



Quality Audit Review

Ford Road

March 2008

The Quality Audit Review of Ford Road took place between the 10th and 27th March 2008. This was the first review using the recently developed Hampshire Autistic Society Quality Audit Tool. The review had two purposes, firstly to review the service provided to the individuals where Ford Road is their home and secondly, to be a pilot for the audit tool process itself.

The Review Team:

The review team consisted of the following people:

- Paul Kniveton, Senior Manager (Audit Team Leader)
- Sam Cousins, PCP Coordinator
- Tim Harpham, Parent Governor, Hope Lodge School
- Maria Nutland, Adult Services Unit Manager
- Lucie Burnage, Behaviour Support Coordinator

A service user, outside of Ford Road had been invited to participate but had elected to withdraw from the team prior to the audit commencing.

Consent:

Prior to the review-taking place, Paul Kniveton visited those living at Ford Road and the process was explained to them. With the support of the Ford Road Unit and Deputy Manager, consent was gained from each individual for the review to take place.

Ford Road:

Ford Road is a home for up to 5 young adults with autism and associated learning disabilities and was opened in 1992. It is situated in a quiet residential area in Gosport and is close to the local shops and amenities.

Currently there are 5 individuals residing at Ford Road who moved in when the home was first opened.

The funded staffing levels for Ford Road are 1 staff member to 2.5 service users. Currently 3 individuals receive the following number of additional hours:

- One individual receives 8 hours per week
- One individual receives 3 hours per week
- One individual receives 2 hours per week

Staffing on shift are based on the funded ratio and therefore there is a minimum requirement of two staff per shift.

The shift pattern is as follows:

Monday to Friday (except Tuesday):

- 07:00 – 09.30
- 15:30 – 22:00 (14:30 – 22:00 on a Wednesday)

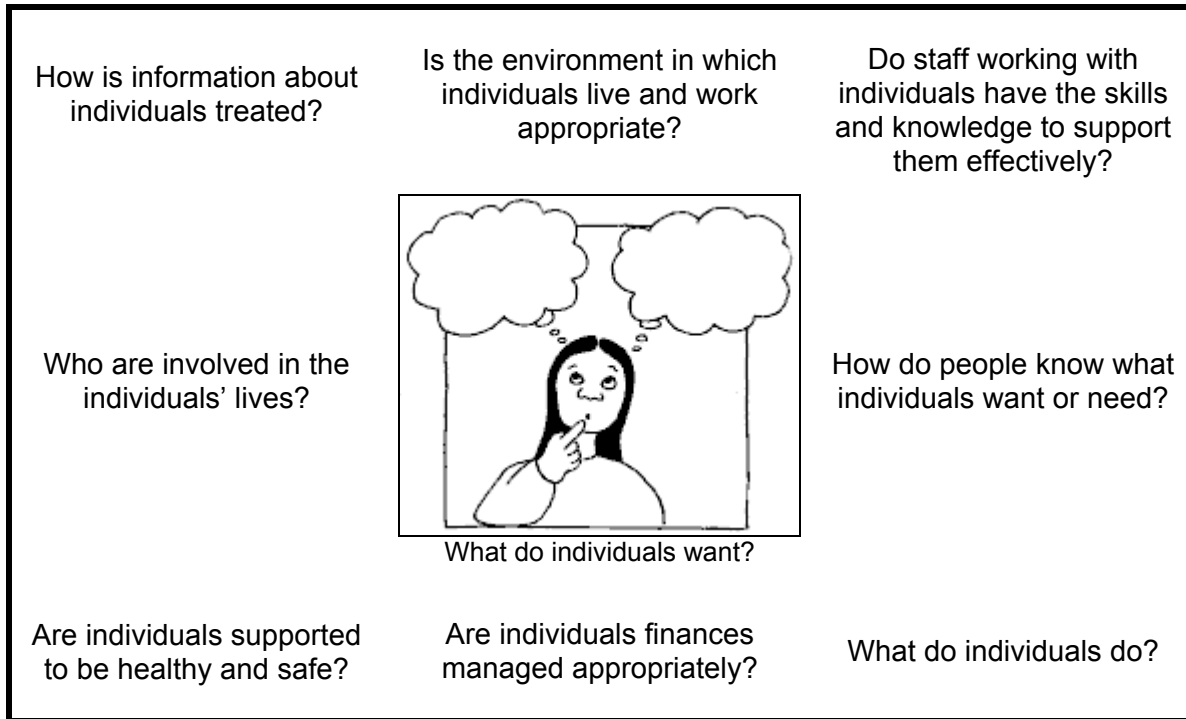
Saturday, Sunday and Tuesday:

