



The Regulation and
Quality Improvement
Authority

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY
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PRIMARY INSPECTION

Inspection No: 14894
Establishment ID No: 11292
Name of Establishment: Family Matters
Date of Inspection: 19 September 2013
Inspector's Name: Mr Jim McBride

GENERAL INFORMATION

Name of agency:	Family Matters Adult Placement Agency
Address:	The Gatelodge 326 Crumlin Road Belfast BT14 7EE
Telephone Number:	02890741271
E mail Address:	liz.palmer@positive-futures.net
Registered Organisation / Registered Provider:	Ms Agnes Philomena Lunny
Registered Manager:	Mrs Elizabeth Anne Palmer
Person in Charge of the agency at the time of inspection:	Mrs Elizabeth Anne Palmer
Number of service users:	24
Date and type of previous inspection:	Primary Inspection 24 January 2013
Date and time of inspection:	Primary Inspection 19 September 2013 09:30-15:00
Name of inspector:	Jim McBride

Introduction

The Regulation and Quality Improvement Authority (RQIA) will undertake an inspection of the Agency a minimum of once in every 12 month period as set out in The Regulation and Improvement Authority (Fees and Frequency of Inspections) Regulations (Northern Ireland) 2005. The purpose of the inspection is to assess compliance with the Regulations and draft Minimum Standards for Adult Placement Agencies published by The Department of Health, Social Services and Public Safety (DHSSPS).

1.1 PURPOSE OF THE INSPECTION

The purpose of this inspection was to ensure that the service is compliant with relevant regulations, draft minimum standards and other good practice indicators and to consider whether the service provided to service users was in accordance with their assessed needs and preferences. This was achieved through a process of analysis and evaluation of available evidence.

RQIA not only seeks to ensure that compliance with regulations and standards is met but also aims to use inspection to support providers in improving the quality of services. For this reason, inspection involves in-depth examination of an identified number of aspects of service provision.

The aims of the inspection were to examine the policies, procedures, practices and monitoring arrangements for the provision of adult placement agencies, and to determine the provider's compliance with the following:

- Adult Placement Agencies Regulations (Northern Ireland) 2007
- The Department of Health, Social Services and Public Safety's DHSSPS Draft Adult Placement Agencies Minimum Standards (2008)
The Health and Personal Social Services (Quality, Improvement and Regulation) (2003 Order) (Specified Agency) Order (Northern Ireland) 2007.

Other published standards which guide best practice may also be referenced during the inspection process.

1.2 METHODS/PROCESS

Committed to a culture of learning, RQIA has developed an approach which uses self-assessment, a critical tool for learning, as a method for preliminary assessment of achievement of the Minimum Standards.

The inspection process has three key parts; self-assessment, pre-inspection analysis and the visit undertaken by the inspector.

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

- Analysis of pre-inspection information
- Discussion with the registered manager
- Examination of records
- Consultation with stakeholders

- File audit
- Evaluation and feedback

Any other information received by RQIA about this registered provider and its service delivery has also been considered by the inspector in preparing for this inspection.

CONSULTATION PROCESS

During the course of the inspection, the inspector spoke to the following:

Service users	0
Staff	4
Carer Visits	2
Carers interviewed during inspection day	0
Other Professionals	0

Questionnaires were provided, prior to the inspection, to carers to find out their views regarding the service. Matters raised from the questionnaires were addressed by the inspector in the course of this inspection.

Issued To	Number issued	Number returned
Carers	25	4

1.3 INSPECTION FOCUS

The inspection sought to assess progress with the issues raised during and since the previous inspection and to establish the level of compliance achieved with respect to the following quality themes:

The following four quality themes were assessed at this inspection:

- **Theme 1: Management and staffing arrangements**
- **Theme 2: Support arrangements**
- **Theme 3: Making choices**
- **Theme 4: Expressing views**

Review of action plans/progress to address outcomes from the previous inspection

The agency has completed the requirement/ recommendation issued during the last inspection and this has been assessed as fully met.

Guidance - Compliance statements		
Compliance statement	Definition	Resulting Action in Inspection Report
0 - Not applicable		A reason must be clearly stated in the assessment contained within the inspection report
1 - Unlikely to become compliant		A reason must be clearly stated in the assessment contained within the inspection report
2 - Not compliant	Compliance could not be demonstrated by the date of the inspection.	In most situations this will result in a requirement or recommendation being made within the inspection report
3 - Moving towards compliance	Compliance could not be demonstrated by the date of the inspection. However, the service could demonstrate a convincing plan for full compliance by the end of the inspection year.	In most situations this will result in a requirement or recommendation being made within the inspection report
4 - Substantially Compliant	Arrangements for compliance were demonstrated during the inspection. However, appropriate systems for regular monitoring, review and revision are not yet in place.	In most situations this will result in a recommendation, or in some circumstances a requirement, being made within the Inspection Report
5 - Compliant	Arrangements for compliance were demonstrated during the inspection. There are appropriate systems in place for regular monitoring, review and any necessary revisions to be undertaken.	In most situations this will result in an area of good practice being identified and being made within the inspection report.

