



The Regulation and
Quality Improvement
Authority

Inspector: Jim McBride
Inspection ID: IN22736

Leonard Cheshire Disability
RQIA ID: 10752
Cheshire House, Kinsale Park
Waterside
Londonderry
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**Unannounced Care Inspection
of
Leonard Cheshire Disability
Cheshire House**

25 June 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 25 June 2015 from 10:00 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 the 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

N/A

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: Tonya Mc Cormac	Registered Manager: Mrs Louise Horner
Person in charge of the agency at the time of Inspection: The Registered manager	Date Manager Registered: 03/02/2014
Number of service users in receipt of a service on the day of Inspection: 18	

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
- Incidents.
- Records of contact with the agency since the last inspection.

During the inspection the inspector met with two service users and three care staff. The inspector spoke to one HSC professional following the inspection.

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

- Discussion with the registered manager
- Examination of records
- Consultation with stakeholders/staff
- File audit
- Evaluation and feedback.

During the inspection the inspector met with two service users, four care staff and the senior support worker and registered manager.

The following records were examined during the inspection:

- Three 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 February, March, May and June 2015.

Agenda items discussed:

- *Health and safety*
- *New staff*
- *Safeguarding*
- *Human rights*
- Staff meeting minutes for January, March, May and June 2015.

Agenda item discussed:

- *RQIA*
- *Training and development*
- *Professional boundaries*
- *Safeguarding*
- *Staffing*
- Staff training records:
- *Human rights*
- *Vulnerable adults*
- *Challenging Behaviour*
- *Staff supervision*

- Records relating to staff supervision
- Complaints records
- Recruitment policy the policy was updated by Leonard Cheshire Disability on the 20 November 2014
- Records relating to recruitment process
- Induction procedures
- Records of induction
- Staff register and associated records
- Staff rota information.

Four staff questionnaires were completed by staff during the inspection; four were received following the inspection, these indicated that the majority of 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.

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

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

- The support they receive
That staff help them feel safe and secure
- Staff responds to their needs
- Staff help them feel safe and secure here.

Individual comments made by service users

"I'm Very happy, very content, well run service"

"I feel I have a voice here in Cheshire house"

"My needs are fully met and I have a say in may care".

One service user interviewed by the inspector stated that staff changes can be difficult however further stated: *"My care and support has never been compromised by the staff changes." "I have always received the care and support I needed as per my care plan."*

5. The Inspection

Cheshire House is a supported living type domiciliary care agency operating under the auspices of Leonard Cheshire Disability (a voluntary organisation). The facility provides supported living accommodation for 18 service users with a range of physical disabilities and, in the main, service users who have an acquired brain injury.

All service users live within independently maintained flats and are provided with support in a range of activities of daily living, such as managing financial affairs, shopping, maintaining social activities and relationships, and cooking as well as personal care.

5.1 Review of Requirements and Recommendations from Previous Inspection

N/A

5.2 Review of Requirements and Recommendations from the Last Care Inspection

No requirements or recommendations resulted from the inspection of 6 May 2014.

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 Leonard Cheshire Disability.

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, it was noted that this list is also made available to service users.

The agency has a structured induction programme lasting at least three days. This was confirmed by the staff interviewed. One staff member stated: *"My induction was good."* The agency maintains a record of induction provided to staff; and included 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.

It should be noted that as per the agency's policy on recruitment service users are involved in the staff interview process. This was discussed with staff who confirmed that some of their service users are involved.

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 registered manager.

The 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 in place provided evidence that agency staff receive induction prior to providing care/support to service users. 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.

The agency has a process in place for identifying individual training needs. Staff described to the inspector how they are given the opportunity to identify their individual training needs. Training records examined provided evidence that staff providing supervision had the necessary skills/ training required. This training was completed on the 6 June 2014 for four staff.

Agency staff are aware of the whistleblowing procedure for highlighting concerns/ issues; this was confirmed by staff during discussions with the inspector.

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.

Records examined by the inspector provided evidence that staff receive induction training specific to the needs of individual service users. This was confirmed by the staff interviewed by the inspector.

The needs of individual service users are clearly identified within the induction process.

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. The inspector read a number of staff competency assessments in place.

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

Service users' comments;

"The staff are excellent"

"The staff provide me with the care I need and the support given is excellent"

"I could not ask for better care"

"I rely on all staff that help and support me well"

"The staff are good, I like them all".

Staff Comments:

“Induction is excellent”
 “The staff were supportive during my induction”
 “Supervision is one to one and is comprehensive”
 “Training is good and helps refresh and updates you”.

HSC Trust Comments:

“I meet monthly with the manager to discuss each individual client”
 “We meet to discuss any communication difficulties between us the day care and the agency”
 “Staff turnover can be difficult for clients getting used to new staff”.

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. There is evidence of positive risk taking in collaboration with the service user and/or their representative, the agency and the HSC Trust.

The agency staff interviewed showed an understanding of how to balance human rights with safety in service delivery.

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 includes involvement with service users and/or their representatives. This was confirmed by the manager and the examination of review records.

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 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 provided evidence that service users are provided with information relating to their human rights in a suitable format. Human rights were discussed with service users during various tenants meetings.

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. It should be noted that the service users have been invited to take an active part in Leonard Cheshire's (CAN) Consumer action network that intends to:

"Provide people who use services and tenants with the opportunity to join together to be the peoples' voice to effect change inside and outside Leonard Cheshire Disability."

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

Is Care Compassionate?

Through examination of three 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. Service users and agency staff spoken to described to the inspector how service users' views have been taken into account and shaped service provision.

Staff interviewed by the inspector described their understanding of:

- Human rights
- Promoting human rights in supported living

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 listen to me and what concerns I have may have about my care and support"

"Staff treat me well and have concern for me"

"I have no concerns about being treated well by all staff".

Staff Comments:

"Person centred planning is an important part of our work"

"We focus on outcomes for tenants"

"Tenants meetings are a good way for tenants to express themselves".

HSC Trust Comments:

“I have been contacted regularly by the agencies quality monitoring officer to ask for my views on the service”

“The clients need on the whole is met by staff”

“The service has changed over the years and the work completed by staff does meet the clients’ needs”

“My clients are happy with the service”

“I discuss any concerns I have with the manager regularly”.

Areas for Improvement

N/A

Number of Requirements:	0	Number of Recommendations:	0
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5.3 Additional Areas Examined

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Louise Horner	Date Completed	22/07/2015
Registered Person	Tonya McCormac	Date Approved	22/07/2015
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	4/8/15

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 person/manager from their responsibility for maintaining compliance with minimum standards and regulations.