



Announced Care Inspection Report 11 March 2021



Mountainview Assessment and Resource Centre

Type of Service: Day care
Address: Flying Horse Road, Downpatrick, BT30 6QP
Tel No: 028 4451 3818
Inspector: Jim McBride

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a day care setting with 90 places that provides care and day time activities for people living with a learning disability.

3.0 Service details

Organisation/Registered Provider: South Eastern Health & Social Care Trust Responsible Individual: Seamus Mc Goran	Registered Manager: James Laird
Person in charge at the time of inspection: James Laird	Date manager registered: 26/02/2009

4.0 Inspection summary

An announced inspection took place on 11 March 2021 from 09.00 to 11.00 hours.

Due to the coronavirus (COVID-19) pandemic the Department of Health (DOH) directed RQIA to continue to respond to ongoing areas of risk identified in services.

In response to this information RQIA decided to undertake an inspection of the service. Whilst RQIA was not aware that there was any specific risk to the service a decision was made to undertake an on-site inspection adhering to social distancing guidance.

This inspection was underpinned by: The Health and Personal Social Services (Quality Improvement and Regulation (Northern Ireland) Order 2003, The Day Care Setting Regulations (Northern Ireland) 2007, The Day Care Settings Minimum Standards, 2012 and The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017:

Evidence of good practice was found in relation to Access NI and staff registrations with the Northern Ireland Social Care Council (NISCC). Good practice was also found in relation to all current Covid-19 guidance, the use of PPE and Covid-19 education and management including infection prevention and control (IPC) measures. Individual quality measures in place completed by staff daily.

It was positive to note that staff had supported both service users and relatives through the Covid-19 time as the centre provided regular contact with service users.

The findings of this report will provide the manager with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

4.0 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with James Laird, manager, as part of the inspection process and can be found in the main body of the report.

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

No further actions were required to be taken following the most recent inspection on 4 November 2019.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this day care service. This included the previous inspection report, notifiable events, written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users and staff to find out their views on the service.

We ensured that the appropriate staff checks were in place before staff work with service users and reviewed the following:

- Recruitment records specifically relating to Access NI and NISCC registration.
- Covid-19: guidance for Day care.

RQIA provided information to service users, staff and other stakeholders that will support feedback on the quality of service delivery.

A poster was provided for staff detailing how they could complete an electronic questionnaire. No responses were received prior to the issue of the report.

Questionnaires were also provided for distribution to the service users and their representatives; two responses were returned and the responders were very satisfied with the questions asked.

Questionnaire response:

- “We are very happy with Mountainviews care of *****”
- “Five days a week would be good ASAP.”

During the inspection the inspector communicated with two staff members and the manager. Due to limited members attending no service users were available for feedback; however a number of questionnaires were issued for completion.

Staff comments during inspection:

- “We feel safe and secure with PPE and covid guidance.”
- “Staff receive a comprehensive induction and they are involved with shadowing other staff.”
- “Supervision is 1-1 and is regular.”
- “The manager has an open door policy and is approachable.”
- “Excellent staff communication.”
- “We continue to provide activities and offer choices.”

- “Manager is easy to talk too.”
- “Service users have been well supported though covid.”

We would like to thank the registered manager and staff for their support and co-operation throughout the inspection process.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

6.0 The inspection

6.1 Inspection findings

The services staff recruitment processes were noted to be managed in conjunction with the organisation’s Human Resources (HR) Department. Discussion with the manager identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 21, Schedule 2 and Standard 20 relating to Access NI. We reviewed documentation in staff files in relation to pre-employment checks which provided assurances that Access NI checks were completed before commencement of employment.

A review of six staff records confirmed that all staff are currently registered with NISCC. We noted that the manager had a system in place each month for monitoring registration status of staff with NISCC and confirmed that all staff are aware that they are not permitted to work if their NISCC registration had lapsed.

Service quality:

The inspector noted comments from service users, staff and relatives made during regular monthly quality monitoring.

