

Ashley Grove RQIA ID: 12089 Ashley Grove Supported Living Service 7 Ashley Grove Dunmurry Belfast BT17 9EA

Inspector: Jim McBride Inspection ID: IN22771 Tel: 028 9062 4643 Email: dunmurry@ai-ni.co.uk

### Announced Care Inspection of Ashley Grove Supported Service

22 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: <u>www.rgia.org.uk</u>

#### 1. Summary of Inspection

An announced care inspection took place on 22 June 2015 from 11:35 to 14:15. 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**

N/A

#### **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: Ashley Grove/Andrew Grainger	Registered Manager: Ms Linda Davidson
Person in charge of the agency at the time of Inspection: The Registered manager	Date Manager Registered: 21 March 2014
Number of service users in receipt of a service on the day of Inspection: 2	

#### 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
- Incidents.
- Records of contact with the agency since the last inspection.

During the inspection the inspector met with and observed one service user and three care staff. The inspector also contacted two service users' relatives. The inspector spoke to one HSC professional following the inspection.

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

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

The following records were examined during the inspection:

- Two 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 July 2014, January and April 2015
- Staff meeting minutes for January, February, April and May 2015.
- Staff training records for:
- Vulnerable Adults
- Challenging behaviour
- Human rights
- Professional development
- 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 procedures

- Records of induction.
- Staff rota information

Two staff questionnaires were completed by staff during the inspection, and nine were returned following the inspection, these indicated that the two staff were either satisfied or very satisfied with the following:

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

#### Individual staff comments:

"I'm happy with the care and support provided" "Service users can effectively communicate their needs" "Staff offer choice as much as possible on a daily basis" "Service users are non-verbal, but they can communicate their choices, likes and dislikes by pointing, touch, Makaton signing and verbal noises"

#### 5. The Inspection

Ashley Grove a detached two storey house situated in Dunmurry is the home of two tenants who rent their accommodation from Triangle Housing Association.

Autism Initiatives provide a domiciliary care type supported living service to both tenants. Staff provide support on a 24 hour basis and are present in the tenants' home at all times.

Agency staff support tenants to secure their home and the front door is locked at all times. The front door is also locked from inside; tenants require assistance from staff to leave their home.

The agency is managed by the registered manager and there is a team leader, senior support worker and a number of support staff.

During the inspection the inspector was able to observe one service user communicate effectively with staff whilst going about daily activities.

The inspector was able to speak to one service user who did sign to him her satisfaction with the service and that staff are helpful and support her well by using the Makaton sign for happy and nodding appropriately when prompted with questions.

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

The previous inspection of Ashley Grove was an announced care inspection dated 25 June 2015. The completed QIP was returned and approved by the care inspector.

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

No previous requirements or recommendations.

# 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 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 staff interviewed. The agency maintains a record of induction provided to staff; and included details of the information provided during the induction period. One staff member stated: *"The induction process is invaluable to the staffs role."* 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 manager. The inspector examined the staff rota for the forthcoming days and staff were allocated shifts as required. The agency is currently using staff from another domiciliary care agency, however all required records of supply and induction was in place. The manager and staff stated that the agency endeavours to use the same staff for obvious consistency reasons; this was also verified by the HSC Trust staff member interviewed by the inspector.

The manager described to the inspector the arrangements in place to assess the suitability of staff. Records available show that agency staff receive induction prior to providing care/support to service users. The agency provides staff with a clear outline of their roles and responsibilities, 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.

Staff described to the inspector how they are given the opportunity to identify their individual training needs.

Agency staff interviewed confirmed that have in place personal development plans. Training records examined indicate that staff providing supervision have had the necessary skills/ training required. Performance management training was completed by the registered manager on the 3 March 2015. Agency staff receive supervision/annual appraisal in accordance with the agency's policy. Records in place as well as discussion with staff verified this.

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; evidence of this was seen in the minutes of house meetings. The manager was able to demonstrate that staff discussed with service users any significant staff changes. It was acknowledged that this can be a challenge for the staff as the service users have communication difficulties and are dependent on staff to assess moods and level of understanding. However, the records of house meetings and individual "About me and my support " (1) documents provide clear evidence of what's going well, how service users know the staff on shifts as well as activities and community outreach that is supported by staff. One relative stated: "Staff have been very imaginative with \*\*\*\*\* and have developed great meaningful activities."

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

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

Agency staff could demonstrate that they have the knowledge and skills to carry out their roles and responsibilities.

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. Staff receive ongoing supervision and assessment of competency to fulfil the requirements of their job role.

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

#### **Relatives Comments:**

"\*\*\*\*\* has never been happier, the staff are excellent"

"This was a great move for \*\*\*\*\* I never thought she could live in the community, but with the support of staff the placement has been successful"

"The family are really happy that \*\*\*\*\* is happy, when she visits us she can't wait to get back home to her familiar surroundings"

"The staff are fabulous and have created a lovely place for \*\*\*\*\*".

#### Staff Comments:

"Staff supervision is one to one and is good" "Training is good and the agency is flexible with training needs" "Staff induction prepares you for your role" "During induction staff have the support of other staff and a buddy system."

#### HSC Trust Comments:

"There have been staff changes but this has settled and staff are aware of how change can disrupt behaviours"

"I'm very satisfied with the service currently"

"I attend regular reviews and meetings about my client".

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

Staff interviewed 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. Staff were aware of the restrictions in place and acknowledged that they were necessary to keep people safe. The HSC Trust and relatives are aware of all restrictions and are kept updated on any change. The manager stated that some restrictions have been removed as the tenants need change and they develop in the environment.

The use of positive behaviour planning and positive intervention planning helps with tenants' safety as well as daily living in a positive way.

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, the HSC Trust representative and 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 quality 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 indicated that service users are provided with information relating to their human rights in a suitable format. Human rights are discussed with service users during various tenants meetings.

It was noted that the way in which staff communicate with tenants was effective in providing care and support. One relative stated" *The staff are aware of \*\*\*\*\* needs and provide great care and support."* 

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 tenant.

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

#### Is Care Compassionate?

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

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

It was noted that during tenants meetings staff used Makaton signs, eye contact and touch when communicating with tenants. This appeared to be the preferred way to communicate; minutes reflect that staff could discuss upcoming activities like swimming, gardening, healthy eating and walking. Staff recorded in the minutes that eye contact was important when communicating with tenants.

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

#### **Relatives Comments:**

"Staff are supportive and recognise the need of my whole family when caring for \*\*\*\*" "Staff are always looking for different ways to help communicate with \*\*\*\*\* and to encourage activities and the things she wants to do"

"I could not speak highly enough of staff and the support they give both me and my daughter" "\*\*\*\*\*\* care needs are all taken care of by staff who have developed an excellent service" "I have great faith in the staff who treat \*\*\*\*\* well with great care and support".

#### Staff Comments:

"The staff have good insight into the communication ability of the tenants"

"Staff offer choice and support with all daily activities"

"The tenants' moods and ways of communicating tell staff what tenants would like or not like to do at any given time"

"The tenants' communication can be difficult but staff are aware of signs of what tenants are feeling"

"Care and support plans are comprehensive and describe people's communication abilities".

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

"The staff communicate well with the HSC Trust"

"I often call into the service and find the care satisfactory".

#### (Ref 1)

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.

## Areas for Improvement N/A

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

N/A

#### No requirements or recommendations resulted from this inspection.

I agree with the content of the report.					
Registered Manager	Linda Davidson	Date Completed	2/7/15		
Registered Person	Grainne Close	Date Approved	7/7/15		
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	9/07/15		

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.