

Inspection Report

23 February 2024



Mount Oriel Day Centre

Type of service: Domiciliary Care Agency
Address: 53 - 57 Saintfield Road, Belfast, BT8 7HL
Telephone number: 02895042695

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Belfast HSC Trust	Registered Manager: Ms Julie Robinson
Responsible Individual/s: Dr Catherine Jack	Date registered: Registration pending
Person in charge at the time of inspection: Deputy Manager	
Brief description of the accommodation/how the service operates: Mount Oriel Day Centre is a day care setting which provides services to a maximum of 75 service users. The centre provides 50 places per day for older people and 25 places for adults living with a learning disability. Day care and day time activities are provided for adults who meet some or all of the following criteria: have a learning disability, are aged over 65 years, have a diagnosis of dementia, have needs arising from a mental health diagnosis, have a physical disability and/or sensory disability. This service is operated by the Belfast Health and Social Care Trust.	

2.0 Inspection summary

An unannounced inspection took place on 23 February 2024 between 9.25 a.m. and 2.25 p.m. The inspection was conducted by a care inspector.

RQIA held a Serious Concerns meeting on 26 October 2023 in relation to the lack of robust managerial oversight and governance arrangements.

This inspection was a focused inspection to ensure compliance and focused solely on the areas of concern discussed at the Serious Concerns Meeting.

On inspection there was evidence that the service had addressed the majority of the actions agreed at the Serious Concerns meeting, however insufficient evidence was found in relation to monthly monitoring visits, which did not include a clear focus on staff culture, and engagement with all key stakeholders. This finding was discussed with Mrs Breige Connery, Assistant Service Manager, a robust action plan to address this finding was shared. The area for improvement will be stated for a second time.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

In preparation for this inspection, a range of information about the service was reviewed. This included any previous areas for improvement identified, registration information, and any other written or verbal information received from service users, relatives, staff or the Commissioning Trust.

Information was provided to service users, relatives, staff and other stakeholders on how they could provide feedback on the quality of services. This included questionnaires and an electronic survey.

4.0 What did people tell us about the service?

During the inspection we spoke with a number of service users, relatives and staff members.

The information provided on the day of inspection indicated that there were some concerns in relation to the Day Centre from the staff members. These comments are not included but were discussed with the person in charge at the time of inspection and also with Mrs Breige Connery, Assistant Service Manager.

Comments received included:

Service users' comments:

- "I love coming here"
- "The food is lovely."
- "I enjoy playing games."
- "I like going bowling."

Staff comments:

- "The standard of care has always been brilliant."
- "The programmes work best as two separate services."
- "My experience and qualification is in Learning Disability; my job description is for learning disability."
- "The manager is very approachable; she is a brilliant manager."
- "There is a big turnaround in the service, the acting band 6 is doing really well."
- "The lack of a band 5 is having a negative impact on service users."
- "There is limited opportunity for development."
- "I have been very anxious about the services amalgamation, but I don't feel much of an impact to date."
- "We don't do a lot of joined activity"

- “The amalgamation has had no negative impact on me personally.”
- “The manager is very approachable and supportive.”

Returned questionnaires indicated that the respondents were very satisfied with the care and support provided. Written comments included:

- “It is comforting to know when I have a worry or concern, that there is someone who cares and there to help to put me at ease.”
- “I am happy with everything that happens in Mount Oriel. I enjoy the company of others and we have very good overseers.”

A member of staff responded to the electronic survey. The respondent indicated that they were dissatisfied with one aspect of the service. This response was discussed with Mr Thomas Mc Corry, Assistant Service Manager.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since the last inspection?

The last care inspection of the agency was undertaken on 19 September 2023 by a care inspector. A Quality Improvement Plan (QIP) was issued. This was reviewed by the care inspector during this inspection.

Areas for improvement from the last inspection on 19 September 2023		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 11 (1) Stated: First time To be completed by: 30 November 2023	<p>The registered person shall ensure there is a defined management structure that clearly identifies lines of accountability, specifies roles and responsibilities for all staff within the service.</p> <p>Develop Standard Operating Procedures (SoP) which reflect the newly implemented staffing arrangements within Mount Oriel Day Centre. Submit copy of the SoP to RQIA no later than 30 November 2023.</p> <p>Ref: 5.2.6</p>	Met