- 07:00 – 17:00
- 17:00 – 22:00

There is a waking night support worker every night from 21:30 – 07:15

Audit Process:

During the review, the team members looked at the following eight areas:



The information was gathered in a variety of ways by:

- Spending time visiting the home and observing what is happening.
- Speaking to individuals who live in the home.
- Speaking to staff that work in the home.
- Speaking to family and friends of those who use the service.
- Speaking to other professionals who are involved in supporting the staff who work in the home.
- Looking at the records held at the home.
- Spending time with the individuals.
- Speaking to other departments, for example:
 - Human Resources
 - Finance
 - Outreach
- Looking at policies and procedures.
- Joining in with some activities.

Each member of the team looked at specific areas relevant to their knowledge and skills but with a brief to record against other areas where they found relevant information. All members of the team met together, immediately post the review period to discuss and reflect on the information they had found. The findings are based upon the consensus of information from this meeting of the team.

Quality Assurance Audit Tool

Who are the people who are involved in the individual's life?

Evidence to support the findings of this was collected by the audit team from individual discussion with staff team members and review of paperwork. This evidence indicated that the people involved in individuals lives were predominately professionals and other service users, although families visit regularly and this is supported and encouraged.

What is working well?

- Regular contact with family via phone and visits.
- Each service user has a key worker and they are all aware of who this is and their key workers role in their life. However, staff reported that the individuals are not involved in making a decision about who they would like to be their keyworker.
- All individuals are supported to attend an evening club (Wednesday Club) as much as possible, however this is not always available and staff reported that there is no alternative.
- There is evidence of an activity file in place and staff reported that day trips and visits out occur.
- All individuals seem to be content with the way their days run, staff reported that all but one individual attends Day Service 4 days a week, with the other individual attending 5. Staff reported that this individual attends for all 5 days as they do not like the activity day (cross unit) that is held at the home on a Tuesday.

What needs to be different for the individuals using the service?

- It is felt that possible expansion of circle of friends may benefit service users.
- The activity day (cross unit) does not seem to be a flexible day and it was suggested that this could be arranged, however due to funded staffing levels it is recognised that this may not be possible.
- More encouragement of choice – it was suggested that this could begin with the individuals being involved in the choice of who their key worker will be.

What would it take to make the changes?

- Activity day: 1-1 funding allocated to service users could be used more effectively on this day and alternative activities could be explored with the service users and as a staff team – To have further discussions within the team meetings and make gradual attempts to move away from “known routine”, but remaining structured for those that need this. To discuss/explore visual photographic aids to structure as appropriate. Further development of support plans and positive risk assessments is needed – to discuss within team and developed as a team.
- To explore alternative activities/clubs i.e. dancing, gyms etc as a team, specific to what people like to do – to include within support plans/PCP. To look at structuring evenings to provide some quality 1-1 time for all as appropriate and rota's allow.

Quality Assurance Audit Tool

Is the environment in which individuals live and work appropriate?

Evidence to support the findings of this was collected by the audit team from individual discussion with staff team members, observation of the environment and review of paperwork. This evidence indicated that all individuals appeared happy with the home, the people they live with and those who provide the support. Staff reported that there were no memories of how it was decided where people would live and it was believed staff made the decision, there was no written evidence to suggest otherwise. From observation, one individual seemed to want to eat their pudding in the lounge, as this is where they walked. However, the supporting staff member informed the individual that they needed to eat this in the dining room and it was not clear to the audit team as to why this was the case. Whilst the audit process was conducted, the team witnessed individual's laundry was washed together and folded on the worktop in the kitchen for any one to view.

What is working well?

- The home is clean, comfortable and well maintained.
- Records showed good evidence of Health and Safety checks, as well as maintenance.
- Clear evidence of supporting individuals to have visitors to the home, while recognising and respecting all that live there.

