



The Regulation and  
Quality Improvement  
Authority

Towerview Resource Centre  
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**Unannounced Care Inspection  
of  
Towerview Resource Centre**

**18 June 2015**

The Regulation and Quality Improvement Authority  
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## 1. Summary of Inspection

An unannounced care inspection took place on 18 June 2015 from 09.30 to 16.30. Overall on the day of the inspection the Day Care Service 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, 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
<b>Total number of requirements and recommendations made at this inspection</b>	0	1

The details of the QIP within this report were discussed with the Darren Bradshaw, registered manager as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> South Eastern Health and Social Care Trust Hugh McCaughey	<b>Registered Manager:</b> Darren Bradshaw
<b>Person in Charge of the Day Care Setting at the Time of Inspection:</b> Darren Bradshaw	<b>Date Manager Registered:</b> 15 March 2009
<b>Number of Service Users Accommodated on Day of Inspection:</b> 28	<b>Number of Registered Places:</b> 50

## 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

Specific methods/processes used in this inspection include the following:

Prior to inspection the following records were analysed: seven notifications of incidents sent to RQIA in compliance with regulation 29, RQIA duty log and activity log for this day care setting; and the outcome of the last care inspection on 25 September 2014.

During the inspection the inspector met with eight service users; three staff; and the service users' advocate who was visiting during the inspection. There were no visiting professionals or representatives/family members in the day care setting at the time of the inspection. Post inspection, two staff questionnaires and three service users' questionnaires were returned to RQIA.

The following records were examined during the inspection: four individual service users' care files; three complaint records; a sample of the incidents and accident records for the service from September 2014 to June 2015; relevant policies and procedures; general training records for three staff; three regulation 28 monitoring records; the statement of purpose and the service user guide.

## **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 12 February 2015. The completed QIP was returned and all issues except one were confirmed as addressed by the specialist inspector. The one remaining issue will be pursued by the estates inspector.

### **5.2 Review of Requirements and Recommendations from the last Care Inspection**

No requirements or recommendations resulted from the primary announced care inspection of Towerview Resource Centre which was undertaken on 25 September 2014.

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

#### **Is Care Safe? (Quality of Life)**

There was a HSC Trust continence policy and procedure in place which could be accessed by staff in this day care setting. The staff had attended a promotion of continence training session on 17 June 2015. As a result, the staff told the inspector they are developing a local procedure regarding continence support and promotion to address changes in the assessment, care planning, review and referral of continence concerns. Advice was given by RQIA regarding the practical aspects of continence promotion which could also be integrated into the procedure.

Discussions with staff, the review of a sample of records and observation of practice evidenced staff actively seek service users and their representatives' views regarding personal care. This approach ensures continence needs are identified and promoted. Staff described that they were initially concerned this could be a difficult subject matter for service users to openly discuss. However, they reported service users were open and gave information to assist staff in their caring role. Choices, issues of concern, or risks had been recorded in the care planning documentation and the inspection evidenced the plans are being delivered in the centre.

Post inspection, two staff returned questionnaires. These questionnaires reported that staff were satisfied to very satisfied that the care in the day care setting is safe; and in particular, training they had received and support from other services.

We sampled four service users' needs assessments, risk assessments and care plans. These had been kept under continual review; and were kept up to date to accurately reflect at all times the needs and preferences of the service user. The needs assessment and care plans had been appropriately signed. The sample of care plans inspected did include (where appropriate) continence promotion. Staff reported they had been seeking service user's preferences through discussion and had requested professional assessments to ensure care plans are responsive to assessed need.

Staff discussions revealed staff are aware of the different continence products, staff reported their knowledge had been improved following the training they had attended. Staff described how they use Personal Protection Equipment (PPE) and equipment supplies were located in

areas where they attend to continence needs. Overall staff care practices presented as reflective of current infection control guidance.

