



The Regulation and
Quality Improvement
Authority

Triangle Housing Association
RQIA ID: 10905
60 Eastermeade Gardens
Ballymoney
BT53 6BD

Inspector: Rhonda Simms
Inspection ID: IN023205

Tel: 028 2766 1775
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**Unannounced Care Inspection
of
Triangle Housing Association**

12 August 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 announced care inspection took place on 12 August 2015 from 10.00 to 16.30. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. There were no areas for improvement identified and there is no Quality Improvement Plan (QIP) appended to this report. 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

Following the care inspection of 16 September 2014, the registered person and their representatives attended a meeting at RQIA's offices on 22 October 2014. This meeting concerned matters regarding: charging for personal care; the financial agreement; and the situation of the agency's office.

During and subsequent to the meeting of 22 October 2014, the registered person provided satisfactory assurance to RQIA to ensure compliance with the Domiciliary Care Agencies Regulations (Northern Ireland) 2007.

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: Christopher Alexander	Registered Manager: Mary (Marie) Scullion
Person in charge of the agency at the time of Inspection: Mary (Marie) Scullion	Date Manager Registered: 05/05/2009
Number of service users in receipt of a service on the day of Inspection: 8	

Triangle Housing Association provides a supported living type domiciliary care agency at 37d Charlotte Street, Ballymoney consisting of single and double occupancy flats. The registered office is based adjacent to the supporting living service, at 60 Eastermeade Gardens. Services are currently provided for eight service users who have a learning disability and may have overlapping challenging behaviours or complex needs. Staff provide services that can include help with daily living / life skills, involvement in the local community, and maintaining a tenancy, with the overall goal of promoting independence and maximising quality of life.

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:

- Report and QIP of previous RQIA care inspection
- Incidents
- Correspondence.

During the inspection the inspector met with six service users, three staff, and spoke with two professionals and two relatives.

Staff questionnaires were left for completion; five were returned. These indicated that staff were either satisfied or very satisfied:

- that service users receive care and support from staff who were familiar with their care needs
- that service users have their views and experiences taken into account in the way service is provided and delivered
- that an appropriate number of suitably skilled and experienced persons are available to meet the needs of service users
- that staff would be taken seriously if they were to raise a concern
- that the induction process had prepared them adequately for their role.

Comments included:

'...service users can discuss anything with the staff at any time.'

'Staff within Triangle always adhere to Triangle core values; choice, inclusion, dignity, empowerment and respect.'

Questionnaires asking service users' views on the care they receive were left in the agency for completion; three were returned.

Service users were either satisfied or very satisfied:

- with the care and support they receive
- that their views and opinions are sought about the quality of service
- that staff know how to care for them and respond to their needs
- that staff help them feel safe and secure
- that staffing levels are appropriate.

The following records were examined during the inspection:

- 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
- Staff meeting minutes
- Records relating to staff training
- Records relating to staff supervision
- Supervision policy
- Complaints records
- Recruitment policy
- Induction procedure
- Records of induction
- Staff register
- Staff rota information
- Staff handover information
- Tenant meeting minutes.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the agency was an announced care inspection dated 16 September 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 Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 14 (c) (e)	Where the agency is acting otherwise than as an employment agency, 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>(c) so as to promote the independence of service users:</p> <p>(e) in a manner which respects the privacy, dignity and wishes of service users, and the confidentiality of information relating to them</p> <p>The registered person must review the arrangements around the service user 'sharing' accommodation with staff.</p> <p>The registered person must submit to RQIA on or before 19 November 2014 the outcome of this review; the registered person must ensure that this review takes into account the needs and preferences of the service users.</p>	
<p>Requirement 2</p> <p>Ref: Regulation14 (d)</p>	<p>Action taken as confirmed during the inspection:</p> <p>The inspection took place in the registered office which has moved to 60 Eastermeade Gardens, situated beside the supporting living service accommodation in Charlotte Street. Records and feedback obtained during inspection showed that the needs and preferences of service users had been taken into account during the transition process.</p>	<p>Met</p>
	<p>Where the agency is acting otherwise than as an employment agency, 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>(d) so as to ensure the safety and security of service users' property, including their homes</p> <p>At a meeting on 22 October 2014, the registered person provided RQIA with the assurance that they would highlight to the HSC Trust issues regarding service users paying for personal care contrary to DHSSPS guidance, and the responsibilities of the HSC Trust in relation to this matter. The registered person was asked to forward this correspondence to RQIA.</p>	
	<p>Action taken as confirmed during the inspection:</p> <p>The registered person responded with the HSC Trust regarding issues relating to service users paying for personal care. Correspondence was forwarded to RQIA by the requested date.</p>	<p>Met</p>