PROFILE OF SERVICE

Family Matters Adult Placement Service aims to;

- enhance the quality of life for both the person supported and their families / carers by providing periods of home based care with a placement provider;
- offer positive experiences to the adults who use the service; and
- enable adults with a learning disability to remain, for as long as possible, in their community, thus reducing dependence on institutional respite services.

The agency has currently placed 24 adults with 21 placement providers.

SUMMARY OF INSPECTION

The inspection took place on the 19 September 2013 the inspector had the opportunity to speak with two adult placement carers; their comments have been added to this report.

The inspector spoke with four of the agency staff during the inspection and has added their comments to the report.

The comments during inspection and on questionnaires received prior to inspection would indicate clear satisfaction levels with the service.

Training records show clear evidence that carers have been provided with the skills necessary to provide support and person centred care to individual people supported on placement. Both carers and staff were able to describe to the inspector their involvement in the service and how they are consulted about individual needs i.e. Annual review, monitoring visits and the annual quality audit.

Adult placement Carers comments

“Good support for the transition to positive futures. The staff were great and very supportive and helpful”

“The training is good and I enjoy meeting the other carers. My husband and I are very happy with the service and can’t thank the staff enough”

“**** is part of our family and he comes first”

“The social worker is excellent”

“The staff are very approachable”

“Training is very thorough”

“I have no problems with the scheme, it’s very supportive and nothing is too much trouble for all the staff”

Adult placement Staff comments:

“Training is effective and practical”

“Supervision is good it’s one to one and you’re free to discuss anything with you manager”

“Training is flexible and positive futures react to requests for relevant to role training”

Detail of inspection process

The following four themes will be assessed during this inspection:

1 Management and staffing arrangements: The agency has achieved a compliance level of “Compliant” for this theme

The agency has provided supporting evidence of supervision, appraisal and staff training. The agency is staffed by a registered manager as well as two social workers both of who have dedicated time and responsibility for the day to day management of the service. Records of the above were in place and read by the inspector. The service operates in line with the requirements and draft standards as well as best practice guidelines.

2 Support arrangements: The agency has achieved a compliance level of “Compliant” for this theme

The agency demonstrated to the inspector the support arrangements in place to meet the needs of the carers and the people supported, the inspector seen evidence of the following:

- Matching process
- Carers group
- Monitoring visits announced and unannounced
- Annual review of carers
- Quality monitoring and annual monitoring review
- Training
- Person centred plans risk assessments and reviews
- Decision making agreements

The people supported personal plans are reviewed taking into account their individual views. The inspector seen evidence of individual training and information sharing sessions completed with each carer this is completed on an annual basis and any further specific training needs are addressed as required.

Comments received from individual carers

Training is useful”

“I appreciate ***** support”

“We are happy with the service we get”

“***** is nice and the training we get is wonderful”

Theme 3 Making choices: The agency has achieved a compliance level of “Compliant” for this theme.

The inspector saw supporting evidence of individual choice and decision making by the people supported in relation to their daily needs and requirements. The inspector read a number of reviews in place for individual people supported.

Records show that carers' and people supported attend their review; there was also evidence in place of discussion with staff prior to individual review meetings. The agency also has in place "Decision making agreements" outlining

- Important decisions in my life
- How I must be involved
- Who make the final decision

The above is completed by and with the people supported who make decisions on likes and dislikes. The decisions are made alone or in conjunction with their social worker. Discussion with the manager describing current practice shows clear evidence of how the people supported express their views enabling carers to meet individual needs expressed.

4 Expressing views: The agency has achieved a compliance level of "Compliant" for this theme

People Supported have a number of ways of being encouraged to share their views about the service. The inspector saw evidence of a number of options available to them:

- Annual review (individual)
- Complaints procedure
- AP carers
- AP Staff
- Quality monitoring
- Annual quality audit (ACE)
- Decision making agreements

The manager was able to demonstrate to the inspector the inclusion of the people supported attending their review.

People supported comments:

"I always decide where I want to go"

"If there is something I want to do or to go to I would ask*****"

"I pick what I want to wear"

"We go shopping together but I pick and I pay"

"I choose what I eat"

Additional matters examined

Training completed for carers:

POCVA 15 January 2013

Medication 21 February 2013

Managing service users money 21 January 2012

Restrictive Practice 15 January 2013

Positive behaviour workshop 12 January 2013

Human rights and guide 5 December 2012

Family matters Scheme annual quality monitoring report

The annual monitoring report was in place completed April 2013 on behalf of the registered provider by the business excellence manager. The report made number recommendations that have now be completed by the agency manager. In tandem with this report the agency compile a monthly monitoring report on behalf of the registered provider. These reports verify and evidence discussions with carers people supported and referring professionals, the inspector has added some of the comments received to this report. The agency has demonstrated an on-going commitment to quality monitoring.

Comments by the people supported:

"I am happy living here"

"I enjoy being with * & *"

AP carers' comments:

"Training is useful"

"I appreciate ***** support"

"I am happy to have made it through the approval panel"

"We are happy with the service we get"

"***** is nice and the training we get is wonderful" .

Staff comments:

"The job has changed greatly"

"The service provided is good".