The observations of the environment in this day care setting did not identify any concerns regarding odour. Storage of PPE and continence products was in keeping with infection control guidance.

Staff's meeting records were sampled from January to June 2015. These evidenced staff discuss changes regarding service users' individual care needs. They had also discussed how to improve practice regarding continence care and implementing changes to improve practice.

The observation of staff, discussions with staff, the review of the records and discussions with service users evidenced this day centre is operating safe practices to ensure, where appropriate, service users receive individual continence promotion and support that is responsive to individual needs which are identified in their care plan.

### **Is Care Effective? (Quality of Management)**

Walks taken around the environments where intimate care needs were met evidenced staff were aware of how to encourage a service user with dementia to use the bathroom. For example, using contrasting colours and signage. Supplies of continence products were brought in by individuals, however if they forget, the care plan includes what is the best way to meet assessed needs. Finally, discussion with staff provided evidence that they are aware of how to meet assessed needs and staff confirmed they have unrestricted access to PPE in the centre.

Staff stated they had received appropriate education and training in continence promotion. They said they found the training useful and were already discussing how this will improve their overall approach to continence care and promotion. This proactive approach to care was impressive and presented as a natural approach by staff. Discussions with staff and observations indicated this proactive approach is led by the manager in this setting.

Post inspection, two staff returned questionnaires. These reported staff are satisfied to very satisfied the care is effective, specifically access to supplies of continence products, PPE and have the appropriate knowledge to meet service user's personal care needs.

Discussions with service users confirmed they felt they had been listened to and they felt their opinions are respected. Service users described feeling valued and their dignity, sense of worth and independence had been promoted.

The advocate for the setting spoke with the inspector. She complimented the staff and manager for their ability to listen to and effectively communicate with service users in the centre. She reported service users are very happy in the setting and their outcomes are improved, including their general health by attending this setting. Activities, the social aspect of the setting and staff observation were identified as areas that improve service users' emotional wellbeing and health, which in turn improves their outcomes.

The manager described how the staff approach identifying continence issues, the referral system for referring new continence needs, the evaluation and review of care plans. The inspection did identify care plans had been recently improved and updated to ensure information is current and care plans meet the needs identified.

In conclusion, the inspection provided evidence this day care setting has effective systems in place to establish care plans that are effective in meeting continence needs and are promoting continence where possible. Furthermore the staff are effectively meeting service users identified needs.

### **Is Care Compassionate? (Quality of Care)**

Discussions with staff revealed they were knowledgeable about their role and responsibility to ensure the care plan for each service user is accurate and that staff meet the needs identified in accordance with the care plan. Staff described how service users' needs are met in a subtle way that does not identify who needs additional support. They also said they had been discussing changes being made to the care planning documents which assisted them in ensuring what was written actually reflects how needs are met.

Post inspection, two staff returned questionnaires. These reported staff are satisfied to very satisfied that the care in the day care setting is compassionate. They were very satisfied that service users are afforded privacy; dignity and respect at all times; and are encouraged to retain their independence and make choices.

In conclusion, the staff are recording in the care plan in a compassionate way that enables staff to meet service user's continence needs; whilst respecting their privacy and dignity.

### **Areas for Improvement**

- 5.4** No areas of improvement were identified in the inspection of the care plan: Where appropriate service users receive individual continence promotion and support

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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- 5.5 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? (Quality of Life)**

The observation of practice and discussions with staff provided evidence staff actively seek service users' and their representatives' views. The records demonstrated these are incorporated into practice, to ensure that choices, issues of concern, complaints or risks are recorded and acted on.

Observation and review of service user records, service user meeting minutes; and discussions with service users provided examples of how service users are listened to and responded to by staff who are knowledgeable about each service users' individual communication needs. Examples showed staff had helped service users with a range of matters in the setting and in their lives outside of the setting.

