

Announced Care Inspection Report 2 March 2020



Families Matters Shared Lives Service

Type of Service: Adult Placement Agency

Address: Castleton Centre, 30a-34a York Road, Belfast, BT15 3HE

Tel No: 02890741271

Inspector: Jim McBride

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

Families Matter Shared Lives Service offers people with a learning disability, acquired brain injury or autistic spectrum condition short breaks or longer stays with approved individuals or families (known as Shared Lives Carers).

Shared Lives Carers provide weekend or short term planned support in order to provide existing carers with a short break, (respite) and to provide individuals with opportunities to have new experiences. Long term placements are provided when an adult requires long term accommodation, similar to a fostering arrangement.

Within this report, adults in receipt of a service from the agency will be referred to as 'people supported', in accordance with their wishes. The agency has placed 20 people supported within a number of placements.

3.0 Service details

Organisation/Registered Provider: Positive Futures Responsible Individual: Ms Agnes Philomena Lunny	Registered Manager: Mr Paul Roberts (Acting)
Person in charge at the time of inspection: Mr. Paul Roberts	Date manager registered: (Acting)

4.0 Inspection summary

An announced inspection took place on 2 March 2020 from 09.00 to 11.30.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and by the Adult Placement Agencies Regulations (Northern Ireland) 2007.

As a public-sector body, RQIA have a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of adult placement agencies, we are committed to ensuring that the rights of people who receive services are protected. This means we will be seeking assurances from providers that they take all reasonable steps to promote people's rights. Users of the service have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted.

There were examples of good practice found throughout the inspection in relation to the processes for the recruitment, training and ongoing development of carers. The care records were well maintained and there was evidence of good communication with relevant stakeholders. Care and support was provided in an individualised manner. The agency promoted the involvement of the people supported. There were good governance and management arrangements in place, which focused on quality improvement initiatives and maintaining good working relationships.

It was evident in all four domains that the agency promoted the people supported human rights; this was evident particularly in relation to the areas of consent, autonomy, equality, decision making, privacy, dignity, confidentiality and involvement.

The findings of this report will provide the agency with the necessary information to assist them to fulfil their responsibilities, enhance practice and the people supported experiences.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mr Paul Roberts, acting manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

5.0 How we inspect

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

- discussion with the acting manager
- discussion with staff
- discussion with one of the persons supported
- examination of records
- evaluation and feedback
- review of the annual quality report

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- the previous inspection report
- any correspondence received by RQIA since the previous inspection
- records of any notifiable events

During the inspection the inspector spoke with staff regarding the care and support provided by the agency, carer training and carers' general knowledge in respect of the agency. The inspector also had the opportunity to meet with a person supported and has added the comments below:

Comments:

- "I love my carers."
- "I do lots of activities."
- "Both carers are kind to me."
- "I have lots of choices."
- "I feel safe in my placement."
- "I enjoy going out to eat and to do other things."
- "The Positive Futures staff are friendly and helpful."

Prior to the inspection the agency was asked to distribute a number of questionnaires to the people supported/relatives and carers seeking their views on the quality of the service provided. The responses show clear evidence that people were either satisfied or fully satisfied with the quality of the service highlighting that it is safe, effective, compassionate and well led.

Comments received from the people supported and their carers:

- "Good working relationship with social worker"
- "I love it. I go everywhere and go shopping. I just love going out with ***** and ***."
- "I have total faith in the knowledge my ***** is in a safe environment, which is perfect for me. I can relax and not have to worry."

The findings of the inspection were provided to the manager at the conclusion of the inspection.

6.0 The inspection

6.1 Inspection findings

6.2 Is care safe?

Avoiding and preventing harm to service users from the care, treatment and support that is intended to help them.

Training updates are organised annually by the agency and carers are given a choice of dates and times to attend. The training sessions cover all aspects of mandatory training including: safeguarding, infection control, keeping information safe, medication, finances and policy and procedures updates. It was good to note that carers had completed training on the Deprivation of Liberty Safeguards (DoLS) and General Data Protection Regulations (GDPR). The inspector noted some of the comments made by carers following the assessment of their training:

- “A good discussion about the deprivation of liberty.”
- “I’m able to apply knowledge to care situations.”
- “I have a better understanding of things.”
- “It was good to refresh previous training.”

The agency’s carer recruitment policy outlines the process for ensuring that required checks are completed prior to commencement of any placement. The agency’s induction policy outlines the carer induction programme required within the adult placement regulations.

The agency’s procedures in relation to safeguarding adults and whistleblowing were reviewed. The ‘Safeguarding’ procedure provided information and guidance in accordance with the required standards. The procedure has been updated in accordance with the Department of Health, Social Services and Public Safety Northern Ireland’s (DHSSPSNI) updated adult safeguarding guidance issued in July 2015 (‘Adult Safeguarding Prevention and Protection in Partnership’).

