The Regulation and Quality Improvement Authority

Young Adult Supported Accommodation Inspection Report

IN045935

25 September 2024

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

1.0 Service information

Service Type:
Young Adult Supported Accommodation

Provider Type:
Independent Provider

Located within: – South Eastern Health and Social Care Trust

Brief description of how the service operates:
Supported Accommodation Projects provide housing support, care and accommodation for young people aged 16 – 21+ whose needs can best be met in a living environment that affords age and developmentally appropriate experiences in preparation for adult life.

2.0 Inspection summary

An unannounced inspection took place on 25 September 2024 between 9.15 a.m. and 3.15 p.m. The inspection was conducted by a care inspector.

The inspection assessed progress with one area for improvement identified during the last inspection and to determine if the project was delivering safe, effective and compassionate support and if the service was well led.

The inspection found that one area for improvement identified during the last inspection was met, in relation to staff training. Two new areas for improvement were identified, in relation to restrictive practices and the medication management policy.

3.0 How we inspect

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

In preparation for this inspection, a range of information about the service was reviewed to help plan the inspection.

A range of documents were examined to determine that effective systems were in place to manage the project and deliver safe care.

RQIA inspectors seek to speak with young people, their relatives/carers, visitors and staff for their opinion on the quality of care and their experience of living, visiting or working in this project.

Information was provided to young people, relatives/carers, staff and other stakeholders on how they could provide feedback on the quality of care and support in this project. This included questionnaires and an electronic survey.

The findings of the inspection were discussed with the person in charge at the conclusion of the inspection.

4.0 What people told us about the service

The inspector spoke with young people, former residents and staff during the inspection.

Young people provided a positive view as regards the support received from staff and the quality of the accommodation provided. The young people reported that they liked living in the project and that any issues raised were addressed promptly by the staff team.

Young people reported issues regarding the level of support received from statutory bodies and a lack of accommodation options for young people leaving care. The young people were progressing a complaint to the relevant Trust, as regards the accommodation needs of looked after children. This was discussed with the person in charge who gave assurance that staff would explore these concerns further with the young people.

Staff provided a positive view as regards the quality of support provided to young people within the service; the support available to staff from the management team; and the morale of the staff team.

Questionnaires were received post inspection, from staff and young people. Staff responses indicated they were satisfied that the support provided to young people was safe, effective, compassionate and well led.

Responses from young people indicated dissatisfaction regarding their experience of the service, and how safe they felt within the project. This feedback was discussed with the person in charge of the service, who provided assurances as regards the security of the building and the safety of support provided to young people. The person in charge confirmed there would be engagement with young people on an individual and group basis in response to the concerns identified.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 20 March 2024		
Action required to ensure compliance with the Standards for Young Adult Supported Accommodation Projects (DHSSPS 2012)		**Validation of compliance**
Area for improvement 1 **Ref:** Standard 3.1:2 **Stated:** First time	The responsible person shall ensure that staff have access to training in line with the needs of the young people.	**Met**
	Action taken as confirmed during the inspection: This area for improvement was met.	

5.2 Inspection findings

5.2.1 How does the service ensure young people are getting the right support at the right time?

Review of incident records identified robust recording and reporting practices by staff and clear governance and oversight arrangements by the management team. This approach is essential for ensuring that staff respond effectively to incidents in order to promote safety for young people; and to ensure that learning is both identified and action taken where appropriate to prevent reoccurrence.

Young people's support documentation and daily records provided evidence that the quality of recording was of a good standard and the detail reflected the young peoples' needs and lived experience. The records sampled were up to date, frequently reviewed, reflective of the current risks and provided clear guidance to staff providing direct support to the young people.

However, evidence was not available to provide assurance of robust governance around the implementation of restrictive practices within the service. Actions that restrict young people should have clear justification based on a robust assessment of risk; with clear evidence that the restriction is proportionate; in place for the least amount of time; has a reduction plan in place (as appropriate); in consultation with the young person and relevant others. A robust review mechanism is also required which considers the effectiveness and impact of the restrictive practice. An area for improvement was identified.

