



The Regulation and
Quality Improvement
Authority

Church Lane Mews
RQIA ID: 12243
1-16 Church Lane Mews
Churchwell Avenue
Magherafelt
BT45 6FE

Inspector: Jim McBride
Inspection ID: IN12243

Tel: 028 7936 6819

Email:

heather.lynch@northerntrust.hscni.net

**Unannounced Care Inspection
of
Church Lane Mews**

27 April 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 27 April 2015 from 09:00 to 13:30. 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 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: Mr Anthony Stevens	Registered Manager: Mrs Heather Lynch
Person in charge of the agency at the time of Inspection: Mrs Heather Lynch	Date Registered: 14 August 2014
Number of service users in receipt of a service on the day of Inspection: 14	

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

Theme 2 - Service User Involvement.

4. Methods/Process

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

- Discussion with the Registered manager
- Examination of records
- Consultation with stakeholders/Staff/Relatives
- File audit
- Evaluation and feedback.

During the inspection the inspector met two service users and spoke with five care staff. The inspector spoke with two HSC professionals and one student during the inspection. The inspector had the opportunity to discuss the service with two service user's relatives and has added their comments to this report.

Prior to inspection the following records were analysed:

- Previous inspection report
- Incidents.

The following records were examined during the inspection:

- Six care and support plans
- HSC Trust assessment of needs and risk assessments
- Care reviews, other methods of recording/evaluation
- Monthly monitoring reports for, January 2015, February 2015, March 2015 and April 2015.
- Tenants meetings for September 2014 February 2015.
- Minutes of staff meetings for July 2014 and October 2014 March 2015.
- Staff training records examined
- *Vulnerable adults*
- *Human rights*

- *Challenging behaviour*
- *Whistleblowing*
- Complaints records
- Recruitment policy/ process reviewed by Autism initiatives in April 2015
- Pre-employment check list that included the following:
 - *Job descriptions*
 - *Terms and conditions*
 - Staff register/ information
 - Agency's rota information

6 staff questionnaires were completed by staff during the inspection. 3 were completed post inspection these indicated that the majority of staff were either satisfied or very satisfied with the following:

- How satisfied are you that service users' views are listened to?
- How satisfied are you that the agency's induction process prepared you for your role?
- How satisfied are you that the agency operates in a person centred manner?
- How satisfied are you that service users receive care and support from staff who are familiar with their needs?
- How satisfied are you that you will be taken seriously if you were to raise a concern?

During the inspection a number of questionnaires were circulated to the service users to be completed asking them about various aspects of their care. 6 completed questionnaires were returned to the inspector during the inspection.

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

- How satisfied are you with the support you receive?
- How satisfied are you that staff responds to your needs?
- How satisfied are your staff help you feel safe and secure here?

5. The Inspection

Church Lane Mews was established in 2014 to provide quality housing to people with mental health difficulties. The scheme provides accommodation as well as care and support to individual service users, with the aim of helping them to enhance their daily living and help with independent and community living skills. The scheme has accommodation for fourteen service users who have their own individual self-contained bungalow. The service users also have a communal area in a separate building that will provide social integration and help prevent feelings of isolation if they wish to use it. The scheme is managed by Mrs Heather Lynch supported by fourteen staff that provide care and support over a twenty four hour period.

The inspector would like to thank the service users and agency staff for their warm welcome and full cooperation throughout the inspection process.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of Church Lane Mews was a pre-reg inspection dated 21 May 2015. 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 must review the statement of purpose and include the contact details of the Ombudsman and review the section on "Referral process" As discussed during the inspection with the Registered manager.	Requirement 1 Ref: Regulation 5 (1) Schedule 1 Met
	Action taken as confirmed during the inspection: The agency's statement of purpose was updated on the 31 December 2014 meeting the requirement.	
Requirement 1 Ref: Regulation 6	The registered person must review the tenants' handbook and include the contact details of the Ombudsman. As discussed during the inspection with the Registered manager.	Requirement 1 Ref: Regulation 5 (1) Schedule 1 Met
	Action taken as confirmed during the inspection: The tenants' handbook was updated on the 31 December 2014 meeting the requirement.	
Requirement 1 Ref: Regulation 6 .1	The service users' agreements must be updated to include all costs that tenants will be paying and to whom monies will be paid.	Requirement 1 Ref: Regulation 5 (1) Schedule 1 Met
	Action taken as confirmed during the inspection: The inspector examined six current service user agreements. The records examined show clear evidence of costs that tenants pay.	