What needs to be different for the individuals using the service?

- There seems to be very few personal objects around the home. There were personal portraits on the wall but it was evident that these were quite old. The staff reported that they were unsure whether this was due to individual needs or choice and the individuals did not seem unhappy with the environment.
- It was felt that there could be more encouragement of choice and personalisation within the home, an example of this was individual lunch boxes, which are currently all the same, and choice of where individuals chose to eat. As laundry involves personal items of clothing it was suggested that this could be washed separately and when folded taken to individual rooms, rather than being left out.
- One individual's bedroom was considered to be cold and it is suggested to explore an alternative thermostat – however, this needs to be explored with the individual concerned as this may be through choice. Discussion indicates that the service user doesn't like the noise of the radiator filling up.

What would it take to make the changes?

- Update portraits.
- Develop photomontages as service users want.
- During service user meetings to discuss what people want i.e. lunch boxes, personal items and action plan etc.
- To explore with service users and as a staff team how laundry is undertaken.
- To explore radiator – is there a fault?

Quality Assurance Audit Tool

What do individuals do?

Evidence to support the findings of this was collected by the audit team from individual discussion with staff team members, observation and review of paperwork. Evidence showed that formal time was predominately spent at Day Service and completing household chores on the Tuesday, which is spent in the home (Cross Unit Day).

What is working well?

- Individuals are supported to choose holidays, and it was felt that this was personal choice and individuals did not always choose to go away together. Holidays varied from weeks in England to weeks abroad.
- Good evidence of choice was demonstrated for the individual who chose not to attend the cross unit day and supported to attend the activity of their choice, Day Service.
- Good evidence of personal time being spent accessing various activities such as, Wednesday Club, drives in the people carrier to Portsdown Hill and trips to local attractions.
- Evidence of Person Centred information gathering is in place.
- There are well-established routines within the house for chores and activities. However, it was not clear how flexible these routines are and staff reported that activities are dependant upon the rota and staffing levels.

What needs to be different for the individuals using the service?

- The audit team were unable to find evidence of leisure activities within the homes, such as games, tactile toys etc. It was also observed that the stereo was broken. It was suggested that individuals be supported to purchase the activities of their choice. Discussion during feedback was that these are available either in individual's rooms and all service users are aware of where these are and supported to access as they choose. An example was given about supporting an individual to complete a jigsaw of their choice.
- Although there is good evidence of personal activities taking place for individuals, it was felt that the choice of activity / venue was limited to those described above and was suggested that alternatives be explored, evidence to demonstrate these activities could be more personalised, such as photo montage's displayed around the home.
- Staff reported that one service user "hated" her exercise bike but was encouraged to use this, it was suggested that an alternative exercise choice be explored, such as riding her bike to Day Service.
- The PCP and support planning processes need to be developed as staff reported that the documentation needs updating as not all-relevant information was included, and a suggestion was to start the circle meeting process.

What would it take to make the changes?

- Actions as outlined on page 4 & 5.
- Discussion during feedback was that the individual at times quite enjoys using the exercise bike, this could be clearer within support plans and positive risk assessments to be developed to support alternative exercise such as riding or walking to Day service.
- Investigate with service users whether they would like pictures of in door activities to support them to communicate what they would like to do.

Quality Assurance Audit Tool

Do staff working with individuals have the skills and knowledge to support them effectively?

Evidence to support the findings of this was collected by the audit team from individual discussion with staff team members, observation and review of paperwork. It was evident that the recruitment and training processes are robust, however funding levels which impact on the rota, limit the individuals choice over who supports them and the activities they are able to participate in. It is evident that the staff team support individuals to make choices however it was felt that this could be further developed.

What is working well?

- All staff go through a thorough recruitment process that includes interview, relevant checks and Induction. In addition to this staff have guidance in the form of training, supervision/appraisals, staff meetings, risk assessments and support hours.
- All staff had completed Autism Awareness training and was evident that staff respected and valued the service users.
- Staff know the individuals well and advocate on their behalf.

What needs to be different for the individuals using the service?