Comments from other professionals:

"Very happy with the service (Care manager)

"It is a service I value" (care manager)

The agency has also completed its annual consultation survey seeking views from stakeholders on the quality of the service provided. Some of the comments received were as follows:

People supported

"I like going to my family I'm never unhappy"

"Taking to family"

"I always decide where I want to go"

"If there is something I want to do or to go to I would ask*****"

"I pick what I want to wear"

"We go shopping together but I pick and I pay"

"I choose what I eat"

"I eat what I want but mum encourages me to eat healthy food"

"I would like to live in my own flat sometime"

"I love it it's fun living here"

"I like having my family"

"I love going, I feel like part of the family".

RQIA returned questionnaires.

Four carers returned questionnaire to the RQIA prior to the annual inspection.

The four questionnaires returned stated agreement with the following:

- The current care/support agreement in place meets the individual needs of the service user
- Choices are available to individuals as they are involved about care/support decisions.
- Annual placement reviews have taken place
- Regular monitoring visits have taken place
- The persons supported have taken part in the annual review
- Service users are fully familiar with the complaints procedure

Individual comments received:

"***** is very much supported in making her own choices in relation to all aspects of her care"

"I have found every member of staff to be extremely helpful, supportive and responsive to any needs i have"

"The staff are very committed to both the service user and carer"

"The person I support is always present and involved in all decisions and is supported to make those decisions"

"The staff at the agency are available to offer practical advice, help and support needed and they actively listen".

STATUTORY REQUIREMENTS

This section outlines the actions which must be taken so that the Registered Person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and The Domiciliary Care Agencies Regulations (NI) 2007

No.	Minimum Standard Ref.	Requirement	Action Taken - As Confirmed During This Inspection	Number of Times Stated	Inspector's Validation Of Compliance
1	Regulation 20 (1) A, C, D, E, F.	The agency must ensure that the assessments of restrictive practice in place have been completed, as a direct result of a multi-disciplinary review of individual need and assessment and are signed off as agreed by the commissioner of the service. (Trust staff)	Once	A number of statements from the trust are in place attached to the assessments. These were read by the inspector.	Fully Met

RECOMMENDATIONS

These recommendations are based on The Domiciliary Care Agencies Minimum Standards (2008), research or recognised sources. They promote current good practice and if adopted by the Registered Person may enhance service, quality and delivery.

No.	Minimum Standard Ref.	Recommendations	Action Taken - As Confirmed During This Inspection	Number of Times Stated	Inspector's Validation Of Compliance
1	Standards 12,13,15	It is recommended that the agency formulate a policy that ensures the continued fitness of Adult placement carers in line with legislation Completed 22/2/13 JM CB RQIA.	Once	The agency has in place a policy that ensures the continued fitness of the Adult Placement carers.	Fully Met

<p>Theme 1 Management and staffing arrangements: The service user experiences good quality support and care in the adult placement service, this is provided by management and staff whose professional training and expertise enables the agency to meet their needs. The service operates in line with the requirements and draft standards as well as best practice guidelines.</p>	
<p>Criterion Assessed: - The AP staff use methods that reflect up to date knowledge and best practice guidance, and that managers continuously strive to improve practice.</p>	<p>COMPLIANCE LEVEL</p>
<p>Provider's Self-Assessment: The staff of the Families Matter Adult Placement Service are professional Social Workers. These Adult Placement Social Workers use methods that reflect up to date knowledge and best practice guidance. Managers continuously strive to improve the practice of the Social Workers.</p> <p>The Adult Placement Social Workers are trained in good practice such as Human Rights, Person Centred Thinking Tools, Family Therapy theory and Risk Assessment in the development of Adult Placement Provider Assessments. Team Meetings and person centred supervision is used to regularly address practice issues.</p> <p>All staff have their performance appraised, as part of our Performance Management Policy. All staff are registered with the NISCC and adhere to the requirements of a NISCC Registered Social Worker. Our managers continually strive to improve staff performance and practice. Our Adult Placement Social Workers have annual objectives to manage performance and support their professional development.</p> <p>We consult with expert external organisations, such as Studio III and BILD to ensure our Social Workers have the most up to date knowledge and best practice guidance.</p> <p>We are members of Shared Lives Plus, a National support organisation for Adult Placement Services across the UK, to inform best practice within the Service. Our Operations Manager is the Regional Chair. The staff team belong to an active online forum for Shared Lives workers to share and discuss best practice. The above is reflected in the Statement of Purpose for the Service.</p>	<p>Compliant</p>

<p>Inspection Findings:</p>	
<p>The inspector evidenced the above criterion by verifying records of supervision and training in place for staff. Review and monitoring records were also in place for all carers. Discussions with carers' and staff shows supporting evidence of good practice and effective communication with both.</p>	<p>Compliant</p>
<p>Criterion Assessed: - AP carers are assessed and approved by the agency.</p>	<p>COMPLIANCE LEVEL</p>
<p>Provider's Self-Assessment:</p>	
<p>All Placement Providers are assessed according to the Adult Placement Standards and Regulations. The procedure is driven by a detailed Assessment Checklist (as per Standard 1.3).</p> <p>The Placement Providers' Social Workers carry out a series of visits to assess the suitability of the individuals for the role of Adult Placement Provider.</p> <p>The completed assessment report, including all references and checks, is presented to the Adult Placement Approval Panel for approval. On approval, the Placement Provider will be introduced to the Service.</p> <p>In addition, there is a comprehensive Post Approval induction process, which enables the newly approved Placement Provider to understand their responsibilities within the Adult Placement Service and the relevant Policies, Procedures and processes.</p>	<p>Compliant</p>
<p>Inspection Findings:</p>	
<p>The agency has in place comprehensive records of approval and assessments in place for all carers. A number of approval assessments were read by the inspector.</p>	<p>Compliant</p>

