

Inspector: Dermott Knox Inspection ID: IN024180

Scraboview Beacon Centre RQIA ID: 10713 81 Victoria Avenue Newtownards BT23 7ED

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Unannounced Care Inspection of Scraboview Beacon Centre

3 March 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An unannounced care inspection took place on 3 March 2016 from 10.00 to 16.00. Overall on the day of the inspection the day care setting was found to be delivering safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Settings Regulations (Northern Ireland) 2007 and The Day Care Settings Minimum Standards 2012.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report, below.

2. Service Details

Registered Organisation/Registered Person: NI Association for Mental Health/William Henry Murphy	Registered Manager: Darren Lawless
Person in Charge of the Day Care Setting at the Time of Inspection: Darren Lawless	Date Manager Registered: 25 November 2009
Number of Service Users Accommodated on Day of Inspection:	Number of Registered Places: 20

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards have been met:

Standard 5: Care Plan - Where appropriate service users receive individual continence promotion and support.

Standard 8: Service Users' Involvement - Service users' views and comments shape the quality of services and facilities provided by the day care setting.

4. Methods/Process

Prior to inspection the following records were analysed:

- Record of notifications of events
- Record of complaints
- Quality Improvement Plan from the previous inspection on 5 March 2015

During the inspection the inspector met with:

- Five members, individually and with two others together
- The manager
- One project worker
- One volunteer

The following records were examined during the inspection:

- Computer file records for four service users, including care plans and review reports
- Progress notes for two service users (on computer)
- · Monthly monitoring reports for two months
- The statement of purpose
- The member's guide, including an "Easy-read" version
- Minutes of three members'/partnership meetings
- Minutes of four staff meetings
- Training records for two staff
- Supervision and appraisal records for two staff
- A sample of two written policy and procedures documents
- A recently developed Scraboview Prospectus

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an announced care inspection dated 5 March 2015. The completed QIP was returned and approved by the care inspector.

Areas to follow up were the two recommendations in the QIP dated 5 March 2015.

5.2 Review of Requirements and Recommendations from the Last Care Inspection

Previous Inspection	Validation of Compliance	
Ref: Standard 7.5	It is recommended that the registered manager ensures all staff cease to leave spaces between each recorded entry within daily progress notes. Action taken as confirmed during the inspection: The manager confirmed that this recommendation had been implemented immediately following the inspection, since when the online system has been introduced and these records are now kept electronically, ensuring that they are secure and cannot be edited individually.	Met
Ref: Standard 25.1	Cleaning Schedule The registered manager must ensure that the building is kept clean and hygienic at all times. Items within the manager's office to be appropriately stored or removed. Ref: 9.10 Action taken as confirmed during the inspection: A weekly cleaning rota was in operation and the centre was clean and well-ordered throughout.	Met

5.3 Standard 5: Care Plan - Where appropriate service users receive individual continence promotion and support

Is Care Safe?

Scraboview Beacon Centre provides support services to people whose assessed needs arise principally from periods of mental ill health. There were no members whose specific needs included continence promotion or care.

Members' care plans addressed the assessed needs clearly and were directly relevant to the areas of need for which each person had been referred. Goals were stated and outcomes recorded in the computer based system that has recently been introduced. Progress notes for each member were of a good standard and were being kept up to date.

In discussions, seven members conveyed their feelings of positive value for the centre and spoke of their confidence in the support provided by staff and by volunteers and other members who attend. The members confirmed that they had ready access to a good range of facilities they needed and that staff were competent in providing support in all aspects of the day care service. Facilities for service users were found to be clean, well-furnished and well maintained. The manager confirmed that appropriate training for the work was provided, including regular refresher training in Safeguarding Vulnerable Adults, and this was verified by a project worker and a volunteer who were present throughout the inspection.

There was good evidence to support the conclusion that safe care was being provided to those who attended the centre.

Is Care Effective?

The needs of members were clearly identified in written assessments, and support plans provided clarity on the actions to be implemented by staff. Members reported that care needs were met effectively within the centre and this was verified in the review reports and monthly monitoring reports that were examined. Monitoring visits were carried out regularly and the reports showed that the quality of the centre's operations was examined in detail. Monitoring reports were of a high standard.

