual training needs. Staff described to the inspector how they are given the opportunity to identify their individual training needs.

The manager provided evidence that staff providing supervision had the necessary skills/ training required.

Agency staff are aware of the whistleblowing procedure for highlighting concerns/ issues; this was confirmed by staff during discussions with the inspector.

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

Is Care Compassionate?

The agency maintains a record of any comments made by service users/ representatives in relation to staffing arrangements. The manager stated that staff are not supplied to work with service users without an appropriate induction.

Records examined by the inspector provided evidence that staff receive induction training specific to the needs of individual service users. This was confirmed by the staff interviewed by the inspector.

The needs of individual service users are clearly identified within the induction process. Agency staff could demonstrate that they have the knowledge and skills to carry out their roles and responsibilities. One staff member stated *“Training is excellent and helps with your development.”*

The induction process takes into account the consent, privacy and dignity of service users. Staff receive ongoing supervision and assessment of competency to fulfil the requirements of their job role. The inspector read a number of staff competency assessments in place.

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

Staff Comments:

“Training is excellent.”

“The staff communicate well with each other.”

“Staff supervision helps you in your role.”

HSC Trust Staff Comments:

“I have a good relationship with staff.”

“Staff are helpful and support the tenants well.”

“The tenants do enjoy their activities.”

Relatives Comments:

“The staff are helpful and very caring.”

“I have good confidence in the staff.”

Areas for Improvement

N/A

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 examined by the inspector reflect the views of service users and their representatives. Assessments of need and risk assessments are reflected in care and support plans. There is evidence of positive risk taking in collaboration with the service user and/or their representative, the agency and the HSC Trust.

The agency staff interviewed showed an understanding of how to balance human rights with safety in service delivery.

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

Is Care Effective?

Care provision is regularly evaluated and reviewed. The review process includes involvement with service users and/or their representatives. This was confirmed by the manager and the examination of review records.

Care and support plans are written in a person centred manner which includes the service user's views. There is evidence that the delivery of the service is responsive to the views of service users and/or their representatives. The agency has a monitoring system in place to ascertain and respond to the views of service users and/or their representative's representatives.

The agency's human rights information examined provided evidence that service users are provided with information relating to their human rights in a suitable format.

Service provided to service users maximises their choice, independence and control over their lives. Service users and their representatives are made aware of representation and advocacy services.

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

Is Care Compassionate?

Through examination of six service users' care and support plans, the inspector found that service delivery has a person centred ethos.

Agency staff, who participated in the inspection understand and implement the values of respect, choice, dignity and independence daily to service users. Staff stated that service users can make choices regarding their daily routines and activities, within the resources available to them.

Explicit consideration of human rights was evident in the care and support plans examined by the inspector. Consideration of human rights includes the involvement of service users and/or their representatives. Agency staff spoken to described to the inspector how service users' views have been taken into account and shaped service provision.

Staff interviewed by the inspector described their understanding of:

- Human rights
- Promoting human rights in supported living.

Staff who participated in the inspection could describe aspects of service provision which show a reflection of choice, dignity, and respect.

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

Staff Comments:

“The tenants have settled well into supported living.”

“The tenants’ needs are taken into account when organising activities.”

“The tenants are involved in all their care choices.”

“Good communication between tenants and staff contributes to the service provided.”

“People are treated as individuals.”

“Tenants enjoy the supported living its more homely and they have more freedom to be part of the community.”

HSC Trust Staff Comments:

“Staff are very supportive to tenants”

“I attend all reviews and meeting as required”

“Staff and tenants interact well with each other”.

Relatives Comments:

“We have seen a big improvement in ***** since *** move to The Pines”

“The staff work hard to help with activities and things to do outside.”

Areas for Improvement

N/A

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

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 no complaints within the time period specified.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	ROBIN LUKE	Date Completed	19/06/2015
Registered Person	Tony Stevens	Date Approved	24/6/15
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	4/5/15

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 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.