Criterion Assessed: - AP carers are supported at all times by skilled and experienced professional workers, who have allocated time to support carers	COMPLIANCE LEVEL
<p>Provider's Self Assessment:</p> <p>Placement Providers are supported by skilled and experienced Social Workers. The Adult Placement Social Workers are registered with the NISCC and meet the requirements of registration.</p> <p>Each Adult Placement Provider is allocated to a named Adult Placement Social Worker and meets them on a regular basis to ensure that they are able to fulfil the responsibilities of their role. A “Placement Overview” document is in place which details the support provided for each placement in line with Standards and Regulations. This ensures that Adult Placement Social Workers are given time to support Placement Providers, through telephone calls, support meetings, training events and monitoring visits. A record of this support is detailed in Placement Provider Monitoring Records and contact sheets.</p> <p>There is an Annual Consultation Exercise carried out within Positive Futures which evaluates the satisfaction of Adult Placement Providers.</p> <p>In Person Centred Supervision sessions, individual placements are discussed and the Registered Manager ensures the Adult Placement Social Workers are supported and enabled to provide adequate support to Placement Providers.</p>	<p>Compliant</p>
<p>Inspection Findings:</p> <p>Records in place show clear evidence of staff support to carers. The manager stated all staff members have dedicated allocated time to complete home visits, training, monitoring and review. Records in place verify this as well as discussions with carers and staff during the inspection.</p>	<p>Compliant</p>

PROVIDER'S OVERALL ASSESSMENT OF THE AGENCY'S COMPLIANCE LEVEL AGAINST THE STANDARD ASSESSED	COMPLIANCE LEVEL
	Compliant

INSPECTOR'S OVERALL ASSESSMENT OF THE AGENCY'S COMPLIANCE LEVEL AGAINST THE STANDARD ASSESSED	COMPLIANCE LEVEL
	Compliant

<p>Theme 2 Support arrangements Service users must be confident that the service will meet their individual needs and preferences. The AP staff will show how they develop personal plans that detail individual needs and details how the needs can be met.</p>	
<p>Criterion Assessed: - Personal plans will include:</p> <ul style="list-style-type: none"> - Personal preferences - Care /support needs - Risk assessments - Communication needs - Arrangements in place for medication. - Any measures of restraint or other restrictive practices in place that AP carers have to use for the service users safety or for the safety of others. 	<p>COMPLIANCE LEVEL</p>
<p>Provider's Self-Assessment:</p>	
<p>Personal plans are in place in the form of Person Centred (PC) Plans for the adults placed and these contain relevant information about their care, support and communication needs and their individual choices and preferences.</p> <p>In addition to the PC Plan, there are medication records which detail the medication prescribed, arrangements for managing medication and the appropriate method of recording.</p> <p>Risk Assessments are in place for the adults placed, which consider any risks or hazards, the likelihood of these occurring, their potential impact with a risk rating and the action to be taken to reduce the risk.</p> <p>Restrictive Practice Assessments are in place which detail any restrictions and the rationale for the restriction. Where there is a restriction in place, for the individual or others, it is agreed with the individual and other relevant people. All restrictive practices are reviewed and actions agreed to reduce any restriction as far as possible.</p>	<p>Compliant</p>

Inspection Findings:	
<p>The inspector read records of people supported assessment of needs; these records show evidence of care/support needs and personal preferences that are person centred. Carers interviewed stated that they are involved in the assessment and review process.</p>	Compliant
<p>Criterion Assessed: Any measures of restraint or other restrictive practices in place that AP carers have to use for the service users safety or for the safety of others.</p>	COMPLIANCE LEVEL
Provider's Self-Assessment:	
<p>All restrictive practices are discussed and agreed with the adult placed where possible. Restrictions are detailed in the Restrictive Practice Assessment.</p> <p>Where the adult placed lacks capacity and restrictive interventions are deemed necessary, in very particular situations, the person we support / family representative and relevant HSC Trust representative are consulted with to ensure best interests decisions are made. A record is retained in meeting minutes and Restrictive Practice Assessments are signed by relevant parties.</p> <p>Restrictive Practice Assessments are signed off by the person supported, and/or their representative, the Adult Placement Social Worker, Trust representative, the Registered Manager of the Service and the Managing Director of Positive Futures. In some situations, Trust representatives have been instructed to only sign off the Restrictive Practice Assessments at annual review meetings. We are in discussion with the BHSC Trust to address this issue at a Senior Management level.</p> <p>All restrictive practices are discussed at the person's Review which considers the nature of the restrictions and whether they can be reduced or removed. Discussion and decisions with the adult placed, the Placement Provider and other professionals around desired outcomes and restrictive practices are recorded and used to inform the development of the PC Plan.</p>	Compliant

