

Inspection Report

19 September 2024



Mountview Assessment and Resource Centre

Type of service: Day Care Setting
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: South Eastern Health and Social Care Trust (SEHSCT)	Registered Manager: Mrs Belinda Cockcroft
Responsible Individual: Ms Roisin Coulter	Date registered: Acting
Person in charge at the time of inspection: Manager	
Brief description of the accommodation/how the service operates: Mountview Assessment and Resource Centre is a day care setting registered for 90 places. It is operated by SEHSCT. The setting provides care and a range of day time activities for adults living with a learning disability. These adults also have a range of needs including mental health, physical disability, dementia, sensory impairment and behaviours that challenge.	

2.0 Inspection summary

An unannounced inspection was undertaken on 19 September 2024 between 10.15 a.m. and 3.05 p.m. The inspection was conducted by a care inspector.

The inspection examined the agency's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing, Deprivation of Liberty Safeguards (DoLS), service user involvement, restrictive practices and Dysphagia management were also reviewed.

Good practice was identified in relation to service user involvement. The service was well organised and had a range of systems in place to ensure its operation and to support good communication.

All service users spoken with indicated that they were very happy with the care and support provided by the staff.

No areas for improvement were identified.

Mountview Assessment and Resource Centre uses the term 'clients' to describe the people to whom they provide care and support. For the purposes of the inspection report, the term

'service user' is used, in keeping with the relevant regulations.

The inspector would like to thank the manager, service users, relative and staff for their help and support in completion of the inspection.

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.

As a public-sector body RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care services, we are committed to ensuring that the rights of people who receive services are protected. This means we will be seeking assurances from providers that they take all reasonable steps to promote people's rights. Users of day care settings have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted.

Having reviewed the model "We Matter" Adult Learning Disability Model for NI 2020, the Vision states, we want individuals with a learning disability to be respected and empowered to lead a full and healthy life in their community.

Information was provided to service users, relatives, staff and other stakeholders on how they could provide feedback on the quality of services. This included easy read 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 indicated that they had no concerns in relation to the day care setting.

Comments received included:

Service users' comments:

- "I love coming here."
- "We are going swimming this afternoon."
- "We water the plants."

- “I like watching Nathan Carter videos.”
- “The staff are great.”

Service user’s relative’s comments:

- “My relative is flourishing here. I have no hesitation in contacting staff. The staff are easy to approach; they listen to anything I raise and follow up on it. All the staff are 200% on top of their job role.”

Staff comments:

- “I have no issues.”
- “We are a good team.”
- “Things are so much better now.”
- “The manager has turned everything round. The building is much brighter.”
- “The standard of my training is great.
- “I got a good induction.”
- “The team building day we had in May really helped.”

HSC Trust representative based in the day care setting:

- “I have joint professional and operational supervision. I have all the facilities and equipment I require. I enjoy being based here.”

During the inspection we provided a number of easy read questionnaires for those supported to comment on the following areas of service quality and their lived experiences:



- Do you feel safe when you are at the Centre?
- Does your care protect you from harm?
- Is care effective – does your care work well for you?
- Is care compassionate – is your care given kindly with dignity and respect?
- Is the service well led – does the manager run the Centre in a good way?

Returned questionnaires show that those supported thought care and support was either excellent or good. We have noted some of the comments received:

- “I like the bus.”
- “I like attending the Client Committee meetings.”
- “I would like more variations of activities.”
- “I like my trips out with staff to the local coffee shop.”
- “Staff treat me well. They take me out for walks when I want.”

- “Staff know me well.”
- “The manager is very polite and kind.”
- “It makes me a bit anxious when other client’s behaviours aren’t good.”
- “I like the circus skills.”
- “I’d like to go swimming.”
- “Sometimes people open the bathroom door when I’m in it.”

Some specific issues raised in the questionnaires have been shared with the manager for taking forward within the day care setting.

One staff member responded to the electronic survey. The respondent indicated that they were ‘very satisfied’ that care provided was safe, effective and compassionate and that the service was well led. No written comments were included.

5.0 The inspection

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

The last care inspection of the day care setting was undertaken on 2 November 2023 by a care inspector. A Quality Improvement Plan (QIP) was issued. This was approved by the care inspector and was validated during this inspection.

Areas for improvement from the last inspection on 2 November 2023		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for Improvement 1 Ref: Regulation 13 (7) Stated: First time	The registered person shall make suitable arrangements to minimise the risk of infection and the spread of infection in the day care setting.	Met
	Action taken as confirmed during the inspection: A tour of the day care setting evidenced this area for improvement had been addressed.	

