

Inspector: Ruth Greer
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**Unannounced Care Inspection
of
Knockbracken Day Centre**

3 March 2016

1. Summary of Inspection

An unannounced care inspection took place on 3 March 2016 from 10 15 to 14 45. Overall on the day of the inspection the day care setting was found to be delivering safe, effective and compassionate care. 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.

2. Service Details

Registered Organisation/Registered Person: Belfast HSC Trust/Martin Joseph Dillon	Registered Manager: Esther Brimage
Person in Charge of the Day Care Setting at the Time of Inspection: Susan Curry, acting manager	Date Manager Registered: 23 November 2015
Number of Service Users Accommodated on Day of Inspection: 32	Number of Registered Places: 75

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 and themes 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:

- Records of notifiable events
- The previous inspection report
- Written and verbal communication received since the previous inspection

During the inspection the inspector met with 20 service users and five staff. There were no visiting professionals and no representatives/family members present on the day.

The following records were examined during the inspection:

- The statement of purpose
- The service user guide
- Record of complaints
- Samples of monthly monitoring reports
- Selected policies relevant to standards 5 and 8
- Minutes of service users' meetings
- Care records for five service users
- Quality assurance reports

At the conclusion of the inspection, staff and service user questionnaires were given to the acting manager for distribution, completion and return to the RQIA.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an announced estates inspection dated 7 August 2015. The completed QIP was returned and approved by the estates inspector.

5.2 Review of Requirements and Recommendations from the Last Care Inspection Dated 18 November 2014

There were no requirements or recommendations made as a result of the previous care inspection.

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

Is Care Safe?

Service users' care records provided evidence of the consideration of personal care and life skills and needs where relevant. These included, where required, care plans in relation to continence management. Staff members confirmed their confidence in following procedures for all aspects of care and demonstrated an awareness of which service users needed

assistance with continence care. There was a policy for staff guidance on continence management dated 29 June 2015. Staff training records showed that training for staff in continence promotion and management had been provided by a specialist professional on 10 September 2015.

Staff confirmed that they had free access to adequate supplies of personal protective equipment and continence aids.

Is Care Effective?

There was evidence from discussions with service users and staff, as well as from written records, to confirm that the care provided met the range of needs identified for each service user. Review records verified that service users' needs had been identified appropriately and had been reviewed regularly to ensure that care plans remained relevant and accurate. The annual quality report completed by line management and dated August 2015 identified that a continence assessment tool had been developed. This document was seen in place, where appropriate, in the care files inspected.

Monitoring visits and reports were being completed regularly by line management. The visits included meetings with a number of service users and with staff to ascertain their satisfaction with the care provision in the centre.

Is Care Compassionate?

Staff interaction with service users was observed throughout the inspection, showing a supportive and encouraging approach. Examples were seen in the appropriate language and tone of voice used by staff. All assistance was provided in a caring, professional and compassionate manner. Staff who spoke individually with the inspector demonstrated knowledge of the potential loss of independence and dignity experienced in connection with incontinence, and of ways in which their practice could minimise this.

Areas for Improvement

There were no areas of improvement identified with this theme

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?

Evidence from discussions with service users indicated that high levels of consultation both with them, their families and other professionals, takes place in regard to care planning and programmes in which service users participate. Meetings of service users take place monthly and minutes showed that service users were encouraged to contribute their views and ideas. The centre had a policy on service users involvement dated March 2013. The centre hosts a monthly support group for carers of service users. A meeting was scheduled for the evening of the inspection. Many of the service users who attend the centre have been diagnosed with dementia. Care plans contained risk assessments in regard to any area where a potential risk

had been identified. Staff practice on the day evidenced that staff were skilled in keeping service users safe in caring and supportive manner.

Is Care Effective?

Knockbracken Day Centre has good quality assurance systems in place through which the centre's operations are monitored and staff practice and performance is evaluated. An annual quality review report completed in August 2015 was inspected and contained all the elements required by regulation 17. Satisfaction questionnaires were distributed to service users and carers in May 2015. Examination of the returned questionnaires showed positive responses in regard to the service experienced. Service users on the day told the inspector that they are happy to attend the centre and that staff "are the best". One service user said: "I'd crack up if I didn't come here." In discussion with staff they were well informed on all aspects of the work in progress for each service user.

Five care files were examined and found to be well organised and to contain all of the required information. A record was held of each service user's involvement and progress. Records were regularly audited by the acting manager and were sampled by the line manager as part of the monthly monitoring visit.

The acting manager spoke of a major outreach ongoing between the centre and the local council. A specialist arts specialist is employed to provide music therapy. There is a wide range of craft activities; the products are sold at regular sales and any profit returned to purchase equipment for the centre. This makes the work undertaken as purposeful as well as enjoyable.

Is Care Compassionate?

Staff members and service users were welcoming to the inspector and contributed positively to the inspection findings. There was evidence of positive relationships between the service users and staff, through both individual and group experiences. The staff presented as experienced, skilled and committed to ensuring the best possible outcomes from their work. In all of the interactions observed, staff engaged service users with warmth, respect and encouragement.

Each of the staff who met the inspector confirmed that they were confident in the practice of colleagues in the team and felt they were positively supported by management and the organisation.

Thanks are due to service users who welcomed the inspector to the centre and to the acting manager and staff for their constructive approach throughout the inspection process.

Overall there was evidence to confirm that the centre provides a good quality service to those who attend.

Areas for Improvement

There were no areas for improvement identified in respect of this standard.

Number of Requirements:	0	Number of Recommendations:	0
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5.5 Additional Areas Examined

5.5.1. Complaints

One complaint was recorded since the previous inspection. The complaint was resolved at a local level and was comprehensively recorded.

5.5.2. Environment

On the day of the inspection the centre was warm, bright and welcoming. There were beautiful displays of service users' crafts throughout. An inspection of the internal premises showed no hazards or malodours.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Esther Brimage	Date Completed	25/03/16
Registered Person	Martin Dillon	Date Approved	15/04/16
RQIA Inspector Assessing Response	Ruth Greer	Date Approved	22/04/16

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

****Please complete this document in full and return to day.care@rqia.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.