

# Inspection Report

**Name of Service:** Hanna Street Supported Living

**Provider:** Belfast Health and Social Care Trust

**Date of Inspection:** 23 January 2025

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

## 1.0 Service information

<b>Organisation/Registered Provider:</b>	Belfast Health and Social Care Trust (BHSCT)
<b>Responsible Individual/Responsible Person:</b>	Ms Maureen Edwards
<b>Registered Manager:</b>	Mrs Barbara McGarrity
<b>Service Profile –</b>	
<p>Hanna Street Supported Living Service is a supported living type domiciliary care agency operated by BHSCT which provides care and support to service users who have learning disability and additional complex needs. Ten service users live in a shared house at Hanna Street.</p> <p>Hanna Street also provides floating support to service users who live in the community. RQIA does not regulate these elements of support.</p>	

## 2.0 Inspection summary

An unannounced inspection took place on 23 January 2025, between 9.45 a.m. and 2.45 p.m. with a care inspector. The inspection was facilitated by the manager. The RQIA Service Improvement Officer was also present for the early part of the inspection and supported the inspector with seeking the opinions and experiences of service users.

The inspection was undertaken to evidence how Hanna Street is performing in relation to the regulations and standards; and to determine if the agency is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that safe, effective and compassionate care was delivered to service users and that the agency was well led. Details and examples of the inspection findings can be found in the main body of the report.

Service users were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Refer to Section 3.3.2 for more details.

It was identified that staff promoted the independence and well-being of service users and that staff were knowledgeable and well trained to deliver safe and effective care.

No areas for improvement were identified.

RQIA would like to thank the manager, service users, relative and staff for their help and support in the completion of this inspection.

### **3.0 The inspection**

#### **3.1 How we Inspect**

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the agency was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this agency. This included registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning Trust.

Throughout the inspection process inspectors will seek the views of those living, working and visiting the home; and review/examine a sample of records to evidence how the home is performing in relation to the regulations and standards.

Information was provided to service users, relatives, staff and other stakeholders on how they could provide feedback on the quality of services. This included User Friendly questionnaires and an electronic survey.

#### **3.2 What people told us about the service and their quality of life**

During the inspection process, we received feedback from a number of service users, a relative and staff members.

Service users told us they were happy living in Hanna Street, describing it as their home and telling us that all was good. They reinforced that staff were good to them and were keen to tell us how well they were supported.

A relative commended the care provided in Hanna Street. They commented positively on how easy it was to communicate with staff and how involved each staff member is in the care of their relative.

A number of staff responded to the electronic survey. They indicated that they were 'very satisfied' or 'satisfied' that care provided was safe, effective and compassionate and that the service was well led. Staff commented that a great quality of care was provided and how much they enjoyed working in Hanna Street. One told us that it was a pleasure to 'watching our service users thrive and enjoy every aspect of their lives'.

The information provided indicated that they had no concerns in relation to the service.

### 3.3 Inspection findings

#### 3.3.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of patients. There was evidence of robust systems in place to manage staffing.

A review of the agency's staff recruitment records confirmed that all pre-employment checks, including criminal record checks (AccessNI), were completed and verified before staff members commenced employment and had direct engagement with service users.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC) or the Nursing and Midwifery Council (NMC) or any other relevant regulatory body; there was a system in place for professional registrations to be monitored by the manager.

There were no volunteers deployed within the agency.

The agency has maintained a record for each member of staff of all training, including induction and professional development activities undertaken.

Review of a sample of staff training records concluded staff had received mandatory and other training relevant to their roles and responsibilities since the previous care inspection such as first aid, sensory awareness in Learning Disability and dysphagia.

#### 3.3.2 Care Delivery

Staff interactions with service users were observed to be polite, friendly, warm and supportive and the atmosphere was relaxed, pleasant and friendly. Staff were knowledgeable of individual service users' needs, their daily routine, wishes and preferences.

Service users told us they liked living in Hanna Street. Several commented on the fun they had together. Where service users wanted to have a lie in, they could do so. Where service users were trying to eat healthily, staff supported them to make the right food choices.

Service user meetings were held on a regular basis which enabled the service users to discuss any activities they would like to become involved in and also any other matters relating to their home. Service users were supported to take part in a range of activities including attending shows and concerts, having a takeaway night, holidays, playing cards, going for coffee, aromatherapy and shopping.

Service users availed of the meals provided within the agency. Service users commended the food on offer, describing it as 'excellent'. The dining room was observed to be clean and warm. Entering Hanna Street requires a pass. Service users told us how they could choose whether to have a pass or not. Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided.

### 3.3.3 Management of Care Records

Service users' needs were assessed and support plans developed to direct staff on how to meet the service users' needs. The support plans were person centred, detailing the service users' likes and dislikes and were updated on a regular basis.

All care records were held confidentially.

Service users were involved in planning their own care and the details of the support plans were shared with their relatives, if this was appropriate. Service users told us that it was their care plan that outlines for staff what matters to them.

Care reviews had been undertaken in keeping with the agency's policies and procedures. There was also evidence of regular contact with service users and their representatives.

A review of care records identified that moving and handling risk assessments and care plans were up to date. Some service users had been assessed by a Speech and Language Therapist as requiring their food and fluids modified. These recommendations were recorded in service users' care plans.

### 3.3.4 Quality of Management Systems

Mrs. Barbara McGarrity has been registered manager of Hanna Street since 27 August 2009. Staff spoke positively of the support offered by the manager and told us she was 'always approachable.'

Discussions with the manager established that they were knowledgeable in matters relating to adult safeguarding and the process for reporting and managing adult safeguarding concerns.

The agency retained records of any referrals made to the HSC Trust in relation to adult safeguarding. A review of records confirmed that these had been managed appropriately.

RQIA had been notified appropriately of any incidents in keeping with the regulations. Incidents had been managed appropriately. No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

It was positive to note that all staff had completed a competency assessment for being in charge of the agency in the absence of the manager.

There were monitoring arrangements in place in compliance with Regulations and Standards. A review of the reports of the agency's quality monitoring established that there was engagement with service users, service users' relatives, staff and HSC Trust representatives. The reports included details of a review of service user care records; accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements.

The Annual Quality Report was reviewed and was satisfactory.

The agency's registration certificate was up to date and displayed appropriately.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure.

#### **4.0 Quality Improvement Plan/Areas for Improvement**

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



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