5.2 Inspection findings

5.2.1 Are there systems in place for identifying and addressing risks?

The day care setting's provision for the welfare, care and protection of service users was reviewed. The organisation's policy and procedures reflected information contained within the Department of Health's (DoH) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

Discussions with the manager established that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting and managing adult safeguarding concerns.

Staff were required to complete adult safeguarding training during induction and every two years thereafter. Staff who spoke with the inspector had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns in normal business hours.

The manager advised that there had been no concerns raised under the whistleblowing procedures.

There had been no recent referrals to the HSC Trust in relation to adult safeguarding. Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided.

The manager was aware of the type of incidents which are required to be notified to RQIA.

Staff were provided with training appropriate to the requirements of their role. Where service users required the use of specialised equipment to assist them with moving, this was included within the day care setting's mandatory training programme. A review of care records identified that moving and handling risk assessments and care plans were up to date.

Care reviews had been undertaken in keeping with the day care setting's policies and procedures. There was also evidence of regular contact with service users and their representatives, in line with the commissioning trust's requirements.

All relevant staff had been provided with training in relation to medicines management. The manager advised that no service users required their oral medication to be administered with a syringe. The manager was aware that should this be required; a competency assessment would be undertaken before staff undertook this task.

The Mental Capacity Act (MCA) provides a legal framework for making decisions on behalf of service users who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, service users make their own decisions and are helped to do so when needed. When service users lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

Staff had completed appropriate Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. There were arrangements in place to ensure that service users who required high levels of supervision or monitoring and restriction had had their capacity considered and, where appropriate, assessed. Where a service user was experiencing a deprivation of liberty, there were details of DoLS assessments completed and agreed outcomes developed in conjunction with the HSC Trust representative. The day care setting maintained a register of those service users who had a DoL in place.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that the last full evacuation drill was undertaken on 5 August 2024. Fire risk assessments for the setting were available for the inspection. There was evidence of follow up of the recommendations included. All staff had completed fire training. During the inspection fire exits were observed to be clear of clutter and obstructions.

5.2.2 What are the arrangements for promoting service user involvement?

From reviewing service users' care records, it was good to note that service users had an input into devising their own plan of care. Service users were provided with easy read reports which supported them to fully participate in all aspects of their care. The service users' care plans contained details about their likes and dislikes and the level of support they may require. Care and support plans are kept under regular review and services users and /or their relatives participate, where appropriate, in the review of the care provided on an annual basis, or when changes occur.

It was also positive to note that the day care setting had service user meetings on a regular basis which enabled the service users to discuss what they from attending the day care setting and any activities they would like to become involved in. Some matters discussed included:

- Activities
- Lunch
- Artwork

5.2.3 Is there a system in place for identifying service users Dysphagia needs in partnership with the Speech and Language Therapist (SALT)?

A number of service users were assessed by SALT with recommendations provided and some required their food and fluids to be of a specific consistency. A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents

Staff demonstrated a good knowledge of service users' wishes, preferences and assessed needs. These were recorded within care plans along with associated SALT dietary requirements. Staff were familiar with how food and fluids should be modified.

5.2.4 What systems are in place for staff recruitment and are they robust?

A review of the day care setting's staff recruitment records confirmed that all pre-employment checks, including criminal record checks (AccessNI), were completed and verified before staff members commenced employment and had direct engagement with service users.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC) or the Nursing and Midwifery Council (NMC) or any other relevant regulatory body. There was a system in place for professional registrations to be monitored by the manager.

There were no volunteers working in the day care setting.

5.2.5 What are the arrangements for staff induction and are they in accordance with NISCC Induction Standards for social care staff?

There was evidence that all newly appointed staff had completed a structured orientation and induction, having regard to NISCC's Induction Standards for new workers in social care, to ensure they were competent to carry out the duties of their job in line with the day care setting's policies and procedures. There was a robust, structured induction programme which also included shadowing of a more experienced staff member. Written records were retained by the day care setting of the person's capability and competency in relation to their job role.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken.

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

There were monthly monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. A review of the reports of the day care setting's monthly quality monitoring established that there was engagement with service users, service users' relatives, staff and HSC Trust representatives. The reports included details of a review of service user care records; accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements.

The Annual Quality Report was reviewed and was satisfactory.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

The day care setting's registration certificate was up to date and displayed appropriately.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure.

There was an identified procedure for checking the vehicle at the end of each journey to ensure that no service users remained on the transport.

All relevant staff had completed training and competencies required to be in charge of the day care setting in the absence of the manager.

6.0 Quality Improvement Plan/Areas for Improvement

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



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