<p>Requirement 3</p> <p>Ref: Regulation 23 (2)(5)</p>	<p>2) At the request of the Regulation and Quality Improvement Authority; the registered person shall supply to it a report, based upon the system referred to in paragraph (1), which describes the extent to which, in the reasonable opinion of the registered person, the agency-</p> <ul style="list-style-type: none"> (a) Arranges the provision of good quality services for service users; (b) Takes the views of service users and their representatives into account in deciding- <ul style="list-style-type: none"> (i) What services to offer them, and (ii) The manner in which such services are to be provided <p>The registered person must ensure that the ongoing evaluation of restrictive practice is included in the monthly monitoring reports.</p> <p>Action taken as confirmed during the inspection: The inspector examined reports of monthly quality monitoring which included a section relating to restrictive practice. The inspector was informed that there were no restrictive practices at the agency during the period of the monthly quality monitoring reports examined.</p>	<p>Met</p>
<p>Previous Inspection Recommendations</p>		<p>Validation of Compliance</p>
<p>Recommendation 1</p> <p>Ref: Standard 4.2</p>	<p>The agreement between the service user and the service provider specifies:</p> <ul style="list-style-type: none"> • The arrangements for any financial transactions undertaken on behalf of the service user by the agency's staff and the records to be kept <p>The registered person should ensure that the financial agreement of any service user who shares accommodation with agency states the apportioning of shared costs.</p> <p>Action taken as confirmed during the inspection: The inspector examined the financial agreement for a service user which clearly stated the apportioning of shared costs between the service user and the agency. Further to the office move, no service user now shares accommodation with the agency.</p>	<p>Met</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 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 up to ten days, plus an additional five days training. The agency maintains a record of the induction provided to staff, including details of the information provided during the induction period. Staff are provided with a handbook, and have access to policies, procedures, and guidance.

The registered manager advised that the agency's own staff cover all shifts; this was supported by feedback from staff. The registered manager advised that the agency does not use employment agency staff; the agency has procedures and an induction in place regarding the use of employment agency staff which were examined by the inspector.

The agency has a policy and procedure in place for staff supervision and appraisal which details frequency: four performance reviews each year, two of which are competency assessments. Staff who spoke to the inspector confirmed that they had received supervision in line with policy and procedure. Records of supervision and appraisal demonstrated provision in accordance with the agency's policy and procedure.

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

Is Care Effective?

Discussions with the registered manager and staff indicated that an appropriate number of skilled and experienced persons are available to meet the assessed needs of service users at all times. Examination of staff rotas reflected staffing levels described by the registered manager and staff. Service users provided positive feedback regarding staffing levels and the availability of staff. Service users showed the inspector a call system within their homes which enables them to alert staff if required.

The inspector viewed documentation to evidence how staff are provided with a clear outline of their roles and responsibilities. Staff who took part in the inspection were clear regarding their roles and described effective systems of communication within the agency.

Records indicated that an effective induction is provided prior to staff giving care and support to service users. The registered manager discussed the agency's process of evaluating the effectiveness of staff induction through monthly supervision during the probationary period, observation and staff evaluation.

Discussion with staff and examination of training records showed that the agency has a process in place to identify and respond to training needs.

Supervision is provided by the service manager, who has been appropriately trained to carry out the role. Staff described receiving supervision and appraisal in line with the agency's policy, and having open access to a manager on shift, and an on call manager out of hours.

Staff interviewed by the inspector were aware of how to raise issues regarding poor practice and were confident of an appropriate management response. Staff knew how to access and use the whistleblowing policy.

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

Is Care Compassionate?

The agency uses a range of methods to record comments made by service users/representatives in relation to staffing arrangements, including monthly monitoring reports and tenants' meetings.

The inspector noted that since the previous inspection of 16 September 2014 the agency has undergone a significant change in staffing arrangements due to the move of the agency office. This change has impacted on all service users, and particularly the service user in whose home the office was formerly situated. It was evident from examination of documentation and feedback from service users, a relative, staff and a professional, that the agency had involved all relevant parties appropriately in the planning and transition process.

The agency can demonstrate that the provision of domiciliary care workers ensures service users receive continuity of care to meet their needs. The agency maintains a stable staff team with few changes.

Induction records showed that the agency provides an induction specific to the needs of service users. Agency staff described how the induction process involves meeting service users and learning about their care needs with an experienced 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.

Agency staff who took part in the inspection confirmed that they have the knowledge and skills to carry out their roles and responsibilities. Service users' comments indicated that staff have the knowledge and skills to provide appropriate care.

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

Service users' comments

'The staff treat me lovely.'

Relatives comments

'It couldn't be better.'

'The staff are very good, they know all about ****.'

Staff comments

'I am very happy with my training within my role and also my induction was very thorough.'

Professionals' comments

'The staff know service users well and have good relationships with them.'

'I am satisfied with the service.'

'The staff are very good.'

'Staff are approachable.'

Areas for Improvement

No areas for improvement were identified as a result of this inspection.