5.3 Theme 1 - Staffing arrangements

Is Care Safe?

The agency has in place a recruitment policy. This was updated on the 30 November 2014 by the NHSCT.

The registered 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. This was confirmed by staff members who stated: *"Induction was excellent"* The agency maintains a record of staff induction provided to staff; and included details of the information provided during the induction period. Staff who were interviewed by the inspector were clear, that the induction period is essential for staff and the time lets them get to know the service users care and support needs.

The NHSCT 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. The agency maintains a record of all staff supervision and appraisal.

Service user comments:

"The move to supported living was good for me; I was well supported by staff".

Staff comments:

"My induction and training prepared me for my role".

Relatives' comments:

"The service is good, the staff are all caring".

HSC Trust Comments:

"I attend and support tenants with their review".

Areas for Improvement

N/A.

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

Is Care Effective?

Following discussions with the registered 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. One staff member stated: *"Our care and support plans are excellent and clearly state the needs of the tenant"*.

The registered 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 available show that agency staff receive induction prior to providing care/support to service users. This was confirmed by the staff interviewed during inspection. 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.

Training records examined show that the manager provides supervision and has 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.

Five staff questionnaires were received during the inspection; the inspector also spoke to five members of staff on duty during the inspection and has added their comments to this report. All five staff advised the inspector that they have attended training on the protection of vulnerable adults.

Service user comments:

“The move to supported living was great my transition plan worked well”.

Staff comments:

“The tenants have settled well into their new life”.

HSC Trust comments:

“People have progressed well in this environment”.

Relatives' comments:

“My relative has come on well in the new place”.

Areas for Improvement

N/A.

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' meetings.

The manager was able to demonstrate that she discussed with service users significant staff changes. The manager stated that staff are not supplied to work with service users without an appropriate induction, this was confirmed by staff interviewed by the inspector.

Staff receive induction training specific to the needs of individual service users. This was confirmed by the staff interviewed by the inspector.

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.

Staff receive ongoing supervision and assessment of competency to fulfil the requirements of their job role. Staff who participated in the inspection could describe aspects of service provision which show a reflection of choice, dignity, and respect.

Service user comments:

“Staff listen to my view and my opinion”

“Staff are very caring and supportive”

“It’s great here I enjoy my life now”

Staff comments:

“Tenants live in a very supportive environment”

“We review the support plan with the tenants regularly”

Relatives’ comments:

“The staff are friendly and welcoming”

Areas for Improvement

N/A

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

5.4 Theme 2 – Service User Involvement

Is Care Safe?

Assessments of need and risk assessments examined by the inspector reflect the views of service users and their representatives, these 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.

The agency staff interviewed displayed 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.

Service user comments:

“I feel safe and secure here, the staff know me well”.

Staff comments:

“Tenants are happier and have settled well”.

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

Is Care Effective?

Care plan records showed that care is regularly evaluated and reviewed by the agency staff. The agency staff review care and support plans monthly or as required. Care and support plans seen by the inspector were written in a person centred manner and included the service users’ views.

Staff described how care and support plans are written along with the service user. 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 representatives.

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

The 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.

Service user comments:

"Staff help me with community activities"

"I feel I have my view taken on board".

Staff comments:

"We encourage as much independence as possible"

"We listen to the tenants and support them with their communication"

"Service user involvement is important to us"

Overall on the day of the inspection we found the management to be effective.

Areas for improvement

N/A

Overall on the day of the inspection the inspector found the care/support 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.

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 could identify 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. Service users, HSC Trust staff and agency staff spoken to described to the inspector how service users' views have been taken into account and shape service provision.

Service user comments:

"Staff support me to express my concerns and my thoughts".

Staff comments:

"Staff listen to the tenants and what their interests are"

"At all times we respect the views of service users".

Relatives' comments:

"The tenants are well supported to avail of community activities".

HSC Trust Comments:

"The transition to supported living has enabled people to achieve greater independence and encouraged greater community involvement".

Areas for Improvement

N/A

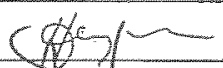

Overall on the day of the inspection the inspector found care/support to be compassionate.

Additional Areas Examined

N/A

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. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the agency.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager			Date Completed 24/6/15
Registered Person			Date Approved 25/6/15
RQIA Inspector Assessing Response		Joanne Faulkner for Jim McBride	Date Approved 26/5/15

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

**Please complete in full and returned to supportedliving.services@rqia.org.uk from the authorised email address*