The needs assessment, risk assessments and care plans had been kept under continual review, amended as changes occurred and kept up to date. The records examined described the individual needs and preferences of each service user. The needs assessment and care plan were appropriately signed. The staff were focused on developing individual service user involvement and the records revealed some service users were volunteering in the day care setting. However this wasn't identified as an objective for the service users. Furthermore, how

volunteering improves outcomes for each service user could also be noted. Advice was given in this regard.

Six service users completed a questionnaire with the inspector on the day of the inspection and two were returned post inspection. The questionnaires report service users are very satisfied care is safe in the day care setting with regard to feeling safe and secure; and there are appropriate staff levels at all times. The comments made were: "I feel very safe"; "we get what we need"; "there is enough staff and I just ask if I need help and they respond".

There are trust and day care setting policies regarding:

- service users' meetings and forums
- listening and responding to service users' views
- service users' involvement in activities and events
- communications with carers and representatives
- general communication arrangements
- safe and healthy working practices
- complaints

In conclusion, the care in this setting is assessed as promoting service users' involvement. Furthermore service users' views and comments are being used to shape the quality of services and facilities provided by the day care setting and ensure they are safe.

### **Is Care Effective? (Quality of Management)**

There is a range of methods and processes where service users' and their representatives' views are sought, recorded and include details of the action taken. Examples of these are the user's group who are elected by the service users. The group bring service user issues to the team for action; consult with service users regarding issues raised by staff and report back to meetings. Service users feedback is sought regarding activities available in the setting, the environment in the centre, and if any improvements can be made. The service users also spend time with their key worker to discuss their individual issues. Service users report their views annually in questionnaires, they are involved in monitoring visits, there is an activity planning questionnaire that informs changes in activity plans, day to day discussion and feedback which is noted in service users individual recording. All of these processes are effective ways that enable service users to be involved in and given opportunities to influence the running of the day care setting.

There is an emphasis on person centred care and planning with service users which promotes service users (or their representative) participation in decisions about the care and support they receive. Service users had been encouraged and enabled to exercise choice and control over their lifestyle and this was recorded in their individual file.

Discussion with service users confirmed they felt they had been listened to and consulted. They gave examples of activities, how they are supported and food choices where their views and preferences had been listened to by staff and integrated in their day to day care in the setting.

Six service users completed a questionnaire with the inspector on the day of the inspection and two were returned post inspection. The questionnaires report service users are very

satisfied care is effective in the day care setting with regard to the care and staff responding to their needs. The comments made were: "staff know what we need"; "nothing is any trouble"; "staff are always very willing and helpful at all times".

During this inspection, the review of records and feedback from service users provided evidence that service user's choices, preferences, opinions or suggestions have been facilitated or implemented effectively and service users were clear they do feel listened to.

Discussions with staff described how they ensure service users' dignity and privacy is respected and that service users have choices. Staff discussion demonstrated that they are knowledgeable about the centre's philosophy of care, promotion of human rights and risk management. The staff and manager had been developing practice in this regard and implemented tools for staff to use which will assist them in promoting the rights of all service users who attend the day care setting.

In conclusion, the care in this setting is assessed as effectively promoting service users' involvement to ensure service users' needs, views and comments are being used shape the quality of services and facilities provided by the day care setting.

### **Is Care Compassionate? (Quality of Care)**

Service users' feedback during the inspection provided evidence they are listened and responded to by staff that are knowledgeable about individual service users' communication needs. Service users were clear that the social aspect of this day centre was of great benefit to them. Whilst they are in the centre they feel assured the staff know how to meet their needs and quickly react if they need anything. Staff were complimented for their caring approach and two service users discussed how staff had encouraged them to walk which they felt had improved outcomes for them. Overall service users said attending this day centre improves their emotional and mental health.

Six service users completed a RQIA questionnaire with the inspector on the day of the inspection and two were returned post inspection. The questionnaires report service users are very satisfied care is compassionate in the day care setting with regard to the support and quality of the service they receive. The comments made were: "staff help to fix our mistakes and that gives us confidence"; "staff can't do enough for you"; "meals are to our needs"; "never seen staff as good as here"; "staff know what everyone needs"; "they listen, say what they are going to do and do it"; "we really enjoy the activities and their activities we wouldn't thought of doing".

