

Unannounced Care Inspection Report 13 February 2020



The Pines

Type of Service: Domiciliary Care Agency
Address: 48 Steeple Road, Antrim, BT41 2QA
Tel No: 028 9442 8752
Inspector: Corrie Visser

www.rqia.org.uk

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

The Pines is a supported living type domiciliary care agency which provides a 24 hour supported living service for adults over 18 years of age who have enduring mental health needs. There is accommodation for 12 service users who have individual rooms and a number of shared facilities. The services are commissioned by the Northern Health and Social Care Trust (NHSCT) and Radius Housing.

3.0 Service details

Organisation/Registered Provider:
Northern Health and Social Care Trust (NHSCT)

Registered Manager:
Mr Robin John Luke

Responsible Individual(s):

Dr Anthony Baxter Stevens	
Person in charge at the time of inspection: Deputy Manager	Date manager registered: 24 June 2014

4.0 Inspection summary

An unannounced inspection took place on 13 February 2020 from 11.30 to 14.30 hours.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

There were no areas requiring improvement identified from this inspection.

Evidence of good practice was found in relation to the monthly quality monitoring reports, AccessNI and staff registration with the Northern Ireland Social Care Council (NISCC) and Midwifery Council (NMC).

The findings of this report will provide the agency with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Ms Deborah Williamson, deputy manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 17 January 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 17 January 2019.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this agency. This included the previous inspection report, the returned QIP, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service. We also spoke with HC professionals involved with the service.

We ensured that the appropriate staff checks were in place before staff visited service users.

- Recruitment records specifically relating to Access NI and NISCC registration.

Questionnaires and “Have we missed you?” cards were provided to give service users and those who visit them the opportunity to contact us after the inspection with their views. A poster was provided for staff detailing how they could complete an electronic questionnaire. No staff responses were received.

Ten questionnaires were also provided for distribution to the service users and their representatives; two responses were returned; analysis and comments are included within the report.

RQIA information leaflets ‘How can I raise a concern about an independent health and social care service’ were also provided to be displayed appropriately in the setting.

During the inspection the inspector met with two service users, two staff and one service users’ relative.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

The inspector would like to thank the person in charge, service users, service user’s relatives and staff for their support and co-operation throughout the inspection process.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

6.0 The inspection

Areas for improvement from the last care/finance inspection dated 17 January 2019		
Action required to ensure compliance with The Domiciliary Care Agencies Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 23. (2)(3) Stated: First time	In accordance with Regulation 23 (2) (3), the registered person must forward to RQIA reports of quality monitoring visits undertaken on a monthly basis until further notice.	Met

	<p>Action taken as confirmed during the inspection:</p> <p>The monthly quality monitoring reports were sent to RQIA until September 2019 and were assessed as compliant. The inspector reviewed a sample of the reports dated October 2019, November 2019, December 2019 and January 2020 and the agency is continuing to remain compliant with regulation 23.</p>	
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6.1 Inspection findings

The agency's staff recruitment processes were noted to be managed in conjunction with the organisation's human resources department. Discussion with the deputy manager identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 and Standard 11 relating to AccessNI.

The inspector reviewed the agency's matrix to monitor staff registration with the Northern Ireland Social Care Council (NISCC) and the Nursing and Midwifery Council (NMC) and confirmed that all staff were currently registered with NISCC/NMC as required. The inspector noted that the manager had a system in place each month for monitoring registration status of staff with the relevant regulatory body and confirmed that all staff are aware that they are not permitted to work if their NISCC/NMC registration had lapsed.

Service user comments:

- "I like it the best."
- "the staff are good."
- "I can pick my own food and clothes."
- "we have tenant meetings which are good."
- "everything is good here, I don't have any problems."
- "when I first walked in through the door, I couldn't believe it; it was so nice."
- "the level of support is good."
- "you can come and go as you please."
- "staff are top people and very caring and make me feel safe."

The inspector spoke to two staff members, who were knowledgeable in relation to their responsibility in reporting concerns. The staff members spoken to were confident that management would take them seriously and act upon their concerns. Some comments received are detailed below:

Staff comments:

- "management are fantastic."
- "we are family friendly."
- "there is always training and it is of great benefit."
- "I am aware of the policies and procedures."
- "we follow our core values."
- "the boys are very well looked after. This is their home and we make it homely."

- “we have a great wee team and we all work together.”
- “the handovers are effective and efficient.”
- “there is an open door policy and management listens to us.”
- “we promote independence with the boys.”

The inspector also spoke to one service users’ relative and comments included:

Relative’s comments:

- “staff put things into place but **** says no.”
- “staff give him choices.”
- “the level of care is very good.”
- “staff are very approachable.”
- “I think they are very good.”
- “staff take his money now as he doesn’t have capacity and **** feels great about it.”

The returned questionnaires from service users/relatives indicated that they felt very satisfied that care was safe, effective and compassionate and that the service was well led.

The agency has created their own evaluation forms which were provided to the inspector on the day of inspection. Five service users’ relatives returned the evaluation forms. The comments were positive in relation to the quality of care being provided. Some comments stated included:

- “the staff are very helpful and supportive to ****.”
- “**** has been more settled since moving to The Pines, however would like him to have some regular/structured activity during the week.”

Ten service users completed the evaluation forms and comments included:

- “I feel safe.”
- “tenants meetings bring everybody’s thoughts into the open.”
- “tenants meetings bring concerns and puts point across.”
- “we need wifi.”
- “all good in the hoodies.”

Two service users/relatives questionnaires were returned and both respondents indicated they were very satisfied that the care being delivered is safe, compassionate, effective and well led.

Areas of good practice

There was evidence of good practice in relation to the completion of checks with AccessNI in conjunction with BSO and staff registrations with NISCC and NMC.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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