

Boyd's Row Supported Living RQIA ID: 12088 19 Boyds Row Armagh BT61 7JR

Inspector: Jim McBride Inspection ID: IN22739

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# Announced Care Inspection of Boyd's Row Supported Living

7 July 2015

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

An announced care inspection took place on 7 July 2015 from 09:30 to 13:00. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. No quality improvement plan was issued during this 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 Recommendation	
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:	Registered Manager:
Andrew Grainger	Nicola Pedlow
Person in charge of the agency at the time of	Date Manager Registered:
Inspection:	29/6/2015
The Registered manager	
Number of service users in receipt of a	
service on the day of Inspection:	

## 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: Support 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
- Incidents
- Records of contact with the agency since the last inspection
- RQIA duty rota records

During the inspection the inspector met with and observed one service user and the registered manager. Supporters and service users were preparing for the days outings.

- Swimming
- The gym
- The Giant's Causeway

The registered manager stated that the service users had chosen their own activities for that day.

The inspector also had the opportunity to speak with three relatives and one member of HSC Trust staff following the inspection; their comments have been added to this report.

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

- Discussion with the registered manager
- Examination of records
- Consultation with stakeholders/relatives
- File audit

The following records were examined during the inspection:

- Three 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
- Family Focus Meetings minutes for April and May 2015
- Supporters meeting minutes for, February, March, April and May 2015
- Supporters training records for:
- Vulnerable Adults
- Challenging behaviour
- Human rights
- Records relating to supporters supervision
- Complaints records
- Recruitment policy the policy was updated by the agency on the 20 November 2014.
- Records relating to recruitment process
- Induction procedures
- Records of induction
- Supporters rota information

Six supporters' questionnaires were completed by supporters during the inspection. These indicated that the supporters were either satisfied or very satisfied with the following:

- Service users' views are listened to
- The agency's induction process prepared me for my role
- The agency operates in a person centred manner
- Service users receive care and support from supporters that are familiar with their needs.
- Supporters will be taken seriously if they were to raise a concern.

## Individual supporter's comments:

- "Service users are treated as unique individuals, were their skills/interests are encouraged and promoted within daily routines."
- "I felt from my induction onwards that an emphasis has always been made to treat all in the service with care and compassion."
- "I believe that the service is user specific and caters to all individual needs."
- "Boyd's Row supported living team; provide a high excellent standard of care to service users."
- "The boys get on well with each other and the supporters."
- "Service users' expectations are met in the service."
- "We promote independence and choice daily to service users."

#### 5. The Inspection

Boyd's Row provides a supported living type domiciliary care service to three service users.

The accommodation at Boyd's Row is comprised of individual bedrooms and a range of shared living areas including living rooms, laundry, kitchen, bathrooms. There is an office within the building and this is used by agency supporters (Ref 1) 24 hours per day.

The building is located within its own grounds and is accessible through a set of gates. The premises are secured by a gate which is operated by supporters from within the house and remains locked when the service users are at home.

The front door is also locked from within the house and service users cannot freely leave their home or venture out into the driveway. The door is secured with the use of a key pad which cannot be operated the service users.

Ref (1) having spoken to one relative and to the supporters previously they prefer staff to be referred to as supporters and this is what the service users are used to hearing daily.

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

The previous inspection of the Boyd's Row Supported Living was an announced care inspection dated 22 May 2014.

# 5.2 Review of Requirements and Recommendations from the Last Care Inspection

No requirements or recommendations resulted from the last inspection of 22 May 2014

# 5.3 Theme 1: Support 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 20 November 2014 by Autism initiatives.

The manager confirmed that there is a mechanism in place to ensure appropriate preemployment 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 registered manager. The agency maintains a record of induction provided to supporters; and includes details of the information provided during the induction period.

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

The registered manager stated that the agency is experiencing supporter shortages currently and that shifts are being covered by the permanent and relief supporters, however, she also staffed that all care and support needs are being met and the continuity of care is continuing. This was verified by the rotas sampled by the inspector. Recruitment processes in place were also verified.

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 supporter's numbers outlined by the manager. The inspector examined the supporters' rota for the forthcoming days and supporters were allocated shifts as required. *One supporter stated:* "The staff team work well together."

The manager described to the inspector the arrangements in place to assess the suitability of supporters. Records available confirmed that the agencies supporters receive induction prior to providing care/support to service users. The agency provides supporters with a clear outline of their roles and responsibilities; this was confirmed by the registered manager. The agency has a process for evaluating the effectiveness of supporters' induction, this includes competency assessments. A number of competency assessments were examined by the inspector.

Agency supporters have in place personal development plans. Training records examined indicate that supporters providing supervision have had the necessary skills/training required. Agency supporters receive supervision/annual appraisal in accordance with the agency's policy. Records in place as well as discussion with the manager verified this. The agency has in place a code of practice for all supporters that forms part of the induction; this includes information and responsibility for/ on the following:

- Respect
- Honesty and openness
- Behaviours and appearance
- Confidentiality
- Professional boundaries
- Managing risk
- Personal responsibility and effectiveness
- Organisational reputation

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 support arrangements; evidence of this was seen in the minutes of family focus consultation meetings. The manager was able to demonstrate that supporters discussed with service users any significant staff changes. "About me and my support" (2) documents provides clear evidence of what's going well.