Inspection Findings:	
Restrictive practice measures are in place for some current people supported. The agency has in place policies and procedures that reflect this as well as good practice guides and completed risk assessments. The agency has provided training in this area for all carers and staff, records in place verifies this training.	Compliant
Criterion Assessed: - Service users must be assured that AP carers will not use restraint unless it is in accordance with HSC Trust Care Plan and DHSSPS guidance on physical restraint. Records are maintained which detail each occasion physical restraint is used and the registered provider is informed of each occasion.	COMPLIANCE LEVEL
Provider's Self-Assessment:	
<p>Positive Futures' Positive Behaviour Management Policy states clearly that restraint should only be used as a last resort. Adult Placement Social Workers have Restrictive Practice Training and are trained in “low arousal techniques” to reduce the need for such action. This training includes staff responsibilities in relation to the promotion and protection of human rights and instructs them on the parameters of any physical intervention. We do not currently support any adults who require physical restraint by a person.</p> <p>Our Placement Providers have all attended a Positive Behaviour Management awareness workshop which explains the importance of de-escalation to manage challenging behaviour and addresses the promotion and protection of human rights. This is reinforced within the guidance document given to Placement Providers and in the Handbook given to the people we support and their families/representative.</p> <p>All Placement Providers have a signed copy of the Positive Behaviour Management Policy in their Home File. The likelihood of any behaviour that challenges is considered with any new referral. The referral process requires an assessment of the person’s presentation and Behaviour Management Guidance is then developed, specific to the individual, to ensure that the behaviour is managed through de-escalation and low-arousal. Reporting procedures to record any physical intervention are in place within the Organisation, although not currently required by anyone supported by the Service.</p>	Compliant
Inspection Findings:	
Restrictive practice assessments in place within the agency show clear statements from the local trust. Carers have been issued with the good practice guidelines by the agency and training is also in place. The inspector read a number of assessments in place for the people supported.	Compliant

Criterion Assessed: - Service users personal plans are reviewed taking into account individual views of the service user's carers and family.	COMPLIANCE LEVEL
<p>Provider's Self-Assessment:</p> <p>Adults placed are encouraged to be involved in the development of their PC Plan and in the Review of the Placement.</p> <p>At the Review of the Placement, the person supported is consulted through an accessible questionnaire and their views and wishes are considered, as are those of their family/representative.</p> <p>Personal Outcomes are assessed through the Person Centred Planning process, this information is gathered directly from the person we support or their family/representative during monitoring visits.</p> <p>The Adult Placement Social Worker makes a specific monitoring visit to the placement when the person supported is present and consults with the person supported about their wishes.</p> <p>These visits and conversations also inform the development of the PC Plan.</p>	<p>Compliant</p>
<p>Inspection Findings:</p> <p>The inspector read a number of reviews in place for individual people supported, records show that carers and the people supported attend their review, there was also evidence in place of discussion with staff prior to individual review meetings. The agency also have in place "Decision making agreements" outlining:</p> <ul style="list-style-type: none"> • Important decisions in my life • How I must be involved • Who make the final decision <p>The above is completed by and with the people supported who make decisions on likes, dislikes and the decisions are made alone or in conjunction with their social worker.</p>	<p>Compliant</p>

Criterion Assessed: The agency can show on-going learning for AP carers which ensures their further development in order to meet individual needs of the service users.	COMPLIANCE LEVEL
Provider's Self-Assessment: Following approval, Placement Providers are inducted through a Post Approval Induction Process which introduces them to the role of a Placement Provider. The induction covers training and understanding of their and others' responsibilities in relation to relevant Positive Futures' policies and procedures. This is evidenced in their Home File which has a record of all Training and Policy information. This process is communicated to the adults placed during visits, and is part of their personal Handbook. There are a range of training courses provided to Placement Providers, both mandatory training and training specific to the needs of the individual placed, to support the Placement Provider in fulfilling their role and responsibilities. Placement Providers are also provided with up to date information which reflects best practice and guidance. This is provided to individual Placement Providers at times appropriate to their needs or in group settings. Further opportunities for training, development and understanding are available via the Support Group. In addition, the Service has been instrumental in the launch of Shared Lives Plus within Northern Ireland. Shared Lives is the Organisation which supports all Adult Placement agencies in the UK and leads on best practice and support for Placement Providers. Membership of Shared Lives provides Placement Providers with additional opportunities for learning through information, online forums and conferences.	Compliant
Inspection Findings: The following g individual training has been completed by carers: POCVA 15 January 2013 Medication 21 February 2013 Managing service users money 21 January 2012 Restrictive Practice 15 January 2013 Positive behaviour workshop 12 January 2013 Human rights and guide December 2012	Compliant

PROVIDER'S OVERALL ASSESSMENT OF THE AGENCY'S COMPLIANCE LEVEL AGAINST THE STANDARD ASSESSED	COMPLIANCE LEVEL
	Compliant

INSPECTOR'S OVERALL ASSESSMENT OF THE AGENCY'S COMPLIANCE LEVEL AGAINST THE STANDARD ASSESSED	COMPLIANCE LEVEL
	Compliant

