



The Regulation and
Quality Improvement
Authority

Young Adult Supported

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: – Western Health and Social Care Trust

Brief description of how the service operates:

This is a leaving care service which provides supported housing accommodation for young people aged between 16 and 21 years of age for up to two years.

2.0 Inspection summary

An unannounced inspection took place on 28 June 2024 between 10.00 a.m. and 3.30 p.m. The inspection was conducted by a care inspector. The inspection assessed progress with all areas for improvement identified during the last inspection and to determine if the service was delivering safe, effective, compassionate care and if the service was well led.

Staff had a detailed understanding of young people's individual needs and spoke about the young people compassionately. Young people were supported by a stable, experienced and qualified staff team.

Three areas for improvement were assessed and two were identified as met. One area for improvement in relation to complaints was restated for a second time. A new area for improvement was identified in relation to documenting safety planning for young people.

The inspector concluded there was safe, effective and compassionate care delivered by the team and the service was well led by the management team.

The findings of this report will provide the management team with the necessary information to improve staff practice and young people's experience.

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 and staff.

Feedback from young people provided a positive view regarding life in the project and how staff supported them. It was evident that the young people had developed positive relationships with staff.

Discussions with staff confirmed they felt positive about their roles, how young people were being supported and managerial support available for staff. Staff confirmed their view that young people received quality care within the project; they are confident in risk management and that they receive regular supervision from management.

No feedback was received by RQIA via questionnaires or electronic survey within the required timescales for inclusion in this report.

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 19 October 2023		
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 3.2.4 Stated: Second time To be completed by: 19 November 2023	The manager and provider shall ensure the provision of quality care and support through the promotion of best practice and continuous improvement through regular team meeting discussion.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 2 Ref: Standard 1.8.1 Stated: First time To be completed by: 19 November 2023	The manager and provider shall ensure that young people actively influence service delivery through the scheduling of regular young people's meetings or through other methods which demonstrate meaningful consultation with young people about the service.	Met
	Action taken as confirmed during the inspection: This area for improvement was met.	
Area for improvement 3 Ref: Standard 4.1.3 Stated: First time To be completed by: 19 December 2023	The manager and provider shall ensure that satisfaction levels or otherwise with the outcomes of complaints are recorded, in order to enable the service to use this information to audit the effectiveness of the complaints procedures and its application.	Not met
	Action taken as confirmed during the inspection: This area for improvement was not met and is discussed further in section 5.2.4.	

5.2 Inspection findings

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

Assurance was sought that the provider could safely meet the needs of young people. Support and risk management plans should inform safety planning for young people that is needs led, proportionate to risk and commensurate with their abilities. Discussion with the person in charge identified risks were understood and appropriately responded to with the involvement of the multidisciplinary team. Subsequently expectations and thresholds have been outlined in a sensitive manner in consultation with young people and resulted in risks being managed in an appropriate and respectful manner.

However, the inspector identified that processes in place for potentially high risk behaviours should be clearly detailed in a safety plan that specifies how assessed needs and risks will be met by the project. This should be consistent with the project's statement of purpose, function and agreed interventions. An area for improvement was identified.

Staff in the project do not work alone and on call support is provided to the staff team; this provides effective additional safeguards and assurance regarding the quality of support provided to young people and for staff to manage and respond to risk effectively.

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

The project does not use agency staff; and any bank staff works alongside a core member of staff to promote consistency of support for the young people in the project.

A review of the staff training matrix identified an extensive mandatory training programme was in place, supporting staff to deliver young person centred, safe and effective support. The training matrix clearly displayed the staff team's training compliance levels. This ensures that the staff team maintain competence in all relevant areas and there is management oversight of training needs within the project. There was evidence of good uptake in mandatory training enabling staff to carry out their roles effectively.

Team meetings provide a pivotal role in ensuring that staff reflect upon practice, review the effectiveness of interventions and aid the communication of a co-ordinated and consistent approach to supporting young people. Sampling of team meeting minutes demonstrated regular scheduling, providing staff with effective mechanisms to express their opinions, develop team cohesiveness, problem solve and maintain consistency of approach in respect of how support is delivered. Ensuring that minutes are available enables all relevant staff to have access to key information regarding any agreed approaches to risk; promotes accountability within the team and enables progress against any actions to be monitored.

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

A review of the environment confirmed the communal area of the service was well maintained and presented as a comfortable, homely space. Young people were observed utilising this area freely. The service is made up of a number of independent flats which provided ample space and facilities for young people to live independently.

The inspector reviewed the age ratios within the project in accordance with guidance from the Department of Health (Guidance on maintaining age ratios in jointly commissioned young adults supported accommodation projects, 2019). On the day of inspection, the project was compliant with the guidance.

5.2.4 How does the service ensure that there are robust management and governance arrangements in place?

A key component which can drive service improvement is learning and reflection upon feedback, complaints, concerns and significant events. No recent complaints had been received in the project, however the inspector concluded the complaints template still required development to include; a clear outline for any learning that may have arisen during the complaints process; and a record of the complainant's satisfaction with the outcome. This information will support the service to audit the effectiveness of the complaints procedures and its application. Therefore, this area for improvement was restated for a second time.

Young people's meetings enable young people to play an active role in shaping the day to day operation of the project; ensure their voice is heard and promotes a sense of ownership, choice and autonomy for young people. Discussion with the manager conveyed meetings were difficult to achieve due to the group dynamic and personal preferences of the young people.

Despite the challenges, young people's views were gathered informally to ensure that young people have a say in how they are supported; and that their views are used to shape their own lived experience. It was positive to note that Voice of Young People in Care (VOYPIC) were accessible to the young people, advocated on their behalf when required; and promoted young people's views.

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*

* the total number of areas for improvement includes one that has been stated for a second time.

Areas for improvement and details of the Quality Improvement Plan were discussed with 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 4.1.3 Stated: Second time To be completed by: 28 September 2024	The manager and provider shall ensure that satisfaction levels or otherwise with the outcomes of complaints are recorded in order to enable the service to use this information to audit the effectiveness of the complaints procedures and its application. Ref: 5.1 and 5.2.4
	Response by responsible person detailing the actions taken: At each stage of the complaint procedure, the young person will have the opportunity to express whether they agree or disagree with the outcome. They will also be asked to sign a document confirming whether they are satisfied with the resolution.
Area for improvement 2 Ref: Standard 1.3:3 Stated: First time To be completed by: 28 July 2024	The responsible person shall ensure that there is a documented safety plan in place for young people where required, and that young people are involved and in agreement with the safety plan in place. The safety plan is kept under review as needs and risks change. Ref: 5.2.1
	Response by responsible person detailing the actions taken: If a safety plan is required, it will be carefully documented and agreed upon by the young person, their social worker, and the staff to ensure their well-being and support.

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