

Announced Care Inspection Report 4 March 2019



Positive Futures Families Matter Shared Lives Service

Type of Service: Adult Placement Agency

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

Tel No: 02890741271

Inspector: Jim Mc Bride

User Consultation Officer: Clair Mc Connell (UCO)

www.rqia.org.uk

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.

The agency has currently placed 20 people supported within 28 placements. Within this report, adults in receipt of a service from the agency will be referred to as 'people supported', in accordance with their wishes.

3.0 Service details

Organisation/Registered Provider: Positive Futures Responsible Individual: Ms Agnes Philomena Lunny	Registered Manager: See Below
Person in charge at the time of inspection: Alison Milford	Date manager registered: Alison Milford(application received 28 January 2019 “registration pending”)

4.0 Inspection summary

An announced inspection took place on 4 March 2019 from 09.15-12.15 hours.

This inspection was underpinned by the Adult Placement Agencies Regulations (Northern Ireland) 2007.

The inspection assessed progress since the last care inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to:

- carer recruitment processes
- induction
- communication and engagement with the people supported and other relevant stakeholders
- person centred care
- matching process
- carer training
- carer group meetings
- quality monitoring
- home monitoring visits announced/unannounced
- mechanisms in place to obtain feedback and views from service users

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 Ms Alison Milford, 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.

4.2 Action/enforcement taken following the most recent care inspection dated 29 March 2018

No further actions were required to be taken following the most recent inspection on 29 March 2018.

5.0 How we inspect

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

- discussion with the manager
- examination of records
- user consultation officer report (UCO)
- evaluation and feedback
- annual 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

The following records were examined during the inspection:

- quality monitoring reports
- six care and support plans
- carers group meetings information
- carer training records including:
 - adult protection
 - medication
 - health& safety
 - first aid
- service users monies
- human rights
- restrictive practice
- keeping information safe

Policies reviewed:

- safeguarding policy 2018
- carer recruitment policy 2017
- person centred reviews 2017
- whistleblowing 2018
- confidentiality 2018
- statement of purpose 2019
- carers induction handbook 2019

The agency encourages carers to evaluate induction and training following each individual session; the inspector has noted some of the comments received from carers:

- “I know how to record daily.”
- “I have a better knowledge of medication provision.”
- “Good knowledge of safeguarding and responding to issues.”
- “The importance of record keeping.”
- “Training was very helpful.”
- “Good to share with others.”
- “Good understanding of risks.”

As part of the inspection the UCO spoke with three carers and one relative, by telephone, to obtain their views of the service provided by Positive Futures.

During the inspection the inspector spoke with the manager regarding the care and support provided by the agency, carer training and carers’ general knowledge in respect of the agency.

Prior to the inspection the manager was also asked to distribute a number of questionnaires to people supported/relatives and carers seeking their views on the quality of the service. 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:
“I love my volunteer”

The inspector would like to thank the agency staff for their warm welcome and full co-operation throughout the inspection process.

The findings of the inspection were provided to Alison Milford at the conclusion of the inspection.

6.0 The inspection

The most recent inspection of the agency was an announced care inspection.

6.1 Review of areas for improvement from the last care inspection dated 29 March 2018

There were no areas for improvement made as a result of the last care inspection.

6.2 Inspection findings

6.3 Is care safe?

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

The UCO was advised that training is organised annually by the agency and carers are given a choice of dates and times to attend. The training session covers all aspects of mandatory training including medication, finances and benefits, first aid and safeguarding. The carers felt that the training is beneficial, both as a refresher but also as an opportunity to meet other carers.

The inspector reviewed the agency's systems in place to avoid and prevent harm to the people supported; this included a review of carer arrangements in place within the agency.

The agency's carer recruitment policy outlines the process for ensuring that required checks are completed prior to commencement of any placement. The manager stated that they ensure that carer checks are in place. Documentation viewed and discussions with the manager indicated that the agency's recruitment systems are effective for ensuring that carers are not provided with a placement until required checks have been satisfactorily completed.