	Action taken as confirmed during the inspection: There is an agreed management structure in place within the day centre which is reflected in the Statement of Purpose.	
Area for improvement 2 Ref: Regulation 28 Stated: First time To be completed by: With immediate effect from 26 October 2023	The registered person shall ensure that the monthly monitoring visits (and associated reports) are conducted at Assistant Service Manager level or above for a minimum of six months with immediate effect. One report is to be completed on a monthly basis for Mount Oriel Day Centre going forward and must include a clear focus on staff culture, and engagement with all key stakeholders. Ref: 5.2.6	Not met
	Action taken as confirmed during the inspection: Monthly monitoring reports are now being completed as one report for the entire service, these reports did not include a clear focus on staff culture or engagement with all key stakeholders. A number of issues were identified with the reports which included accuracy of dates, incorrect action plan, no evidence of action on an aspect raised by a relative, significant delay in the report being completed and incorrect statement that no Quality Improvement Plan was in place.	
Area for improvement 3 Ref: Regulation 4 (1)(2) Stated: First time To be completed by: 30 November 2023	The registered person shall ensure the Statement of Purpose has been updated to reflect the new staffing arrangements within the Day Care Service. Submit copy of the updated Statement of Purpose to RQIA no later than 30 November 2023. Ref: 5.2.6	Met
	Action taken as confirmed during the inspection: The Statement of Purpose was reviewed and was found to include the updated staffing arrangements	

<p>Area for improvement 4</p> <p>Ref: Regulation 5 (1)(2)</p> <p>Stated: First time</p> <p>To be completed by: 30 November 2023</p>	<p>The registered person shall ensure the Service User Guide has been updated to reflect the new staffing arrangements within the Day Care Service. Submit copy of the updated Service User Guide to RQIA no later than 30 November 2023.</p> <p>Ref: 5.2.6</p> <p>Action taken as confirmed during the inspection: The Statement of Purpose was reviewed and was found to include the updated staffing arrangements,</p>	<p>Met</p>
<p>Area for improvement 5</p> <p>Ref: Regulation 13 (3)</p> <p>Stated: First time</p> <p>To be completed by: 30 November 2023</p>	<p>The registered person shall ensure that a communications strategy is developed to engage with service users, their families/ representatives, regarding the proposed new staffing arrangements within Mount Oriel Day Centre. A copy of the communications strategy should be submitted to RQIA no later than 30 November 2023.</p> <p>Ref: 5.2.2</p> <p>Action taken as confirmed during the inspection: Communication shared with service users and representatives viewed.</p>	<p>Met</p>
<p>Area for improvement 6</p> <p>Ref: Regulation 30 (2)(e)</p> <p>Stated: First time</p> <p>To be completed by: 15 December 2023</p>	<p>The registered person shall submit a notification of absence of the registered manager, the arrangements that have been, or are proposed to be, made for appointing another person to manage the day care setting.</p> <p>Ref: 5.2.2</p> <p>A notification of absence was been received.</p>	<p>Met</p>

5.2 Inspection findings

5.2.1 What are the arrangements to ensure robust managerial oversight and governance?

There were monitoring arrangements in place with one monitoring report being completed for the service. A review of the reports of the agency's quality monitoring established that there was engagement with service users and staff. However, these reports did not contain feedback from HSC Trust representatives. The reports also contained inaccurate information and did not include a clear focus on staff culture. An area for improvement has been identified and will be restated for a second time.

The Statement of Purpose and Service User Guide contained details of the staffing structure, there was also evidence of communication with service users and their representatives in relation to the management structure.

We discussed the acting management arrangements which have been ongoing since 17 July 2023; RQIA will keep this matter under review.

6.0 Quality Improvement Plan (QIP)/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007.

	Regulations	Standards
Total number of Areas for Improvement	1*	0

* the total number of areas for improvement includes one that have been stated for a second time

The area for improvement and details of the QIP were discussed with the person in charge at the day of inspection and with Mrs Breige Connery, Assistant Service Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007	
Area for improvement 1 Ref: Regulation 28 Stated: Second time To be completed by: Immediately from the date of inspection	The registered person shall ensure that the monthly monitoring visits (and associated reports) are conducted at Assistant Service Manager level or above for a minimum of six months with immediate effect. One report is to be completed on a monthly basis for Mount Oriel Day Centre going forward and must include a clear focus on staff culture, and engagement with all key stakeholders. Ref: 5.2.6
	Response by registered person detailing the actions taken: The Assistant Service Manager will carry out the Regulation 28 monthly monitoring visits for 6 months as of March 2024, this will continue until September 2024. Following this, the Assistant Service Manager will carry out bi-monthly visits. Each visit will have a clear focus staff culture, and engagement with all key stakeholders. A listening exercise will commence with Assistant Service Manager and Service Manager leading, the Leadership Centre will provide support to this with the aim to also incorporate a team cohesion / building session focusing on staff culture and engagement with all stakeholders.

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The Regulation and Quality Improvement Authority
James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA

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

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