Number of Requirements:	0	Number of Recommendations:	0
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Theme 1: Staffing Arrangements - suitable staff are supplied to meet the assessed needs of service users. This theme has been fully met.

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 seen by the inspector reflected the views of service users and/or representatives. The inspector reviewed a range of care and support plans devised with service users which reflected assessments of need and risk assessment. Service users commented on how the staff involve them in their care and support plans.

Staff discussed examples where service users have the capacity to make decisions which involve positive risk taking. Staff described how the agency has encouraged service users to undertake self-advocacy and safeguarding training. Feedback from a professional indicated that the agency works appropriately with the HSC Trust in relation to positive risk taking.

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

Is Care Effective?

The inspector examined records which showed evidence of regular evaluation and review within procedural guidelines and as the service user's needs change. The process of review with the HSC Trust was particularly evident in documentation concerning a service user with complex needs. The views of service users and/or their representatives were recorded in review records. Feedback from a professional indicated that service users, representatives and the HSC Trust are appropriately involved in the review process.

The inspector viewed a range of care and support plans which were written in a person centred manner, clearly included the service users' views throughout, and showed evidence of updating. Staff described a process of reviewing care and support plans along with service users; this was supported by documentation viewed by the inspector.

The inspector received feedback which demonstrated that the agency is responsive to the views and concerns of service users and representatives. This responsiveness is particularly evident in relation to the move of the agency office to premises outside of a service user's home. The agency has processes in place to ascertain and respond to the views of service users and their representatives, including through surveys, monthly monitoring, the complaints process and tenants' meetings.

Service users have been provided with information relating to human rights and advocacy in a suitable format. Some service users have received training from the agency and been involved in advocating on behalf of themselves and other service users across the organisation. A service user described their mentoring role with another service user who is undertaking advocacy training through the agency.

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

Is Care Compassionate?

Feedback from service users indicated that they receive care in an individualised manner; this was supported by care records. The inspector visited five service users in their own homes; each person's home was individually decorated to reflect their personal preference and interests. Service users discussed their individual interests and how they choose to spend their time. It was evident from speaking to staff that the agency is flexible in its approach to service provision and aims to facilitate the interests and choices of all service users.

Triangle Housing Association involves service users in tenants' meetings and with consultation and advocacy groups across the wider organisation. The inspector noted that staff issues, safeguarding, and human rights are included in each tenants' meeting and reflected in the minutes.

Services users who spoke with the inspector were clearly able to express their views and choices. A number of service users described their involvement with the Tenants' Advisory Group, Choice Checkers peer review programme, and self-advocacy training. Records relating to reviews of care and support plans and tenants' meeting demonstrated that service users have their views considered in relation to service delivery.

The agency could demonstrate that the service users' views, capacity and consent have been taken into account in service delivery. The agency was able to demonstrate ongoing promotion of human rights and the values underpinning the Minimum Standards. Discussions with staff indicated that values underpinning the Minimum Standards are embedded in service delivery.

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

Service users' comments

'I go to other services and ask questions, I love it.'

'I can pull the cord, ask the staff for help.'

'I do peer reviews.'

'I did self-advocacy, I got a certificate.'

'I meet other tenants, ask their point of view.'

'I am mentoring another tenant.'
 'I learnt about dignity, respect.'
 'The staff knock the door.'
 'I can speak to the manager, or go higher' (if not happy)
 'I'm very happy.'
 'I can do what I want to do.'
 'I'm very happy here.'

Relatives' comments

'**** is happy, I'm very pleased.'
 '**** would not live anywhere else.'

Professionals' comments

'The review process is well planned.'
 '**** seems content and settled.'
 'Staff keep in contact appropriately.'

Areas for Improvement

No areas for improvement were identified as a result of this inspection.

Number of Requirements:	0	Number of Recommendations:	0
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Theme 2: Service User Involvement - service users are involved in the care they receive. This theme has been fully met.

5.5 Additional Areas Examined

5.5.1 Quality monitoring

Reports of monthly quality monitoring completed on behalf of the registered person were examined during inspection. The reports ascertain and respond to the views of service users, relatives, professionals and staff. The reports progress on improvement issues identified by monitoring and RQIA Quality Improvement Plans.

5.5.2 Complaints

The inspector examined records of five complaints received from 1 January 2014 - 31 March 2015 which had been appropriately addressed.

5.5.3 Safeguarding

The inspector was advised that no safeguarding referrals have been made since the last inspection. The agency has offered safeguarding training which has been taken up by some service users.

5.5.4 Service users' finances

The inspector examined records maintained in respect of payments made to service users by the agency, as outlined in the service users' agreement.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Mary (Marie) Scullion	Date Completed	28/8/15
Registered Person	Christopher Alexander	Date Approved	28/8/15
RQIA Inspector Assessing Response	Rhonda Simms	Date Approved	15/9/15

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

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