Mandatory and additional staff training had been provided during 2015, including, Safeguarding Vulnerable Adults, Safeguarding Children, Performance Management and Training, and Quality and Governance. Staff and a volunteer expressed very positive views of the quality and range of training provided by NIAMH. Members who met with the inspector unanimously expressed positive views on the help and support that they gained from the service.

There was good evidence of the effectiveness of care provided for members who attended the centre.

Is Care Compassionate?

Throughout the day of the inspection members discussed with the inspector the many ways in which the service is supportive and compassionate. All seven members, who met for discussions with the inspector, were unanimous in their view that the service was of great value to them and they confirmed that their attendance at the centre, their relationships with

other members and the support that staff provided was of great importance to them. Records of support plans, care reviews and the regular progress notes were all written in a professional and caring manner, providing evidence of compassionate care being delivered in the setting, including particular attention to the privacy, dignity and fulfilment of each person.

Number of Requirements:	0	Number of Recommendations:	0
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5.4 Standard 8: Service Users' Involvement - Service users' views and comments shape the quality of services and facilities provided by the day care setting

Is Care Safe?

Discussions during the inspection confirmed that members felt safe and secure in the setting. Systems were in place to ensure that risks to members were assessed continually and managed appropriately. The manager and staff maintained regular contact with community based professionals who were also involved in providing services to those who attended the centre.

There was written and oral evidence to show that formal opportunities were being provided consistently for members to discuss a variety of matters with staff. Members'/partnership meetings were held monthly and the minutes of these were informative, inclusive and constructive. On each monitoring visit, a number of members were approached by the monitoring manager in order to ascertain their views and feelings on the operation of the centre and the quality of the service provided.

It was evident from the records examined at this inspection, and from discussions with members and staff, that safe care was being provided.

Is Care Effective?

Service users spoke positively about the staff and the manager in the centre, praising both the group activities with their supportive and developmental aims and outcomes, and the individual care provide by the manager and staff to members when they needed more intensive support. The manager presented as knowledgeable of the needs of all the members and spoke very positively of the staff team, including the volunteers.

There were clear and relevant links between assessments of needs and the support plans that were designed to guide the work with each member. Objectives in support plans were mainly written from the perspective of the individual member, giving the plan a strong sense of belonging to the member, while also facilitating the recognition of achievement when an objective is reached. Expected outcomes were clearly stated, as were the actions required to achieve the outcomes. The effective use of this constructive model is commendable.

Members' reviews were being held at least annually and there was written evidence of good involvement of members in preparation for these meetings. Records of the reviews examined indicated that the members and the referring agents were satisfied with the service provided.

Monthly monitoring visits were carried out by the service manager whose comprehensive reports of these visits were excellent. It was evident that the service manager was regularly involved in discussions with members and with staff, and gained valuable feedback from all. Overall there was strong evidence of effective care being provided.

Is Care Compassionate?

Throughout this inspection the members provided strong evidence of caring and supportive relationships with staff and with each other in the operation of Scraboview Beacon Centre. Members who engaged in individual discussions with the inspector confirmed that compassionate and effective care was being delivered within the setting. It was clear from these discussions that the manager and staff responded supportively to suggestions from members on ways in which the service could most usefully be developed.

The centre was welcoming and held many indicators of encouragement for people to make use of the varied creative, active and passive activities available. This feeling was enhanced by the widespread display of the products of members' work, whether in creative writing, artwork, woodwork or various crafts. It was also evident in the regular participation of several members in food preparation, cooking and helping to keep the centre clean and well ordered. The manager and staff are commended for their continuing commitment to involving members in the running of the centre, and to seeking developmental opportunities, including funding, for the various projects and activities that contribute to this high quality service.

The centre was judged to be providing excellent, compassionate care.

Number of Requirements:	0	Number of Recommendations:	0	1
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No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Darren Lawless	Date Completed	15/3/16
Registered Person	Billy Murphy	Date Approved	21/03/2016
RQIA Inspector Assessing Response	Dermott Knox	Date Approved	21/03/16

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

The inspector worked collabratively with staff, volunteers and members throughout the inspection. He was mindful that he wanted to cause as little disruption to service delivery on the day. There was very much a partnership approach which was much appreciated by all involved.

Darren Lawless

Please complete this document in full and return to day.care@rgia.org.uk from the authorised email address

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.