

**Unannounced Care Inspection
of
Alan Close**

2 July 2015

1. Summary of Inspection

An unannounced care inspection took place on 2 July 2015 from 09.30 to 13.30. 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	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: Andrew Grainger	Registered Manager: Mary Hayes
Person in charge of the agency at the time of Inspection: The Registered Manager	Date Manager Registered: 20/02/2015
Number of service users in receipt of a service on the day of Inspection: 4	

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 previous (QIP) Quality Improvement Plan.
- Incidents.
- Records of contact with the agency since the last inspection.

During the inspection the inspector met with and observed two service users and four care staff.

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:

- Four 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 November and December 2014. January and February 2015
- Staff meeting minutes for, February, March, April and May 2015.
- Staff training records for:
 - *Vulnerable Adults*
 - *Challenging behaviour*
 - *Human rights*
- 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

Five staff questionnaires were completed by staff during the inspection, and one was returned following the inspection, these indicated that the 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:

“All service users have choice; their views are listened to through user consultations and “About my Support” documents.”
 “All service users have ownership of their lives.”
 “I ensure all needs are met.”
 “As a new staff member I have seen nothing but complete professionalism.”
 “Alan Close is truly home for service users.”

During the inspection four questionnaires were circulated to the service users to be completed asking them about various aspects of their care. Three completed questionnaires were returned to the inspector during the inspection.

These indicated that service users were either satisfied or very satisfied with the following.

- The support they received
- That staff respond to their needs
- Staff help them feel safe and secure here

Individual comments by service users:

“My care is one to one.”
 “I have a great time here with all the people.”

5.0 The Inspection

Alan Close is a supported living type domiciliary care agency which provides personal care and housing support to adults with Autistic Spectrum Conditions and or learning disability. The services provided by Autism Initiatives are commissioned by the South Eastern Health and Social Care Trust and the Belfast Health and Social Care Trust.

The service is managed by the registered manager and there is a team leader, senior support staff and support workers.

All of the agency staff are registered social care workers with NISCC and the agency.

The service users rent their accommodation from Triangle Housing Association.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 17 April 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 Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 1.1	The agency should ensure that the human rights of all service users are explicitly outlined in care records.	Met
	Action taken as confirmed during the inspection: Autism Initiatives have updated their "About Me" document with due consideration given to the Human Rights Act (HRA, 1998). All Articles of the HRA (1998) are relevant but specifically Articles 3, 5, 8, 9, 10, & 11 are pertinent to a number of sections in the "About Me". This was verified during 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 20 November 2014 by Autism initiatives.

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 includes 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 manager. The inspector examined the staff rota for the forthcoming days and staff were allocated shifts as required.

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 they have in place personal development plans. Training records examined indicate that staff providing supervision have had the necessary skills/training required. Agency staff receive supervision/annual appraisal in accordance with the agency's policy. Records in place as well as discussion with staff verified this. The agency has in place a code of practice for all staff 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 staffing arrangements; evidence of this was seen in the minutes of tenants' consultation meetings. The manager was able to demonstrate that staff discussed with service users any significant staff changes. "About me and my support "(1) document provides clear evidence of what's going well.

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.

Service users' comments:

"Staff support me well."

"Staff listen to me if I need help."

"My keyworker is good."

Staff Comments:

"Supervision is good."

"Both induction and training prepares you for the role."

"Staff communicate well with each other."

"My complete induction takes six months and is very comprehensive."

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.

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 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.

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.

The inspector noted that individual discussions were held with tenants in relation to new staff. A meeting on the 8 June 2015 evidenced that tenants were asked "What would you like staff to do for you." Information from this informed the manager of questions to be formulated for the new staff interview process.

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

Is Care Compassionate?

Through examination of the four 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.

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

Service users' comments:

"Staff treat me good."

"Staff help me with all my activities and hobbies."

"I am safe here."

"This is my home now."

"I feel free here."

Staff Comments:

"Service users' views and choices are important to me."

"Other staff helped me with my induction."

"We treat tenants as individuals and meet individual needs."

Areas for Improvement

N/A

(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.

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	Mary Hayes	Date Completed	July 16 th 2015
Registered Person	Andrew Grainger	Date Approved	July 16 th 2015
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	7/8/15

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