Discussion with staff showed they are knowledgeable and can reflect a person centred approach in the care they deliver. Staff talked about how they protect service users' dignity when meeting their needs in the group setting and promote service users views and opinions on a day to day basis as well as in service user meetings and other forums. Service user feedback had been incorporated into annual reports and these were displayed around the setting to remind service users and staff of what they were working to achieve and their objectives for the year. Two staff questionnaires were returned to the inspector post inspection and these both reported the staff feel satisfied to very satisfied care is compassionate. Specifically regarding talking to service users; the care delivered is focussed on meeting needs; service users are involved in and given opportunities to influence the running of the centre; there are systems in place that seek service user views; there are systems in place to respond to service user suggestions; and service users are kept informed regarding any changes.



One service user advocate was visiting during the inspection and she described her role. In summary, this role ensures service users have an independent person to talk to regarding anything that is important to them. The advocate was previously a manager in a day care setting therefore, if she has any concerns she was clear she would report this information to the most appropriate person.

In conclusion, the discussions with service users, staff and observation of care in this setting demonstrated the care is compassionate and the approach taken is effectively promoting service users' involvement. This ensures service users' needs, views and comments are being used shape the quality of services and facilities provided by the day care setting.

## 5.6 Areas for Improvement

No areas of improvement were identified in the inspection of the service user's involvement to ensure service users' needs, views and comments are being used shape the quality of services and facilities provided by the day care setting.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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## 5.7 Additional Areas Examined

### 5.7.1 Monitoring visits/Provider visits

The inspector reviewed the reports for the visits completed in March, April and May 2015. The March report was more comprehensive than the other two reports. This raised concern that the monitoring visits in April and May were not comprehensive enough. The reports are written by different people and it was clear the monitoring visitors do not have a standard approach to the quality of reporting on the conduct of this day care setting. Therefore there is a risk the monitoring visits will not if standards or regulations are not met. Furthermore the monitoring visits will not identify issues of concern regarding the conduct of the day care setting. A recommendation is made to the registered person that all monitoring visits to this setting must follow the same format and clearly report on the conduct of the day care setting.

## 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Darren Bradshaw, registered manager as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

### 6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Day Care Settings Regulations (Northern Ireland) 2007.

### 6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Day Care Settings Minimum Standards 2012. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

### 6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/ registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to [day.care@rqia.org.uk](mailto:day.care@rqia.org.uk) and assessed by the inspector.

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. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the service.

## Quality Improvement Plan

### Recommendations

<b>Recommendation 1</b>  <b>Ref:</b> Standard 17.10  <b>Stated:</b> First time  <b>To be Completed by:</b> 13 August 2015	The registered person should make appropriate arrangements to ensure all monitoring visits in this setting follow the same format. Reports must describe and clearly report on the conduct of the day care setting. Actions taken to ensure compliance with the minimum standards must be clearly stated in the action plans included in the report.		
	<b>Response by Registered Person(s) Detailing the Actions Taken:</b> All monitoring visits will be completed in the same format, reports will describe the conduct of the day care setting and completed in detail, ensuring action plans are included in the report.		
<b>Registered Manager Completing QIP</b>	Darren Bradshaw	<b>Date Completed</b>	08.07.15
<b>Registered Person Approving QIP</b>	Hugh McCaughey	<b>Date Approved</b>	09.07.15
<b>RQIA Inspector Assessing Response</b>	<b>Suzanne Cunningham</b>	<b>Date Approved</b>	<b>02.09.15</b>

*\*Please ensure the QIP is completed in full and returned to [day.care@rqia.org.uk](mailto:day.care@rqia.org.uk) from the authorised email address\**