



The Regulation and
Quality Improvement
Authority

Triangle Housing Association
RQIA ID: 12115
33-35 Adelaide Avenue
Coleraine
BT52 1LT

Inspector: Rhonda Simms
Inspection ID: IN023217

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**Unannounced Care Inspection
of
Triangle Housing Association**

18 September 2015

The Regulation and Quality Improvement Authority
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Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced care inspection took place on 18 September 2015 from 9.45 to 15.45. Overall on the day of the inspection the agency was found to be delivering safe, effective and compassionate care. Areas for improvement were identified and are set out in the 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

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.

2. Service Details

Registered Organisation/Registered Person: Christopher Alexander	Registered Manager: Colette Sheppard
Person in charge of the agency at the time of Inspection: Melessa Corbett	Date Manager Registered: 19 September 2012
Number of service users in receipt of a service on the day of Inspection: 13	

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.

As part of the inspection the inspector met with six service users, six staff, and spoke with two community professionals and three relatives. The feedback received by the inspector is included throughout the report.

Staff questionnaires were left for completion; eleven 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’ views are important.’

‘Service users are deeply involved with the service provided for them.’

‘This organisation provides excellent inductions and training for staff.’

‘Staff are well equipped through excellent training and guidance from management and care professionals.’

Comments included:

‘Ongoing training for staff, staff and service user involvement in tenants’ advisory group, advocacy training, Triangle choice checkers and tenants’ survey as well as monthly reviews and tenants’ meetings, ensures that service users are listened to and a high level of care and support delivered. The core values of choice, inclusion, dignity empowerment and respect are implemented at all times.’

Questionnaires asking service users’ views on the care they receive were left in the agency for completion; nine 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
- Quality monitoring information
- Monthly monitoring reports
- Staff meeting minutes
- Records relating to staff training
- Records relating to staff supervision
- Policy relating to supervision and the management of performance
- 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 23 February 2015. The completed QIP was returned and approved by the care inspector.

No requirements or recommendations resulted from last inspection of 23 February 2015.

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 which comprises five days training and up to ten days on site learning, including shadowing experienced staff. 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 inspector was advised that the agency uses its own staff to cover shifts as far as possible. In the event of use of employment agency staff, the agency has in place an induction procedure and guidance for all staff. The inspector viewed records relating to agency staff which included guidance for verifying the identify of all staff prior to their supply.

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. The inspector examined a range of supervision and appraisal records which 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 staff indicated that an appropriate number of skilled and experienced persons are available to meet the assessed needs of service users at all times. Staff described management of the rota to provide additional staffing at times when service users require more care and support. Examination of staff rotas reflected staffing levels described by the registered manager and staff. Service users provided positive feedback regarding the availability of staff.

Staff who took part in the inspection clearly described their roles and responsibilities, facilitated by a range of effective verbal and written communication methods used within the agency.

Records indicated that an effective induction is provided prior to staff giving care and support to service users. Staff who took part in the inspection provided positive feedback regarding the quality of the induction period. The inspector was advised that the induction period allows time to get to know service users and a gradual increase in responsibility following assessment. The agency operates a 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. Staff described how additional training has been provided in relation to the needs of service users, in conjunction with appropriate specialist professionals.

Supervision is provided by the service manager, who is appropriately skilled 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. The inspector received positive feedback regarding the quality of supervision provided to staff.

Staff interviewed by the inspector knew how to access and use the whistleblowing policy. The inspector was advised that the subject of whistleblowing had been covered in training.

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 staffing arrangements are a standing item on the agenda of every tenant meeting.

The agency can demonstrate that the provision of domiciliary care workers ensures service users receive continuity of care to meet their needs via a stable staff team. Staff described use of employment agency staff as a 'last resort'; records showed that a small number of agency staff are used.

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 inspector received feedback that an induction type process was used to good effect when a member of staff returned to work following a prolonged period of absence. 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. A number of staff commented favourably on the quality and breadth of training provided by the agency. Relatives and community professionals provided positive feedback regarding the knowledge and skills of the staff team, including the registered manager.

The agency has a process in place to address the unsatisfactory performance of a domiciliary care worker.

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

Areas for Improvement

There were no areas of improvement identified in relation to Theme 1.

Number of Requirements:	0	Number of Recommendations:	0
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5.3 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. Staff described care and support plans as dynamic documents which continue to change and develop in response to the needs and wishes of service users.

The inspector received feedback from staff regarding a range of examples of positive risk taking in response to the views of service users, including their relatives, in conjunction with assessment by the HSC Trust where appropriate. Positive risk taking was evident in care

and support plans examined by the inspector. The inspector noted that the agency provides structured training in advocacy, human rights, and safeguarding to service users, in addition to including these issues in tenants' meetings and staff meetings.

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 of care. The views of service users and/or their representatives were recorded throughout the review process. Staff described how they endeavour to ascertain the views of all service users, including those who have additional communication needs. Staff provided feedback regarding the use of the review process with the HSC Trust to facilitate service users' choice and independence through gaining new skills and independence.

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 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. Feedback from staff and service users clearly indicated that the delivery of the service is responsive to the views of service users. Relatives provided feedback that the agency responds to their views appropriately.

Service users have been provided with information relating to human rights and advocacy in a suitable format. Some service users have received human rights and advocacy training from the agency, alongside service users across the wider agency. The inspector noted that human rights are a standing item on the agenda for tenants' meetings.

Some service users are involved in the Tenants' Advisory Group, and can represent the views of all tenants at these meetings. The inspector noted that the views and opinions of the Tenants' Advisory Group are used to inform a range of issues across Triangle Housing Association.

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 four 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 aims to ascertain and 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 able to express their views and choices. 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.

Areas for Improvement

There were no areas for improvement identified in relation to Theme 2.

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

5.4.1 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.

5.4.2 Complaints

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

5.4.3 Safeguarding Referrals

The inspector discussed and examined records of one safeguarding referral subject to ongoing consideration with the HSC Trust. Staff who took part in the inspection had a clear understanding of their roles in the ongoing protection plan.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	C Sheppard	Date Completed	12/10/15
Registered Person	C Alexander	Date Approved	12/10/15
RQIA Inspector Assessing Response	Rhonda Simms	Date Approved	16/10/15

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