Assurances were provided that the Annual Position Report will be completed in 2020. This will be reviewed during the next inspection.

The agency maintains a record of referrals made to the relevant Health and Social Care Trust (HSCT) safeguarding team and other relevant stakeholders relating to any alleged or actual incidences of abuse. It was identified that carers are required to complete safeguarding training during their induction programme and in addition a three yearly update.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the processes for the recruitment, training and ongoing development of carers.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.3 Is care effective?

The right care, at the right time in the right place with the best outcome.

The agency's arrangements for responding appropriately to and meeting the assessed needs of the people supported were examined during the inspection.

The full nature and range of service provision is detailed in the Statement of Purpose, (2019) and Service User Guide, (2019).

The review of care records identified that they were comprehensive, person-centred and maintained in an organised manner. The care records included referral information, risk assessments, care plans and annual care reviews that had been completed in conjunction with the relevant HSCT representative. This supported the agency in conjunction with the people supported to review and measure outcomes. It was good to note that care plans are regularly audited by staff and reviewed in conjunction with the people supported and key stakeholders.

Care plans were noted to be person-centred. Care records did indicate that the people supported were central to the process. Care review records were reviewed and it was noted that follow up action had been taken in response to identified actions. Any recommendations in relation to the person supported's care plan did show that there was a system in place for review feedback. The inspector noted some of the comments made by the people supported during their annual reviews:

- "I'm very happy."
- "I like visiting my carers."
- "I like going in trips."

There were arrangements in place to obtain, and act in accordance with the consent of people using the service. Care and support plans had been signed by the people supported or their representatives who indicated that they had been involved in their care and had agreed to it. It was noted that where care/support plans had been reviewed and relevant documentation was in place.

No concerns were raised during the inspection with regards to communication between the people supported, staff, carers and other key stakeholders. Review of the care records evidenced that collaborative working arrangements were in place and where applicable other key stakeholders were involved.

The agency had robust quality monitoring systems in place to audit and review the effectiveness and quality of care delivered to the persons supported. Monitoring reports indicated consultation with a range of people supported and carers. The inspector noted some of the comments made by the people supported during the “How happy are you?” quality audit completed by the agency:

- “I would speak to my carer about my worries or if I was unhappy.”
- “I’m happy in my placement.”
- “Carers are good to me.”
- “I like my activities.”

Areas of good practice

There were examples of good practice identified throughout the inspection in relation to the quality monitoring process and the agency’s engagement with the people supported.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.4 Is care compassionate?

Service users are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

The inspector sought to assess the agency’s ability to treat the people supported with dignity, respect, equality and compassion and to effectively engage the persons supported in decisions relating to their care and support.

The inspector discussed arrangements in place relating to the equality of opportunity for the people supported and the need for carers to be aware of equality legislation whilst also recognising and responding to the diverse needs of the people supported in a safe and effective manner.

Discussions with a person supported and staff provided evidence that supports equal opportunities, regardless of abilities, background, choices or their lifestyle.

Some of the other areas of equality awareness identified during the inspection include:

- Effective communication
- Persons supported involvement
- Adult safeguarding
- Advocacy
- Equity of care and support
- Individualised person-centred care
- Individualised risk assessment
- Disability awareness.

A person supported consulted with during the inspection, provided good examples of the different ways the carers and staff treated them with respect and dignity, whilst promoting their independence.

Areas of good practice

The agency promoted the involvement of the people supported within the service. There were examples of good practice identified throughout the inspection in relation to the provision of individualised, compassionate care and engagement. Both with the people supported and other relevant stakeholders with the aim of promoting the safety of the persons supported and improving the quality of the service provided.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

The inspector reviewed the management and governance systems in place within the agency to meet the needs of the people supported. It was identified that the agency has effective systems of management and governance in place.

There had been no complaints received by the agency from the date of the last inspection.

The annual quality monitoring report was completed. An action plan was generated to address any identified areas for improvement and it was noted that these had been followed up to ensure that identified areas had been actioned. The inspector noted some of the comments recorded on the annual quality report:

- “I receive great support from Positive Futures.”
- “Staff are always there when needed.”
- “Training is well balanced and interactive.”

There was a system in place to ensure that the agency’s policies and procedures were reviewed at least every three years. Policies were accessible to carers. The inspector reviewed the following policies:

- Complaints
- Adult Safeguarding
- Whistleblowing

There was evidence of effective collaborative working relationships with key stakeholders, including the HSCT, carers and the people supported. The agency had received positive feedback through their quality monitoring processes.

Areas of good practice

There were good governance and management arrangements in place, which focused on quality improvement initiatives and maintaining good working relationships.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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