Service user comments:

- “I’m well cared for by staff.”
- “Staff always reassure me about any concerns or worries.”
- “I am happy to get out of the house to see staff and my friends.”

Staff comments:

- “More one to one time with the reduced numbers at the centre.”
- “Staff offer a wide range of activities daily.”
- “I’m well supported by the manager and communication is good.”

Relative’s comments:

- “Staff are very good and careful with PPE.”
- “I’m happy with the quality of care.”
- “Staff are all lovely and communication is good.”

Care planning and review:

We reviewed six care plans in place for individual service users. These fully described the care and support required for individuals and included:

- Referral information
- Care plan
- Individual action plans
- Risk assessments
- Reviews.

The centre must be commended for their work with to ensure all annual reviews were completed.

We noted some of the comments made by service users or relatives during their annual review:

- "I like coming to Mountview."
- "I enjoy taking part in activities."
- "I like all the staff."
- "I'm happy with the support ***** receives."
- "Everything is working well for *****."
- "I like the day care."
- "***** is doing well and enjoys the activities."

Covid-19:

We spoke with the manager and staff members, who were knowledgeable in relation to their responsibility in relation to covid-19. Staff stated they were aware of the guidance on the use of personal protective equipment (PPE) for activities that brought them within two metres of service users. Staff were also aware of the need to replace PPE between service users and how to appropriately dispose of used PPE.

We reviewed the current practices relating to the following areas of guidance and good practice relating to Covid-19.

- Dissemination of information to staff
- Monitor staff practice
- IPC policies and procedures
- Infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19.
- Temperature monitored twice daily in line with guidance
- Used PPE storage and disposal
- Staff training and guidance on: a. infection prevention and control and b. the use of PPE, in line with the current guidance.

We reviewed records relating to infection prevention and control policies which were in-line with the current guidance. The policies and procedures had been updated to include Covid-19 guidance. Policies and guidance were available to all staff in hard copy within the service.

We reviewed records indicating that service users, staff and visitors had their temperatures monitored twice daily in accordance with the guidance.

Monitoring records also involved asking about and looking out for the following symptoms, fever of 37.8C or above, cough, loss of or change in sense of smell or taste.

Hand sanitisers were placed in different areas throughout the centre for service users, staff and visitors to use to ensure and promote good hand hygiene.

There was evidence that clear guidance with regards to IPC, donning (putting on) and doffing (taking off) of PPE. There was evidence that staff had completed training with regards to IPC.

The staff on duty demonstrated that they had a good understanding of the donning and doffing procedures and were observed to be using PPE appropriately. The manager discussed the procedures that both he and staff spot check the use of PPE. Spot checks on staff practice are undertaken to ensure they are fully compliant with the guidance.

The procedure and guidance in place show that:

- Robust systems are in place to ensure that current infection prevention and control guidance is available and accessible to staff.
- There are effective systems in place to monitor staff compliance with good infection prevention and control practices.
- All staff working in the service are able to demonstrate their knowledge of infection prevention and control practice commensurate to their role and function in the service.

It was good to note that staff were working well together to support the best outcomes for service users, in a sensitive manner, whilst being caring and compassionate.

We noted that in preparation for service users returning to the centre they prepared pictorial easy read information sheets that would ensure understanding of the latest covid guidance these discussed:

- Transport
- Temperature taking
- PPE explaining staff wearing masks
- Sanitisers

It was noted that staff were committed to working in line with Covid-19 guidance to ensure that the impact of current measures, strikes the correct balance between keeping people safe and promoting a good quality of life. Staff are being vigilant in terms of monitoring service users for symptoms and are adhering to the public health guidance in order to minimise the risk of introducing or spreading Covid-19 within the agency.

Areas of good practice

Areas of good practice were identified in relation to the completion of checks with Access NI in conjunction with HR Department and staff registrations with NISCC. Covid guidance, annual reviews and easy read information for service users relating to covid guidance

Areas for improvement:

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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