The agency's induction policy outlines the carer induction programme required within the adult placement regulations.

A record of the induction programme provided to carers is retained; the inspector viewed records of individual induction and noted that they are verified by the manager. Discussions with the manager indicated that current carers had the appropriate knowledge and skills to fulfil the requirements of their role.

The inspector viewed details of training completed by carers; it was noted that they are required to complete induction training, a range of mandatory training and training specific to the needs of individual people supported. Records of carer induction and training viewed were satisfactory.

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 line with the Department of Health, Social Services and Public Safety Northern Ireland (DHSSPSNI) updated adult safeguarding guidance issued in July 2015 ('Adult Safeguarding Prevention and Protection in Partnership'). The agency has highlighted the identification and role of an Adult Safeguarding Champion.

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

The inspector reviewed the agency's arrangements for identifying, managing and where possible eliminating unnecessary risk to the people supported health, welfare and safety. The agency's protocol for assessment of needs and risk outlines the process for assessing and reviewing risk.

It was identified that the agency receives a range of relevant information and assessments relating to individual people supported prior to them receiving care and support. The agency has a range of risk assessments and care plans in place relating to the people supported.

The manager described how the people supported and /or their representatives are supported to be involved in the development and review of their care plans; these are reviewed and updated as required. The inspector noted that the current care plans are written in the “About You” format, a comprehensive person centred plan for recording all care and support needs.

Some of the areas covered include:

- “What people like and admire about me?”
- “What’s important to me?”
- “How best to support me?”

Returned questionnaires from the people supported indicated that safe care meant:

- Carers are always there to help you
- You feel protected and free from harm
- You can talk to carers if you have concerns.

Returned questionnaires from carers indicated that safe care meant:

- They meet the needs of the adult placed in their home
- They have received all mandatory training
- They have received safeguarding training
- They are aware of your responsibility and the process for reporting any concerning or unsafe practice.

Areas of good practice:

There were examples of good practice identified throughout the inspection in relation to the agency’s carer recruitment processes, training, adult protection, matching process and reviews.

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 effective?

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

The three carers and one relative spoken with by the UCO advised that they have regular phone calls and monitoring visits from the agency’s staff to ensure that there are no concerns regarding the placements and discuss any changes to the care and support plan. Confirmation was received that the agency provided a file containing the necessary paperwork including information about the complaints procedure.

Communication was noted to be very good between the relatives, agency and carers; and the carers felt that the staff are approachable should they need to contact them. Examples of some of the comments made by the carers or relative are listed below:

- “Amazing support from them. Great team.”
- “Always at the end of the phone.”
- “Very happy. The team is very experienced and provide good support.”
- “Peer support is so important. They’re in the same boat as us and can offer advice and experience.”

The agency’s arrangements for appropriately responding to and meeting the assessed needs of the people supported were reviewed. Details of the nature and range of services provided are outlined within the agency’s Statement of Purpose (2019).

The agency’s management of records policy details the procedures for the creation, storage, retention and disposal of records. Records viewed during the inspection were noted to be maintained in accordance with legislation, standards and the organisational policy. Carers and the people supported records viewed by the inspector were noted to be retained securely.

The manager could describe the methods used for assisting the people supported to be effectively engaged in the development of their care plans; it was noted that carers are provided with a copy of the care plan and the people supported have access to this.

The inspector reviewed the agency’s arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to the people supported. The agency has a system in place for monitoring the quality of the service provided; it was noted that the process involves seeking information from the people supported, families, carers and community care workers.

The inspector has included some of the comments made by the people supported:

- “I would like to tell ***** that I’m happy.”
- “I’m very happy here.”
- “I like living here this is my home.”
- “I have all my possessions around me.”
- “I get treated properly and well. I feel safe.”
- “I can choose what I like to eat.”

