



The Regulation and
Quality Improvement
Authority

Abbots Court Supported Living Scheme
RQIA ID: 10767
10 Abbots Court
Newtownabbey
BT37 9RL

Inspector: Jim McBride
Inspection ID: IN023039

Tel: 028 9036 0690
Email: rosemary.wray@northerntrust.hscni.net

**Unannounced Care Inspection
of
Abbots Court Supported Living Scheme**

25 September 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 September 2015 from 09.00 to 13.00. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. No quality improvement plan was issued during 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.

Overall on the day of inspection the staffing arrangements and service user involvement was found to be safe, effective and compassionate. The outcome of this inspection found no areas of concern. A quality improvement plan (QIP) was not included in this report.

2. Service Details

Registered Organisation/Registered Person: Anthony Baxter Stevens	Registered Manager: Rosemary Wray
Person in charge of the agency at the time of Inspection: Ms H Monroe	Date Manager Registered: 29/02/12
Number of service users in receipt of a service on the day of Inspection: 12	

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

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

Prior to inspection the following records were analysed:

- Previous inspection report and Quality Improvement Plan (QIP)
- Incidents
- Records of contact with the agency since the last inspection

During the inspection the inspector met with three staff. Staff spoke positively about their role and staff morale, teamwork and managerial support. Staff stated that they feel well supported by training and are given the necessary resources to fulfil their role. The inspector spoke with two service users and has added their comments to this report.

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

- Discussion with the staff, service users
- Examination of records
- File audit

The following records were examined during the inspection:

- Six Care and support plans
- HSC Trust assessments of needs and risk assessments
- Care review records for six service users
- Recording/evaluation of care used by the agency
- Monthly quality monitoring reports from January 2015
- Service users meeting minutes for November 2014, March, June and September 2015
- Staff meeting minutes for January, May and September 2015
- Staff training records for:
 - *Vulnerable adults*
 - *Human rights*
 - *Supervision*
- Records relating to staff supervision
- Complaints records
- Records relating to recruitment process
- Induction procedures
- Records of induction
- Staff rota information

Four staff questionnaires were completed during the inspection. At the request of the inspector six questionnaires were left for distribution and return to RQIA. Five were received following the inspection. These indicated that the staff were either satisfied or very satisfied with the following:

- Service users' views are listened to
- The agency's induction process prepared me for my 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.

Staff written comments:

"All staff are encouraged to promote service user involvement."

"Person centred care and support is in place now."

"Staff at weekend have been cut more staff would be nice."

"There is always room for improvement."

"QCF training should be mandatory for all staff."

One questionnaire was completed by a service user during the inspection. At the request of the inspector nine questionnaires were circulated to the service users to be completed asking them about various aspects of their care. Nine completed questionnaires were returned to the inspector following the inspection.

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

- The support you receive
- Staff responds to your needs
- Staff help you feel safe and secure here

One Service user stated: *"More staff would be nice to get me out more often."*

5. The Inspection

Abbotts Court Supported Living Scheme is a purpose built scheme comprising of self-contained bungalows and houses, and a central office and common room, based at 10 Abbots Court, Newtownabbey. Under the direction of the manager, Rosemary Wray nine care workers provide practical help and support to thirteen adult service users with learning disabilities. Abbotts Court Supported Living Scheme promotes independence, citizenship and community integration for all service users. The agency is a domiciliary supported living service which works in conjunction with the Northern HSC Trust and is partly funded by the NIHE Supporting People scheme.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 19 August 2014. The completed QIP was returned and approved by the care inspector.

Areas to follow up/be addressed were: See below

5.2 Review of Requirements and Recommendations from the Last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
<p>Requirement 1</p> <p>14(b) Once</p>	<p>The registered person shall make suitable arrangements to ensure that the agency is conducted, and the prescribed services arranged by the agency, are provided -</p> <p>(b) so as to safeguard service users against abuse or neglect.</p> <p>This relates to the agency policy on “Cash Collection”, which states vouchers should be completed when receipts are not available at the time of a transaction.</p> <p>The registered manager must ensure the service users’ bank accounts held by the HSC Trust are transferred to the service users’ personal accounts.</p>	<p>Met</p>
	<p>Action taken as confirmed during the inspection:</p> <p>The records in place were satisfactory and meet the stated requirement.</p>	

Previous Inspection Recommendations		Validation of Compliance
<p>Recommendation 1</p> <p>Ref: Standard 8.11</p>	<p>The registered person monitors the quality of services in accordance with the agency’s written procedures and completes a monitoring report on a monthly basis.</p> <p>This report summarises any views of service users and/or their carers/representatives ascertained about the quality of the service provided, and any actions taken by the registered person or the registered manager to ensure that the organisation is being managed in accordance with minimum standards.</p> <p>It is recommended that the views of professionals are obtained and recorded within monthly quality monitoring reports The time visits occur must be recorded within each report.</p>	<p>Met</p>
	<p>Action taken as confirmed during the inspection:</p> <p>The documentation n place has taken into account the recommendation, however the format is still under review by the HSC Trust.</p>	

5.3 Theme 1: Staffing Arrangements - suitable staff are supplied to meet the assessed needs of service users

Is Care Safe?

The agency has a recruitment policy updated by the NHSCT in September 2014. A mechanism is in place to ensure that appropriate pre-employment checks are completed and satisfactory. An alphabetical index of all domiciliary care workers supplied or available to work for the agency was maintained.

The agency has a structured induction programme lasting at least three days; this was confirmed by the staff members interviewed by the inspector. The agency maintains a record of the induction provided to all staff, including details of the information provided during the induction period. Staff are provided with a handbook, and have access to policies, procedures, and other guidance documents.