- It was noted that Behaviour Support Plans were in place but these needed reviewing, as it was evident that they had been cut and pasted. Some of the Proact SCIPr interventions were also out of date. It was suggested that these documents should be reviewed by the team on a monthly basis.
- It was felt that the individuals would benefit from accessing external advocacy.

What would it take to make the changes?

- Discussion with the staff team suggested that they are aware of the need to further develop and review current support plans. Staff are in the process of reviewing risk assessments and it was suggested that staff may find it easier to hand write on current documents whilst reviewing until the time is available to type.
- Discussion was held about the individual support framework and it was suggested that once complete this be introduced within Ford Road with Sharon taking the lead. It was very evident through discussion that the team know and can advocate well on behalf of individuals, however they were very honest about the need to ensure the "little steps" are documented to ensure consistency.
- Sharon will support the team to investigate the possibility of external advocacy for individuals.

Quality Assurance Audit Tool

How do people know what individuals want or need?

Evidence to support the findings of this was collected by the audit team from individual discussion with staff team members, observation and review of paperwork. It was evident that staff know the individuals well and work to meet their individual needs.

What is working well?

- Staff appear to have a good understanding of what was important to the individuals and are able to express this when questioned.
- Communication passports are available for each individual although it was felt that more importance could be placed on ensuring these are up to date and relevant.
- Choice boards were available, although staff reported that not all individuals liked to use these.

What needs to be different for the individuals using the service?

- Documentation needs to capture staff's understanding of the wants, needs, likes and dislikes of the individuals to support others coming into the service to ensure consistency and appropriate support.
- It was felt that the understanding of one individual's communication and constant questioning, could be further developed and explored and documentation completed to ensure that responses are consistent.

What would it take to make the changes?

- Staff to discuss all documentation as a team within a meeting and review/develop communication passports and support plans – individual support framework to be implemented.
- Staff to explore the use of choice boards with the service users and explore alternative communication aids to support.
- Staff to investigate whether service users will benefit and want photographic communication aids.

Quality Assurance Audit Tool

Are individuals supported to be healthy and safe?

Evidence to support the findings of this was collected by the audit team from individual discussion with staff team members, observation and review of paperwork.

What is working well?

- It was evident from observation that staff know how to support individual's everyday needs.
- Training is appropriate to the home and all staff has received medication training. Staff reported during feedback session that this training had been booked but cancelled and all staff have yet to receive.
- The home environment is clean, healthy and safe with regular checks and inspections.
- All individual's are registered with the same local GP surgery and access other medical professionals if required. Health Action plans are in place to support individuals to access medical professionals but it was suggested that more detail could be included for those staff that don't know the individual as well.

What needs to be different for the individuals using the service?

- The team were unable to find any records to reflect person centred, proactive, guidance and risk assessments. It was suggested that if the risk assessment process became more proactive it could encourage and support individuals to become more independent.

What would it take to make the changes?

- Sharon to work with staff to develop clear training plans.
- Implementation of individual support framework and seek support to ensure risk assessments are proactive.

Quality Assurance Audit Tool

Are individual's finances managed appropriately?

Evidence to support the findings of this was collected by the audit team from individual discussion with staff team members, observation and review of paperwork.

What is working well?

- Individual finances are managed through the Society with an appointee in place for each service user. The unit staff team manages the money and there is enough money available for the current level of activities.

What needs to be different for the individuals using the service?

- To explore and further encourage individuals to become more responsible for their personal finances.

What would it take to make the changes?

- To explore as a team and with service users the development of finance support plans as appropriate. Discussion focussed on specific behaviours and how small steps can be implemented and documented to support individuals to develop independence.

Quality Assurance Audit Tool

How is information about individuals treated?

Evidence to support the findings of this was collected by the audit team from individual discussion with staff team members, observation and review of paperwork.

What is working well?

- All documents are kept in the office including the individuals person centred plans, it was suggested that PCP files could be kept in the individuals rooms.
- There is a broad range of information about each individual available. These include Care Plans, Support Plans, Health Action Plans, Medical records, Individual Risk Assessments, PCP, Communication Passports and Listen to Others.

What needs to be different for the individuals using the service?