<p>Theme 3 Making choices: Service users can make choices in all areas of their personal and social lives.</p>	
<p>Criterion Assessed: Service users have the right to make their own decisions.</p>	<p>COMPLIANCE LEVEL</p>
<p>Provider's Self-Assessment:</p>	
<p>Adults placed with Placement Providers have the right to make their own decisions about their personal and social lives. We practice the principle of assuming that all the adults placed have the capacity to participate in decision making and fully involve them in the process with their family / representatives. PC Plans detail individual choices and preferences which inform the support provided by Placement Providers. Adults placed are encouraged to make their own decisions and are involved in the development of their PC Plan and the placement Review.</p> <p>The adults we support and/or their representative are invited to contribute their views, choices and preferences as part of our review process each year. This is documented and used in the development of their PC Plan. Adults supported in our placements are also consulted through the annual review contribution form entitled "How Happy are you?" There are records in place detailing how individuals are making their own choices and planning for their future.</p>	<p>Compliant</p>
<p>Inspection Findings:</p>	
<p>The inspector read a number of reviews in place for individual people supported records show that carers and people supported attend the review, there was also evidence in place of discussion with staff prior to individual review meetings. The agency also have in place "Decision making agreements" outlining:</p> <ul style="list-style-type: none"> • Important decisions in my life • How I must be involved • Who make the final decision <p>The above are completed by and with the people supported who make decisions on likes, dislikes and the decisions are made alone or in conjunction/jointly with their social worker.</p>	<p>Compliant</p>

<p>Criterion Assessed: Service users have the freedom to carry out their choices.</p>	<p>COMPLIANCE LEVEL</p>
<p>Provider's Self-Assessment:</p> <p>Decision Making Agreements are available to help those adults placed who are making key decisions in their lives. These ensure that the adults placed are involved as much as possible in important decisions about their lives.</p> <p>On a day to day basis, the Service works to ensure that adults placed have the freedom to carry out their choices and reduce any restrictions placed on the person's life as far as is possible and safe to do so. Regular review ensures that any restrictions on the person's choices and preferences are only ever in place if they continue to be absolutely necessary.</p> <p>Adults placed are offered the opportunity to make choices, such as about where they live, their future, their jobs, their relationships and the support they receive.</p> <p>Discussion and decisions with the adult placed the Placement Provider and other professionals around restrictive practices and decision making agreements are used to inform and update the PC Plan of the adult placed.</p>	<p>Compliant</p>
<p>Inspection Findings:</p> <p>The inspector read a number of reviews in place for individual people supported records show that carers and the people supported attend their review, there was also evidence in place of discussion with AP staff prior to individual review meetings. The agency also have in place "Decision making agreements" outlining:</p> <ul style="list-style-type: none"> • Important decisions in my life • How I must be involved • Who make the final decision 	<p>Compliant</p>

<p>Criterion Assessed: AP agency has in place procedures for involving service users in all decisions that affect them including individual monitoring and review of placements.</p>	<p>COMPLIANCE LEVEL</p>
<p>Provider's Self-Assessment:</p> <p>Discussion and decisions with the adult placed, the Placement Provider and other professionals around desired outcomes and restrictive practices are recorded and used to inform the development of the PC Plan.</p> <p>There are regular reviews of the person's PC Plan. Personal outcomes for adults placed are defined during review meetings and assessed through the person-centred planning process.</p> <p>Records are kept of review meetings with the individual, their person's family / representative and HSC Trust representative; discussions on home visits; Restrictive Practice Assessments or Risk Assessments where "best interests" decisions have been made on behalf of people who are deemed not to have capacity. Adults placed are encouraged to be involved in the development of their PC Plan and the placement review. Adults supported in our placements are consulted through the annual review contribution form entitled "How Happy are you?".</p> <p>Adults placed are invited to support groups, Shared Lives events and their views and opinions are sought and welcomed.</p> <p>Regular announced and unannounced monitoring visits are carried out by the Adult Placement Social Workers and the Operations Manager for a more objective view of the placement and the adult's PC Plan. These occur a minimum of 3 times a year for long term and twice a year for short break placements. These monitoring visits provide an opportunity to consult with the adult placed around any decisions which affect them.</p>	<p>Compliant</p>
<p>Inspection Findings:</p> <p>The people supported views are taken in to account during the annual review as well as on an on-going basis if they have any concerns. Evidence of monitoring and quality reviews were in place during this inspection. The inspector has commented on views throughout this report. The person supported/carer has the opportunity to contact the Adult Placement Social Worker as well as discussion prior to their individual review.</p>	<p>Compliant</p>