Young people were not regularly engaging in house meetings. Forums such as house meetings promote opportunities for young people's voices to be heard and used to shape the delivery of support by staff. However, evidence was available that staff had implemented strategies to try to improve young people's engagement and that staff had sought individual feedback from young people in order to gather their views and opinions.

Sampling of team meeting minutes identified that all staff were provided with regular opportunities to meet together as a group. Staff discussed the strategies agreed to support young people, and reflected upon what is working well and what could be done differently. This approach is key to ensure the effectiveness of the team and consistency of support provided to the young people.

The service was holding stock medication on site to enable staff to respond to potentially life threatening medical conditions. The medication management policy for the service was reviewed by a pharmacy inspector post inspection and feedback provided to the manager. The medicines policy indicated that the service intended to hold certain stock medications; which is not consistent with the parameters of support provided by supported accommodation projects. Staff are not provided with the necessary training or competencies to store and administer medication for young people; and young people are expected to take responsibility for their own, prescribed medication, as per the admissions criteria to the service. The medication management policy should be reviewed in line with the concerns identified. An area for improvement was identified.

5.2.2 How does the service ensure that safe staffing arrangements are in place?

Training records provided assurance robust arrangements were in place to monitor compliance with mandatory training requirements for the staff team, in areas such as safeguarding, first aid and fire training. Records also evidenced that staff were provided with opportunities to receive training in line with the needs of the young people.

Sampling of the rota and discussion with the person in charge identified that the number of staff on shift, was consistent with the staffing model and based on the assessed needs of the young people. However, the service was reliant on temporary and sessional staff to fulfil the rota. Assurance was provided that the organisation was actively recruiting in order to achieve permanency within its staff team.

Sampling of evidence provided assurance that there were safe recruitment practices in place for temporary staff working in the home.

5.2.3 Does the service ensure that the environment meets the needs of the young people?

The project was decorated to a good standard and presented as a comfortable, homely space for young people to live. Young people were observed relaxing and spending time together in the communal areas of the project. Young people reported that they were happy with the accommodation provided and confirmed that they had access to the essential amenities needed to be able to develop their independence skills whilst living in the service. A well maintained and welcoming outdoor space was also available to the young people.

Robust fire safety checks were completed by staff on a regular basis. The records evidenced the consistent completion of weekly fire alarm tests; monthly fire door tests; and regular fire evacuations. There was evidence of appropriate actions being taken when issues were identified, and of robust audits being completed by the manager to ensure oversight. The fire risk assessment was also up to date, with evidence of recommended actions being completed.

6.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with the Standards for Young Adult Supported Accommodation Projects (DHSSPS 2012).

	Standards
Total number of Areas for Improvement	2

Areas for improvement and details of the Quality Improvement Plan were discussed with the person in charge as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with the Standards for Young Adult Supported Accommodation Projects (DHSSPS 2012)	
Area for improvement 1 **Ref:** Standard 1.6:4 **Stated:** First time **To be completed by:** 18 December 2024	The responsible person shall ensure that actions that restrict young people should have clear justification based on a robust assessment of risk; with clear evidence that the restriction is proportionate; in place for the least amount of time; has a reduction plan in place (as appropriate); in consultation with the young person and relevant others. A robust review mechanism is also required which considers the effectiveness and impact of the restrictive practice. Ref: 5.2.1
	Response by responsible person detailing the actions taken: - Current consultation with Social Services regarding implementation of a Policy and Procedure in relation to this. - Policy and Procedure will be completed by end of February 2025.

Area for improvement 2 **Ref:** Standard 3.2:2 **Stated:** First time **To be completed by:** 18 December 2024	The responsible person shall ensure that the medication management policy is reviewed and action taken where appropriate to ensure this is consistent with the statement of purpose of the project; and the support that staff can provide. Ref: 5.2.1
	Response by responsible person detailing the actions taken: - Current medication policy and procedure under review and the final amended version will be available to services by the end of December 2024.

Please ensure this document is completed in full and returned via the Web Portal

The Regulation and Quality Improvement Authority
James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
@RQIANews