The agency has a procedure for verifying the identity of all staff prior to their supply; the Deputy Manager assured the inspector that no staff are supplied unless this procedure is followed.

The agency has a policy and procedure in place for staff supervision and appraisal which details the frequency of both. Records maintained of supervision and appraisal demonstrated that the frequency was in accordance with the agency's policy and procedure.

Is Care Effective?

Discussions with the deputy manager and staff members indicated that an appropriate number of skilled and experienced persons are available at all times. Examination of staff rotas reflected staffing levels.

The deputy manager described the agency's processes to assess the suitability of staff. The inspector viewed a range of documentation which evidenced how staff are provided with a clear outline of their roles and responsibilities. Staff who took part in the inspection were clear about what the agency expected of them.

Staff who took part in the inspection described the induction as effective in preparing new staff for their role. The inspector examined the records of one staff members induction; records of induction supported staff feedback.

The inspector noted the following areas of evaluation completed by staff following the induction period:

- *Did you find induction helpful?*
- *Did it explain the supported living ethos?*
- *Did it cover daily duties?*
- *Did the induction cover the following areas?*
- *Assessment and support planning*
- *Risk assessments*
- *Staff roles and responsibilities*
- *Medication*
- *Finances*

- *Reporting*
- *Lone working*
- *Supervision and appraisal*

The agency's process of evaluating the effectiveness of staff induction was seen within records reviewed by the inspector.

Discussion with staff and examination of training records provided evidence that the agency has a process in place to identify and respond to training needs. The agency provides a range of training outside of mandatory training. The deputy manager described a process of re-evaluating and improving training to suit the needs of staff and service users. Staff interviewed provided positive feedback about the nature and frequency of supervision and appraisal.

Is Care Compassionate?

The agency maintains a record of comments made by service users/representatives in relation to staffing arrangements. This was verified by the inspector in the minutes of tenants meetings in November 2014.

The staff are aware of the possible impact of staff changes on service users and discussed with the inspector the importance of induction and introduction of new staff.

The deputy manager described the process of recruitment undertaken by the agency in order to improve the continuity of staff to service users and minimise the disruption to service users. Induction procedures seen by the inspector indicated that staff receive induction specific to the needs of service users, this was supported by the staff comments.

Staff members who took part in the inspection clearly described having the knowledge and skills to carry out their roles and responsibilities.

Staff described how the induction process involves meeting service users and learning about their care needs with another member of staff. The agency's induction process is implemented in a manner which takes into account the consent, privacy and dignity of service users.

Service users' comments:

"Staff are very good."

"I feel safe here."

"Staff listen to us all."

"I have no complaints."

"Staff help me with all my activities."

"Supported living is brilliant."

"I love my home here."

Staff comments:

“Supervision and appraisal is in place and is one to one.”

“Training is good and helps you in your work.”

“Induction prepares you for your role.”

“The tenants have settled well into supported living.”

“Staff communicate well with each other.”

Areas for Improvement

N/A

Number of Requirements:	0	Number of Recommendations:	0
--------------------------------	----------	-----------------------------------	----------

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 reflected the views of service users and/or representatives. The inspector viewed records of a process involving the service user and/or their representative, the referring HSC Trust and the Agency, to ascertain the needs of the service users and their views.

There was evidence of positive risk taking in collaboration with the service user and/or their representative. This could be seen throughout a variety of records including risk assessments, care plans, and records of adult safeguarding referrals. Discussion with staff confirmed that they understood the concept of a balance of safety with service user choice. Staff could provide examples of positive risk taking in practice.

Is Care Effective?

Records of six annual reviews examined by the inspector indicated that care is regularly evaluated and reviewed. The agency has a policy of reviewing care and support plans every month or as required.

Care and support plans examined by the inspector were written in a person centred manner and included the service users' views.

Records examined within monthly monitoring reports, minutes of service users' meetings provided examples of how the agency delivers the service in response to the views of service users and relatives.

The agency has processes in place to ascertain and respond to the views of service users and their representatives. e.g.

- *Individual reviews of care and support*
- *Tenants meetings*
- *Monthly quality monitoring*
- *Complaints procedure*
- *Staffs daily contact with service users*

Service users have been provided with information relating to human rights in a suitable format.

Is Care Compassionate?

Feedback from the staff indicated that service users receive care in an individualised manner. Care plans and agency records were written in a person centred manner.

Service users and/or their representatives were aware of their right to be consulted and have their views taken into account in relation to service delivery.

The promotion of values such as dignity, choice and respect was evident through discussion with staff. The individual choices made by service users regarding the way they wish to live their lives were seen in activity programmes and care and support plans.

The agency collaborates with the HSC Trust regarding best interest practices for service users where there are capacity and consent issues. The agency's response to comments made by service users and their representatives shows how individual views are taken into account and responded to.

Records in place show clear evidence that staff meet with service users to review individual care and support plans.

Areas for Improvement

N/A

Number of Requirements:	0	Number of Recommendations:	0
--------------------------------	----------	-----------------------------------	----------

5.3 Additional Areas Examined

The agency has recently completed their annual quality survey and the inspector noted the positive results in relation to the following questions:

- Do you like living in your home?
- Do staff do a good job?
- Do staff listen to you?
- Do you have choice?
- Do you feel safe and secure?

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Rosemary Wray	Date Completed	03/11/15
Registered Person	Tony Stevens	Date Approved	03/11/15
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	9/11/15

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

Please ensure this document is completed in full and returned to agencies.team@rqia.org.uk from the authorised email address