<p>Criterion Assessed: Service users have information and effective communication from the AP agency, so they can be involved in all decisions and make informed choices personally or with the support of an independent advocate.</p>	<p>COMPLIANCE LEVEL</p>
<p>Provider's Self-Assessment:</p>	
<p>The adults placed and their families / representatives each receive a copy of the Easy Read Handbook. This Handbook contains key information, including relevant Positive Futures' Policies and Procedures.</p> <p>In addition, adults placed and their families are provided with accessible information on how to make a complaint. This is included in the Information Pack each of the adults placed receives.</p> <p>Adults we support are encouraged to attend their Reviews and Support Groups where key information is shared. All adults placed receive a quarterly Newsletter from the Service.</p> <p>We discuss with the Trust any occasion where the adult placed requires the support of an independent advocate.</p>	<p>Compliant</p>
<p>Inspection Findings:</p>	
<p>The agency have arrangements in place for the use of an independent advocate if required, however communication with the people supported about care/support decisions was evident in review records as well as the service audits.</p>	<p>Compliant</p>
<p>Criterion Assessed: The agency can demonstrate a range of methods used to communicate effectively with service users, including those who require information provided in alternative formats.”</p>	<p>COMPLIANCE LEVEL</p>
<p>Provider's Self-Assessment:</p>	
<p>All the adults placed are given a copy of the Easy Read Handbook which explains the role of the Adult Placement Agency in an accessible format. Also on joining the Service, every adult receives an Information Pack about the Service and a folder in which to keep their documents and newsletters.</p> <p>We are mindful that not all adults placed will use a written format to communicate, and there is particular emphasis on face to face meetings where the Social Worker uses their skills, experience and knowledge to communicate with the adults and work with the Placement Provider using tools such as the Learning Log to gain their views.</p>	<p>Compliant</p>

<p>The Adult Placement Social Workers work with the adults placed at visits, support groups and other appointments.</p> <p>The adults placed, all contribute to their review using the review contribution form “How Happy are You?”, which is provided in an accessible format.</p>	
<p>Inspection Findings:</p>	
<p>Apart from verbal communication with service users they also have in place different formats for individual use to communicate with the people supported. The adults placed all contribute to their review using the review contribution form “How Happy are You?” which is provided in an accessible format. The inspector read a number of review notes in place during this inspection.</p>	<p>Compliant</p>

<p>PROVIDER’S OVERALL ASSESSMENT OF THE AGENCY’S COMPLIANCE LEVEL AGAINST THE STANDARD ASSESSED</p>	<p>COMPLIANCE LEVEL</p>
	<p>Compliant</p>

<p>INSPECTOR’S OVERALL ASSESSMENT OF THE AGENCY’S COMPLIANCE LEVEL AGAINST THE STANDARD ASSESSED</p>	<p>COMPLIANCE LEVEL</p>
	<p>Compliant</p>

<p>Theme 4 Expressing views: Service users are encouraged and supported to make their views known about the service:</p>	
<p>Criterion Assessed: Service users can discuss any concerns with AP staff or carer.</p>	<p>COMPLIANCE LEVEL</p>
<p>Provider's Self-Assessment:</p> <p>The people supported by the Service are encouraged to discuss any concerns they have with their Placement Provider, their Trust representative or with their Adult Placement Social worker.</p> <p>The Adult Placement Social Worker ensures that the person placed has a good relationship with their Placement Provider; they are afforded the opportunity to share concerns and anxieties with the Adult Placement Social Worker at Reviews, Monitoring visits and at the Support Group.</p> <p>Where there is any unusual behaviour of the adult placed which may reflect some anxiety or concern, the Adult Placement Social Worker will work with all concerned to try and establish what the person may be trying to communicate.</p> <p>If an adult placed wishes to discuss concerns about the placement, this is done through alerting the person's family, the Trust representative or channels such as the "How Happy are You?" review contribution, Learning Log or direct conversation.</p> <p>All adults placed have a copy of the Easy to Read Complaints Guide in their Information Pack. Where adults placed require the services of an independent advocate, this is arranged with the Trust Social Worker.</p> <p>The Service Manager and the Operations Manager carry out monitoring visits and take the opportunity to speak in private to the adults placed.</p>	<p>Compliant</p>

Inspection Findings:	
<p>The people supported have the opportunity to discuss with the staff any concerns they may have. The people supported are involved in their annual review and can comment on the service during this. During discussion with two carers they stated they can discuss and concerns they have with the managers of the scheme. All adults placed have a copy of the easy read complaints guide in their Information Pack. Where adults placed require the services of an independent advocate, this is arranged with their Social Worker.</p> <p>The Service Manager and the social work staff carry out monitoring visits and take the opportunity to speak in private to the adults placed.</p>	Compliant
<p>Criterion Assessed:</p> <ul style="list-style-type: none"> -- Service users are aware of the complaints procedure - Service users must be confident that the agency deals with complaints and feedback decisions made timely 	COMPLIANCE LEVEL
Provider's Self-Assessment:	
<p>Our Complaints Policy is provided to all Placement Providers for the Home File, and a reminder is given at the Support group meetings.</p> <p>Adults placed are given a copy of the Easy to Read Complaints Leaflet in their Information Pack. The questions in the "How Happy are You?" consultation enable the adults to consider issues they may wish to complain about.</p> <p>Complaints and compliments are addressed, recorded and feedback is provided in line with our Policy. These are gathered at visits, training evaluations or formally by letter and documented, with the record held at the office. A quarterly report is presented by the Registered Person to the Senior Leadership Team and the Board of Trustees. Information on complaints is provided to RQIA for all inspections. Learning from complaints and compliments is progressed into an action plan to improve the quality of the Service.</p>	Compliant