- Information about individuals would benefit from being reviewed and it was felt that individual's involvement in the completion of this could be better evidenced, for example using photo's etc. It was also felt that more emphasis needs to be placed on the importance of documentation being individualised and not cut and pasted.
- It is felt that information about individuals could be more secure by purchasing a lockable cupboard.

What would it take to make the changes?

- Sharon and the team to explore the office environment, not only to provide more space but also to ensure that all confidential documents relating to individuals can be stored confidentially.
- All documentation to be reviewed by the staff team and to involve the individuals as much as they choose.

Audit Findings:

A) The people involved in individuals' lives
What is working well? <ul style="list-style-type: none">○ Regular contact with family via phone and visits.○ Each individual has a key worker and they are all aware of who this is and their key workers role in their life.○ All individuals are supported to attend an evening club (Wednesday Club) as much as possible.○ There is evidence of an activity file in place and staff reported that day trips and visits out occur.○ All individuals seem to be content with the way their days are run.
What needs to be different for the individuals using the service? <ul style="list-style-type: none">○ Possible expansion of circle of friends may benefit service users.○ The activity day (cross unit) does not seem to be a flexible day.○ More encouragement of choice.
What could be done to make this aspect better? <ul style="list-style-type: none">○ Activity day: 1-1 funding allocated to service users used more effectively on this day.○ Alternative activities to be explored with the individuals and as a staff team.○ Discussions within the team meetings and make gradual attempts to move away from "known routine", but remaining structured for those that need this.○ To discuss/explore visual photographic aids to structure as appropriate.○ Further development of support plans and positive risk assessments is needed – to discuss within team and developed as a team.○ To explore alternative activities/clubs i.e. dancing, gyms etc as a team, specific to what people like to do – to include within support plans/PCP.○ To look at structuring evenings to provide some quality 1-1 time for all as appropriate and rota's allow.
B) The wants and needs of individuals
What is working well? <ul style="list-style-type: none">○ Staff have a good understanding of what was important to the individuals.○ Communication passports are available for each individual.○ Choice boards were available for individuals.
What needs to be different for the individuals using the service? <ul style="list-style-type: none">○ Documentation needs to capture staff's understanding of the wants, needs, likes and dislikes of the individuals to support others coming into the service to ensure consistency and appropriate support.○ Understanding of individuals communication could be further developed and explored and documentation completed to ensure that response are consistent.

What could be done to make this aspect better?

- Staff to discuss all documentation as a team within a meeting and review/develop communication passports and support plans.
- Individual support framework to be implemented.
- Staff to explore the use of choice boards with the service users and explore alternative communication aids to support.
- Staff to investigate whether service users will benefit and want photographic communication aids.

C) The way individuals spend their time**What is working well?**

- Individuals are supported to choose holidays.
- Good evidence of choice for the individual who chose not to attend the cross unit day and supported to attend the activity of their choice, Day Service.
- Good evidence of personal time being spent accessing various activities such as, Wednesday Club, drives in the people carrier to Portsdown Hill and trips to local attractions.
- Evidence of Person Centred information gathering is in place.
- There are well-established routines within the house for chores and activities.

What needs to be different for the individuals using the service?

- Choice of activity / venue seems limited.
- Staff reported that one service user "hated" her exercise bike but was encouraged to use this, it was suggested that an alternative exercise choice be explored, such as riding her bike to Day Service.
- The PCP and support planning processes needs to be developed.

What can be done to improve this aspect?

- To start the PCP circle meeting process.
- Discussion during feedback was that the individual at times quite enjoys using the exercise bike, this could be clearer within support plans and positive risk assessments to be developed to support alternative exercise such as riding or walking to Day service.
- Investigate with individuals whether they would like pictures of in door activities to support them to communicate what they would like to do.
- Develop with individuals more personalised activities and photos montages.

D) The skills and knowledge of staff working with individuals**What is working well?**

- All staff go through a thorough recruitment process that includes interview, relevant checks and Induction. In addition to this staff have guidance in the form of training, supervision/appraisals, staff meetings, risk assessments and support hours.
- All staff had completed Autism Awareness training.
- It was evident that staff respected and valued the service users.
- Staff know the individuals well and advocate on their behalf.

What needs to be different for the individuals using the service?