The manager stated that supporters are not supplied to work with service users without an appropriate induction.

Records examined by the inspector evidenced that supporters receive induction training specific to the needs of individual service users. This was confirmed by the registered manager. The induction process takes into account the consent, privacy and dignity of service users. The needs of individual service users are clearly identified within the induction process. Supporters receive ongoing supervision and assessment of competency to fulfil the requirements of their job role.

One supporter stated:" All supporters are fully inducted into the service and given a two week shadowing period to learn and observe."

Another stated: "Just finished shadowing, very happy with my induction."

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

#### Relative's comments:

- "This is the best place for my son he has settled well."
- "I always feel listened to."
- "\*\*\*\*\*\* has benefited greatly from supported living."
- "This is so much better than other places my son has been there's no comparison."
- "It's a credit to the supporters how the care and support my son."
- "The activities that my son attends are great and with the supporters he's happy."
- "The supporters work well with \*\*\*\*."

"\*\*\*\*\* is well settled and his care and support is excellent."

One relative who spoke to the inspector raised some concerns in relation to a health and safety issue. The relative had discussed this with the RQIA, HSC Trust and the agency records available during inspection showed clear evidence that the registered manager had discussed these concerns with the HSC Trust occupational therapy department and with the housing association. There was an appropriate risk assessment in place.

#### **HSC Trust Comments:**

- "I attend all relevant reviews."
- "The agency and the staff have worked extremely hard to ensure effective care and support for service users."
- "I have no hesitation in praising the staff for their support."
- "The agency was very open to training and support provided by myself and others."
- "The staff always welcome HSC Trust support and any debriefing needed following incidents."
- "I find the manager resourceful and dedicated."

# **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 and the "About me" (2) documentation. There is evidence of positive risk taking in collaboration with the service user and/or their representative, the agency and the HSC Trust.

The manager provided an understanding of how to balance human rights with safety in service delivery. The views of service users and their representatives are considered in the assessment and implementation of care practices. Restrictions in place are acknowledged that they are necessary to keep people safe. *One supporter stated: "The service users have a right to live in a safe environment."* 

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 involves service users and/or their representatives. This was confirmed by the manager.

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 quality monitoring system in place to ascertain and respond to the views of service users and/or their representative's representatives. The inspector noted that each individual service user has in place a positive

intervention plan that comprehensively describes interventions that will enable supporters to pre-empt and manage behaviours. The plans outline/describe the following:

- Behaviours that requires additional support
- Function
- Frequency
- Severity
- On-set signals
- Support required
- Active support strategies
- Reactive support Strategies

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

A number of risk assessments in place are regularly reviewed and assessed in relation to the following:

- Health and well being
- Finance
- Safeguarding
- Daily living tasks
- Environment and accommodation
- Security
- Individual communication
- Transport
- Mobility
- Positive behaviour support.

These would appear to be effective when assessing the risks to each individual service user.

The inspector noted that individual discussions were held with relatives in relation to new staff.

Information from these discussions informed the manager of questions to be formulated for the new supporter's interview process.

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

#### **Is Care Compassionate?**

Through examination of the three service users' care and support plans, the inspector found that service delivery has a person centred ethos. Service user's representatives are aware of their right to be consulted and have their views considered in relation to service delivery.

The manager stated that supporters understand and implement the values of respect, choice, dignity and independence daily to service users. The manager stated that service users can make choices regarding their daily routines and activities, within the resources available to them. This was explained by the manager in relation to the choice of food each day whereby the service users will select what they want for their meals. As evidenced during the inspection

the service users had chosen three different activities they wished to participate in and this was facilitated by the supporters on duty.

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. The manager described to the inspector how service users' and family views have been taken into account and shaped service provision.

The manager could describe aspects of service provision which show a reflection of choice, dignity, and respect. One supporter stated:" I believe the service provided by AI is incredibly effective as it is so user specific and caters for all individual needs."

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

# Areas for Improvement N/A

Ref (2)

About Me' aims to provide succinct need to know information about the service user. This information enables staff to adopt a consistent, user led approach, to support the service user effectively.

Number of Requirements:	0	Number of Recommendations:	0	l
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#### 5.5 Additional Areas Examined

The inspector noted that the agency held a number of family focus meetings in April and May 2015. These meetings gave the agency and the families a chance to share information, the inspector noted a number of topics discussed:

- Inspections from RQIA
- Finance
- House issues
- Communication
- Views on quality
- Staff recruitment

It was also noted that each family discussed with the manager ways in which they wish to communicate with her and the supporters in relation to the care and support of their relatives.

# No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	N.Pedlow	Date Completed	16.07.15
Registered Person	Andrew Grainger	Date Approved	16/07/15
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	1/08/15

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

the inspection was completed with no disruption to the service users routine, and the inspector carried out the inspection in a professional manner

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.

<sup>\*</sup>Please complete in full and returned to agencies.team@rgia.org.uk from the authorised email address\*