Inspection Findings:	
The carers interviewed were aware of the complaints procedure and stated they have no complaints. Adults placed are given a copy of the easy read complaints leaflet in their Information Pack. The questions in the “How Happy are You?” consultation enable the adults to consider issues they may wish to complain about.	Compliant
Criterion Assessed: Service users and AP carers are informed of the RQIA, inspections and the reports are available	COMPLIANCE LEVEL
Provider's Self-Assessment:	
A quarterly newsletter which details information and support is provided to AP Carers and adults placed. This includes information on RQIA inspections and reports and how these can be accessed. Inspection reports are made available on the Positive Futures website. There are also regular support groups which enables such information to be shared with Placement Providers.	Compliant
Inspection Findings:	
The inspector read a copy of the latest news letter that states the RQIA visits date; this was also verified by the carers’ interviewed prior to inspection. The inspection report is available during monitoring visits as well as at the carers group.	Compliant
Criterion Assessed: Service users are encouraged to complete Annual Quality Review In a format suitable to their needs	COMPLIANCE LEVEL
Provider's Self-Assessment:	
Adults placed are encouraged to engage in the annual quality review. Information is gathered through an Annual Consultation Exercise (ACE) and the “How Happy are You?” survey. These explore the adult's perception of the placement as well as that of family / representatives and the placing HSC Trust representative. Actions are agreed to address any recommendations.	Compliant
Inspection Findings:	
The inspector read the report in place and has included some of the comments into this report. The agency do have in place a format for the collection if information and views on the service, suitable for the needs of the people supported.	Compliant

<p>Criterion Assessed: Service users and APA carers are interviewed as part of the Annual monitoring by the registered provider.</p>	COMPLIANCE LEVEL
<p>Provider's Self-Assessment:</p>	
<p>A Placement Provider and, where possible, the adult placed are interviewed by the Operations Manager for the Service each month. In addition, an annual monitoring visit is completed by the Business Excellence Manager on behalf of the Registered Person.</p>	Compliant
<p>Inspection Findings:</p>	
<p>The inspector read the reports in place and has included some of the comments into this report. The report shows clear evidence of interviews with the carers and the people supported.</p>	Compliant
<p>Criterion Assessed: The matching process is halted if either party shares concerns about continuing. All issues raised are fully explored by the agency, records kept of the action taken and the process only continues when both parties explicitly agree to carry on.</p>	COMPLIANCE LEVEL
<p>Provider's Self-Assessment:</p>	
<p>Where a match is being proposed, the Referral and Matching Policy is followed.</p> <p>The prospective Placement Providers express their preferences during the assessment process and are approved at the Approval Panel. These preferences are considered when a match is being managed, details of the referrals are reviewed carefully alongside any issues raised by the prospective Placement Provider.</p> <p>The details of the prospective adult to be placed are gathered from the Referral Form and this information is shared with the prospective Placement Provider. When the prospective Placement Provider confirms their interest in proceeding, the match will be considered with the adult to be placed, who also has the opportunity to learn about the Placement Provider, their family and circumstances. Where either party has concerns, the matching process is halted. These issues are discussed in depth with the manager at Person Centred Supervision and Team Meetings. Records of actions in respect of halting the matching process are maintained. To date, no matching process has continued once halted, however processes are in place should both parties agree to continue.</p>	Compliant

Inspection Findings:	
The agency's policy in place ensures compliance with the above criterion. The manager discussed with the inspector the process and how the service user will be involved.	Compliant
Criterion Assessed:	COMPLIANCE LEVEL
The agency monitors and reviews the provision of personal care ensuring that it is compliant with the draft standards and the regulations	
Provider's Self-Assessment:	
Where the support being provided for an individual requires specific aspects of personal care, this is detailed in the Placement Agreement and is compliant with the Draft Standards and Regulations. Where relevant, PC Plans reference supporting the individual with intimate and personal care. Monitoring visits address any changes in the needs of the adult placed, which includes personal care All Placement Providers are required to attend Infection Control Training and a yearly update of this thereafter. This training covers all aspects of household hygiene and ensures the H&S Policy is being followed. Placement Providers are offered the opportunity to consider issues of infection control specific to their situation.	Compliant
Inspection Findings:	
The inspector read a number of annual reviews and monitoring visits in place. These records show compliance with regulations as well as care/support needs being discussed in line with the plan of care.	Compliant

PROVIDER'S OVERALL ASSESSMENT OF THE AGENCY'S COMPLIANCE LEVEL AGAINST THE STANDARD ASSESSED	COMPLIANCE LEVEL
	Compliant

INSPECTOR'S OVERALL ASSESSMENT OF THE AGENCY'S COMPLIANCE LEVEL AGAINST THE STANDARD ASSESSED	COMPLIANCE LEVEL
	Compliant

QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement Plan appended to this report were discussed with Mrs Liz Palmer (Registered Manager) as part of the inspection process.

The timescales for completion commence from the date of inspection.

The registered provider / manager is required to record comments on the Quality Improvement Plan.

Where the inspection resulted in no recommendations or requirements being made the provider / manager is asked to sign the appropriate page confirming they are assured about the factual accuracy of the content of the report.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

Enquiries relating to this report should be addressed to:

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



No requirements or recommendations resulted from the **primary announced** inspection of **Family Matters APA** which was undertaken on **19 September 2013** and I agree with the content of the report.

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

NAME OF REGISTERED MANAGER COMPLETING	Liz Palmer
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING	Agnes Lunny

Approved by:	Date
<i>Jim Mc bride</i>	30/10/13