



The Regulation and
Quality Improvement
Authority

PCG St Paul's Court
RQIA ID: 10833
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Ballinderry Road
Lisburn, BT28 1TX

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**Announced Care Inspection
of
PCG St Paul's Court**

29 October 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An announced care inspection took place on 29 October 2015 from 09.00 to 12.30. Overall on the day of the inspection it was found that improvements in staff supply was necessary to ensure safe, effective and compassionate care. Areas for improvement were identified and stated in this report. The 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 due to the actions of the registered manager, who satisfied RQIA that the required actions identified were completed on the 30 October 2015 in relation to records that must be in place for agency workers.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

2. Service Details

Registered Organisation/Registered Person: Praxis Care Group, Irene Sloan	Registered Manager: Alison Hughes
Person in charge of the agency at the time of Inspection: Alison Hughes	Date Manager Registered: 17/7/15
Number of service users in receipt of a service on the day of Inspection: 23	

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 theme has been met:

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

4. Methods/Process

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

Prior to inspection the following records were analysed:

- Previous inspection report
- Incident records
- Records of contact with the agency since the last inspection.

During the inspection the inspector met with the registered manager, a team leader and three care staff. Three service users spoke with the inspector as well as one relative; all comments have been added to this report.

The following records were examined during the inspection:

- Six 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 April, May, June, July, August and September 2015
- Staff meeting minutes for June, July, August, September and October 2015
- Service users meetings for January, March, April, July, September and October 2015
- Staff training records:
 - Vulnerable adults
 - Supervision for supervisors
- Records relating to staff supervision
- Complaints records
- Recruitment policy. The policy was updated by Praxis Care on the 6 November 2014
- Records relating to recruitment process
- Induction procedure
- Staff rota information.

During the inspection questionnaires were completed by five staff. At the request of the inspector the manager was asked to distribute questionnaires to staff for return to RQIA. No questionnaires were returned.

The five staff indicated that they were either satisfied or very satisfied with the following:

- Service users' views are listened to
- The agency's induction process prepared you for your role
- The agency operates in a person centred manner
- Service users receive care and support from staff who are familiar with their needs
- You will be taken seriously if you were to raise a concern?

At the request of the inspector the manager was asked to distribute a number of questionnaires to the service users to be completed asking them about various aspects of their care. Five questionnaires were completed during the inspection and no questionnaires were returned to the RQIA following the inspection.

The five questionnaires completed 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.

Service user's written comments:

"The staff are all very helpful and never too busy to even care and share."

"This is a wonderful concept."

"No regrets about moving to this place, as soon as I came I knew it was home."

5. The Inspection

St Paul's Court is a supported living type domiciliary care agency designed to meet the needs of adults with mild to moderate dementia. It is situated on the Ballinderry Road, Lisburn, close to local amenities. It has been developed in partnership with Trinity Housing Association and the South Eastern Health and Social Care Trust. Under the direction of the registered manager, Ms Alison Hughes a team of 22 staff provide care and support to the service users 24 hours a day. Service users reside in both bungalows and an apartment complex.

5.1 Review of Requirements and Recommendations from Previous Inspection

No requirements or recommendations were made during the previous inspection

5.2 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 and a mechanism 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 and in five staff questionnaires. The manager stated that staff are provided with a handbook, and have access to policies, procedures, and relevant guidance.

The agency has a procedure for verifying the identity of all staff prior to their supply, and the manager assured the inspector that no staff are supplied unless this procedure is followed. The agency do use other registered domiciliary care agency staff. The agency have in place a procedure for emergency induction arrangements if required, this was examined by the inspector, However, a number of records were not in place for agency staff relating to:

- Induction records
- Identity details
- Training records
- Personal details

An urgent action notice was issued to the registered manager in relation to records that must be in place in relation to agency workers. Following further communication with the registered manager on the 30 October 2015 RQIA has been reassured that the records relating to agency staff are now in place.

The agency has a policy and procedure in place outlining staff supervision and appraisal which details the frequency of both. This was verified by staff during the inspection. 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 manager indicated that an appropriate number of skilled and experienced persons are available at all times. This was verified by the examination of the staff rotas available. The manager described the agency's processes to assess the suitability of staff. The inspector viewed a range of documentation that demonstrated how staff are provided with a clear outline of their roles and responsibilities.

Discussion with the manager and examination of training records evidenced that the agency has a process in place to identify and respond to training needs. The agency provides a range of training other than mandatory training.

Is Care Compassionate?

The agency maintains a record of comments made by service users/representatives in relation to staffing arrangements. The manager described how the agency discusses staffing arrangements with service users. The manager stated that staffing arrangements affecting individual service users is discussed with them one to one or at tenants meetings as required.

Discussions with the manager indicated that service users are prepared in advance of significant staff changes where possible. The staff were 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.

Staff comments:

"Training and supervision is good."
 "Staff induction is comprehensive."
 "We communicate well with each other."
 "Staff support people well in their new homes."
 "Service users have settled into supported living."

Service user's comments:

"The staff are very supportive."
 "Staff are excellent."
 "This is home from home."
 "Nothing is too much for staff."
 "The staff listen and respect my views."
 "I'm so comfortable here and made feel good."

Areas for Improvement

There were no areas for improvement identified in relation to this theme.

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

Reports of monthly quality monitoring completed on behalf of the registered person were reviewed. The reports evidenced how the agency ascertains 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 quality monitoring and service improvement.

Complaints/Compliments

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

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 in this report do not absolve the registered provider/manager from their responsibility for maintaining compliance with minimum standards and regulations.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Mary Clarke	Date Completed	08/01/16
Registered Person	Irene Sloan	Date Approved	08/01/16
RQIA Inspector Assessing Response	Audrey Murphy	Date Approved	11/01/16

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

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