The inspector noted the information from the carer groups which are facilitated by the agency. The carers groups show evidence that carers enjoy meeting with each other and sharing information whilst on occasions completing training.

The agency also ensures the effectiveness of the care and support by completing regular monitoring visits. Records of monitoring visits were noted to include details of the review of the agency’s systems and an improvement plan. The documentation includes details of the review of accidents, incidents or safeguarding referrals, complaints, medication and care plans.

The agency’s systems to promote effective communication between the people supported, carers and relevant stakeholders were reviewed during the inspection. Discussions with the manager indicated that carers communicate appropriately with the people supported and where appropriate their representatives.

Returned questionnaires from the people supported indicated that effective care meant:

- You get the right care, at the right time in the right place.
- The carers know your care needs.
- Your care plan is discussed and agreed with you.
- Your care meets your expectations.

Returned questionnaires from carers indicated that effective care meant:

- They believe that the adult placed has been assessed and are in the right place for their needs to be met.
- They are kept informed of changes to the adult placed care plan.
- They have good working relationships with their social worker.

Areas of good practice:

There were examples of good practice identified throughout the inspection in relation to the agency’s auditing arrangements, quality monitoring and communication with the people supported and their carers.

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 care compassionate?

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

The UCO was informed by the carers and relative interviewed that staff from the agency regularly phones or visits to obtain their views of the service being provided. The people supported are also asked for their views to ensure satisfaction with the placement. The carers interviewed were knowledgeable regarding the people supported, the support they required and the types of activities they like to do; for example day trips, glamping, shopping or meals out.

Examples of some of the comments made by the carers or relative are listed below:

- “XXX is treated like part of the family and takes part in whatever is happening.”
- “Couldn’t praise them enough.”
- “XXX can’t wait to go. Always packed days early.”
- “Couldn’t survive without them (carers) and Positive Futures.”

The inspection assessed the agency’s ability to treat the people supported with dignity, respect and compassion and to engage the people supported in decisions affecting the care they receive. Discussions with the manager indicated that the values such as choice, dignity and respect were embedded in the culture of the agency.

The manager could describe the methods used for assisting the people supported to make informed choices and for respecting their views and wishes.

Carers have been provided with training and information in relation to human rights and confidentiality during their induction programme. The agency has provided the people supported with information relating to human rights, complaints, advocacy and adult safeguarding.

There are a range of systems in place to promote effective engagement with the people supported and where appropriate their representatives in conjunction with the HSCT community keyworker; they include the agency's quality monitoring processes; complaints process, care review meetings and carers monitoring and training updates. It was identified that the agency's quality monitoring process assists in the evaluation of the quality of the service provided and in identifying any areas for improvement.

The agency has processes in place to record comments made by the people supported; records of care review meetings. Quality monitoring reports viewed by the inspector provided evidence that the agency endeavours to engage with the people supported and carers and where appropriate their representatives in relation to the quality of the service provided.

Returned questionnaires from the people supported indicated that compassionate care meant:

- Carers treat you with kindness
- Carers ensure you are respected and that your privacy choices and dignity is maintained
- Carers talk to you about your care
- Carers support you to make decisions about your care.

Returned questionnaires from carers indicated that compassionate care meant:

- They treat adults placed with kindness, dignity and respect.
- Care is delivered by you in a person centred individual manner.
- They communicate with the adult placed about their care and treatment in a manner which is understood.

Areas of good practice

There were examples of good practice identified in relation to the agency's processes for engaging with the people supported, effective communication with carers individually and in groups whilst providing care in an individualised person centred manner.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 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.

All of the carers and relatives who spoke with the UCO confirmed that they receive good support from the agency's team of staff. Regular communication was confirmed, either through home visits or phone calls to ensure that there were no concerns regarding the placement. All were aware of whom they should they contact if they had any concerns regarding the placement and were aware of the support available to them.

The agency has systems of management and governance in place to promote the delivery of safe, effective and compassionate care.