- Behaviour Support Plans needed reviewing, as it was evident that they had been cut and pasted.
- Some of the Proact SCIPr interventions were also out of date.
- It was felt that the individuals would benefit from accessing external advocacy.

What could be done to make this aspect better?

- Regular review of all risk assessments, behaviour support plans and support plans.
- Implementation of the Individual Support Framework.
- Investigate the possibility of external advocacy for individuals.

E) The environment in which individuals live and work**What is working well?**

- The home is clean, comfortable and well maintained.
- Records showed good evidence of Health and Safety checks, as well as maintenance.
- Clear evidence of supporting individuals to have visitors to the home, while recognising and respecting all that live there.

What needs to be different for the individuals using the service?

- Very few personal objects around the home.
- Personal portraits on the wall were quite old.
- Encouragement of choice and personalisation within the home, an example of this was individual lunch boxes, which are currently all the same, and choice of where individuals chose to eat.
- All individuals laundry is folded on the kitchen side on display.

What could be done to make this aspect better?

- Update portraits.
- Develop photomontages as service users want.
- During service user meetings to discuss what people want i.e. lunch boxes, personal items and action plan etc.
- To explore with service users and as a staff team how laundry is undertaken.
- To explore radiator – is there a fault?
- As laundry involves personal items of clothing this could be washed separately and when folded taken to individual rooms, rather than being left out.

F) The health and safety of individuals
<p>What is working well?</p> <ul style="list-style-type: none"> ○ Staff know how to support individuals everyday. ○ The home is clean, tidy and safe. ○ Regular health and safety checks are undertaken. ○ All individuals are registered with GP's and have access to medical professionals if needed.
<p>What needs to be different for the individuals using the service?</p> <ul style="list-style-type: none"> ○ Lack of records, which reflect person centred, proactive risk assessment and guidance.
<p>What could be done to make this aspect better?</p> <ul style="list-style-type: none"> ○ Development of clear training plans for staff. ○ Development of proactive risk assessments. ○ Implementation of the individual support framework.
G) The management of individuals' finances
<p>What is working well?</p> <ul style="list-style-type: none"> ○ Clear and accurate records are maintained. ○ Individuals are supported to spend their money. ○ The unit manager and staff team manages the money and they ensure there is enough money available.
<p>What needs to be different for the individuals using the service?</p> <ul style="list-style-type: none"> ○ Individuals appear to have little responsibility for their personal finances.
<p>What could be done to make this aspect better?</p> <ul style="list-style-type: none"> ○ To explore as a staff team and with individuals the development of finance related support plans.
H) The treatment of information about individuals
<p>What is working well?</p> <ul style="list-style-type: none"> ○ Documentation is clear and respectful.
<p>What needs to be different for the individuals using the service?</p> <ul style="list-style-type: none"> ○ Information about individuals would benefit from being reviewed more regularly. ○ It was evident that information had been cut and pasted. ○ Staff reported individuals are not involved in completing documentation about themselves. ○ All documentation is kept within the office.

What could be done to make this aspect better?

- Staff team to explore the office environment and purchase a lockable cabinet to keep all individual documentation in to ensure confidentiality and data protection.
- All documentation to be reviewed by the staff team and to involve the individuals as much as they choose.

Conclusion:

It was felt by the Audit Review Team that everyone at Ford Road worked hard and had the best interests of the service users at heart. All of the service users have lived at Ford Road for a number of years and it was apparent that they were very settled in the environment and had established clear routines and activities. The house was clean and tidy and very orderly. It was though, felt that there is scope to explore new activities and develop the individual's life skills and experiences.

The Audit Team would like to thank all those who took part in the review for their openness and for being made to feel welcome on their visits.

It is hoped that not only will this review benefit those within Ford Road, but as being the pilot review will also help develop the review process.

During the feedback session with Ford Road staff team they were extremely positive and motivated about the report and identified areas that could be developed. The 'what it would take to change' section has been completed and agreed with Ford Road staff team, Portsmouth Locality Manager and the Audit Team Leader. Further development/detail of the action plan and the 'how's' will be discussed as a staff team within unit meetings and progress will be monitored by the Locality Manager.

Paul Kniveton
On behalf of the Audit Team

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