



The Regulation and
Quality Improvement
Authority

Ellis Grove
RQIA ID: 10768
4 Ellis Grove
Carrickfergus
BT38 8ZP

Inspector: Jim McBride
Inspection ID: IN023037

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**Unannounced Care Inspection
of
4 Ellis Grove**

7 September 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An unannounced care inspection took place on 7 September 2015 from 09.00 to 13.30. 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: Dr Anthony Stevens	Registered Manager: Rosemary Wray
Person in charge of the agency at the time of Inspection: Rosemary Wray	Date Manager Registered: 27/02/2013
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 and Quality Improvement Plan (QIP)
- Incidents
- Records of contact with the agency since the last inspection

During the inspection the inspector met with four staff and the registered manager. 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. The service users indicated that they are happy in their homes.

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

- Discussion with the registered manager/staff and service users
- Examination of records
- File audit.

The following records were examined during the inspection:

- 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 for May, June, July, August and September 2015
- Service users meeting minutes for April, May, June and August 2015.
- Staff meeting minutes for October, November 2014. January, April and June 2015
- Staff training records for:
 - *Vulnerable adults*
 - *Complaints*
 - *Human rights*
 - *Risk assessments*
 - *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 and four 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.

Individual staffs written comments:

"My induction was very positive."

Two Staff Commented

"Tenants have requested holidays but due to HSC Trust policy we have been unable to meet their requests."

The inspector discussed this issue with the manager and her deputy who stated that new processes were now in place in the form of a template called *"Decision making template for service users holidays"* which they described as positive in the decision making process.

At the request of the inspector a number of questionnaires were circulated to the service users to be completed asking them about various aspects of their care. Eight 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

5. The Inspection

Ellis Grove is a domiciliary care supported living type scheme based in Carrickfergus. The scheme is part of the Northern HSC Trust who along with the Oaklee Housing Association provides a range of supported living opportunities to adults with learning disabilities. Ellis Grove offers support to 18 adults who either live in single or shared bungalows. The agency aims to empower service users to be as independent as possible and to lead fulfilled lives. Under the direction of the manager Mrs Rosemary Wray a staff of 14 provides personal and social support to service users to meet their assessed needs. The Northern HSC Trust commissions this service.

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 20 October 2014. The completed QIP was returned and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the Last Care Inspection

Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 8.11	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. It is recommended that the time of the visit and if it is announced or unannounced is recorded within monthly quality monitoring reports.	Met
	Action taken as confirmed during the inspection: The Registered Manager has discussed this recommendation with the Nominated Person who carries out these Monitoring Visits and has agreed that times will be noted on the Monitoring Report and it will specify if the visit was announced or unannounced. The inspector examined a number of monitoring visited completed on behalf of the registered provider from May 2015 to September 2015. The records in place were satisfactory.	

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's statement of purpose was updated on the 15 of May 2015 and service user's guide was updated in July 2015.

The agency has a structured induction programme lasting at least three days; this was confirmed by the manager and 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 registered 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.

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

Is Care Effective?

Discussions with the registered 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 described by the registered manager and staff.

The registered 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 two staff inductions; records of induction supported staff feedback.

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 registered 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.

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

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 on the 5 April 2015 and both the 6 June and 6 August 2015.

The manager was 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 registered 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.

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

Service users' comments:

"Very good here."

"I have good hopes for the future."

“The staff have helped me so much since I came here.”

“Staff welcomed me to my new home.”

“I trust the staff to help me make good decisions.”

“I’m free to come and go as I please I have good activities.”

Staff Comments:

“Staff supervision is good.”

“The induction is very positive.”

“We have a great team and support each other well.”

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 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 user 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. Both the manager and staff could provide examples of positive risk taking in practice.

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

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/or their representatives.

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. The inspector noted that the following information was shared with service users during the following meetings:

- Human Rights April 2015
- Complaints procedures June 2015
- Safeguarding April 2015

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

Is Care Compassionate?

Feedback from the manager and 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.

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

Areas for Improvement

N/A

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

The inspector noted the positive comments received from both service users and relatives, during the annual quality review of the service. The inspector particularly noted the following comments from relatives:

- "She's got a life of her own now and we are stepping back and it's about letting go."*
- "This is a good move for him, it was hard at first but we know he is very happy."*
- "If there was anything I was worried about i would come straight to the staff."*

Reports of monthly quality monitoring completed on behalf of the registered person were reviewed. The reports ascertain and respond to the views of service users, relatives, professionals and staff. The agency's reports of monthly monitoring are comprehensive and provide assurance of a robust system of quality monitoring.

Complaints

Records of complaints from 1 January 2014-31 March 2015 were examined. There were no complaints within the time period specified.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Rosemary Wray	Date Completed	01/10/15
Registered Person	Tony Stevens	Date Approved	2/10/15
RQIA Inspector Assessing Response	Jim Mc Bride	Date Approved	2/10/15

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