The agency has a range of policies and procedures noted to be in accordance with those as required within the regulations. During the inspection the inspector viewed a number of policies; it was identified that those viewed had been reviewed and updated in accordance with timescales.

The agency's systems for auditing and reviewing information with the aim of promoting safety and improving the quality of life for the people supported were reviewed. Records viewed and discussions with the manager indicated that the agency's governance arrangements promote the identification and management of risk; these include provision of required policies, audit of complaints, accidents, safeguarding referrals and incidents notifiable to RQIA.

The agency's complaints policy outlines the process for effectively handling complaints; discussions with the manager indicated a clear understanding of the actions required in the event of a complaint being received.

The agency retains a record of all complaints or compliments received. It was noted from discussions with the manager and records viewed that the agency has received no complaints since the previous inspection.

The agency has developed a carer newsletter that is provided to carers. The inspector noted some of the areas included:

- new carers
- new staff
- training
- complaints
- home files
- RQIA
- finance guidance
- advocates
- shared lives champions

Records viewed and discussions with the manager indicated that the agency has in place effective management and governance systems to monitor and improve quality.

The agency's quality annual review has been completed for 2018. The inspector has noted some of the individual comments made by carers during the annual quality review:

People supported highlighted the choices that they have over everyday decisions in their lives.

- "We get on well and I'm excited coming to their home."
- "My carer enjoys the same activities as myself . We have the same sense of humour and enjoy a laugh!!!"
- "The food is brilliant. I like my new bed. New dog called Casper ok. I love Matilda on DVD."

Feedback from the families of those who are supported by the service was also positive highlighted comments include:

- "I trust Positive Futures for picking great people for our family member. I do not have enough words to say about Positive Futures except...thank you."
- "Without the respite from Positive Futures I would not get any time to spend with my own family but in the knowledge ****is safe, loved and they understand***medical needs also which is a great relief for me."

The organisational and management structure of the agency is outlined in the agency's statement of purpose. The registered person has worked effectively with RQIA to operate and lead the organisation in maintaining compliance with regulations. There was evidence of ongoing, effective collaborative working relationships with relevant stakeholders, including other HSCT representatives."

There has been a change of management since the previous inspection. An acting manager is in place and is awaiting registration since the receipt of her application on the 28 January 2019.

The agency's statement of purpose and information handbook was noted to have been reviewed and updated in (2019).

The manager had a clear understanding of both her and the carers' roles and responsibilities.

The registered person has shown an understanding of regulatory matters and led the organisation in maintaining compliance with regulations.

On the date of inspection the RQIA certificate was noted to be displayed appropriately and was reflective of the service provided.

The inspector noted that the agency collects equality information in relation to the people supported, during the referral process. The data is used effectively and with the individual people supported involvement when an individual person centred care and support plan is developed. The manager was able to discuss the ways in which the agency's development and training enables them to engage with a diverse range of service users.

Discussions with the manager highlighted evidence that supports people’s equal opportunities, regardless of their abilities, their background or their lifestyle. Some of the areas of equality awareness identified during the inspection include:

- effective communication
- people supported involvement
- the matching process
- safeguarding
- advocacy
- equal care and support
- individual person centred care
- individual risk assessment
- disability awareness

The agency’s commitment to equality and individual person centred care is an area of positive practice and is to be commended.

Returned questionnaires from the people supported indicated that well led care meant:

- You are always informed about your carer
- You feel the service is good
- Your views are sought about your care and the quality of the service
- You know how to make a complaint.

Returned questionnaires from carers indicated that well led care meant:

- There is a culture of carer involvement in the running of the service.
- There is a culture of continuous quality improvement and all carers are encouraged to bring forward new ideas and innovations.
- Social workers and agency staff are approachable and open to whistleblowing or raising concerns.

Areas of good practice:

There were examples of good practice identified throughout the inspection in relation to the agency’s governance arrangements whilst focussing on best outcomes for 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

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.



The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
🐦 @RQIANews