

Unannounced Care Inspection Report 5 July 2018



Lakeland Community Care

Type of Service: Day Care Setting
**Address: The Navar, Creamery Street, Derrygonnelly,
BT93 6HN**
Tel No: 02868 8641899
Inspector: Angela Graham

www.rqia.org.uk

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 from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This day care setting has 14 places and provides care and day time activities for adults who are over 65. The setting is open Monday and Thursday.

3.0 Service details

Organisation/Registered Provider: Lakeland Community Care Ltd	Registered Manager: Patrick McGurn
Responsible Individual(s): Patrick McGurn	
Person in charge at the time of inspection: Janette Murphy, Senior Care Assistant	Date manager registered: Patrick McGurn – 26 March 2009
Number of registered places: 14	

4.0 Inspection summary

An unannounced inspection took place on 5 July 2018 from 09.30 to 15.30 hours.

This inspection was underpinned by the Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the establishment was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to staff training, supervision and appraisal, knowledge regarding adult safeguarding, infection prevention and control and risk management that promoted safe care. Regarding effective practice, examples of good practice were found in relation to audits and reviews and communication between service users, staff and other key stakeholders. Good practice was found regarding compassionate care in relation to the culture and ethos of the day care setting, dignity and privacy, listening to and valuing service users and taking account of the views of service users. Finally, good practice was found in relation to governance arrangements and maintaining good working relationships supporting well led care in the setting.

Areas requiring improvement were identified regarding staff training records and the Statement of Purpose.

Service users were asked to provide their views regarding the day care setting. Examples of some of the comments made by service users are “I really enjoy all the activities. We had a photographer in the centre talking about how to take good photographs”, “staff are the best you’ll meet”, “we get a three course dinner and we always get choice”, the dinner is lovely”, “coming to the centre is a big part of my week” and “the care is excellent”.

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

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1	1

Details of the Quality Improvement Plan (QIP) were discussed with Janette Murphy, Senior Care Assistant, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

4.2 Action/enforcement taken following the most recent care inspection dated 15 June 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 15 June 2017.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- The registration details of the day centre
- Written and verbal communication received since the previous care inspection
- The previous care inspection report and Quality Improvement Plan (QIP)
- Pre-inspection assessment audit

During the inspection, the inspector met with the senior care assistant, two care staff members, fourteen service users and a service user's representative. The senior care assistant was provided with ten questionnaires to distribute to service users/relatives for their completion. The questionnaires asked for service user and relatives' views regarding the service, and requested their return to RQIA. Nine service users' questionnaires were returned to RQIA. The content of the questionnaires is discussed in the main body of the report.

At the request of the inspector, the senior care assistant was asked to display a poster within the day centre. The poster invited staff to provide their views electronically to RQIA regarding the quality of service provision. No responses were received within the timescale requested.

The inspector requested that the senior care assistant place a 'Have we missed you' card in a prominent position in the day care setting to allow service users and relatives who were not available on the day of the inspection to give feedback to RQIA regarding the quality of service provision. No responses were received. An RQIA information leaflet 'how can I raise a concern about an independent health and social care service' was also provided to the senior care assistant to be displayed in the day care setting for service users.

The following records were examined during the inspection:

- Complaints and compliments records
- Accident/untoward incident records
- Staff roster
- RQIA registration certificate
- Staff supervision and appraisal records
- Records confirming registration of care staff with the Northern Ireland Social Care Council (NISCC)
- Elements of three service users' care records
- Sample of policies and procedures
- Sample of quality assurance audits
- Fire safety risk assessment
- Fire drill records
- Staff training information
- Minutes of three staff meetings
- Minutes of three service user meetings
- Three monthly monitoring reports

Eight areas for improvement were identified at the last care inspection. These were reviewed and assessment of compliance recorded as met.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

The inspector would like to thank the senior care assistant, service users, relative and staff for their support and co-operation throughout the inspection process.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 15 June 2017

The most recent inspection of the establishment was an unannounced care inspection.

The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 15 June 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 26 (4) (e) Stated: First time	The registered person shall make arrangements for persons employed in the day care setting to receive suitable training from a competent person in fire prevention.	Met
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. Review of staff training records confirmed that fire safety training was undertaken on 6 July 2017. Evidence was provided that further fire safety training was scheduled for 30 August 2018.	
Area for improvement 2 Ref: Regulation 17 Stated: First time	The registered person shall complete the annual report which is compliant with schedule 3 of the day care setting regulations. The report should be sent to RQIA with the QIP.	Met
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. A copy of the annual quality review report was forwarded to RQIA.	
Area for improvement 3 Ref: Regulation 15 Stated: First time	The registered person shall not provide care or services to a service user in the day care setting unless he is satisfied that where appropriate— (a) the needs of the service user have been assessed by a suitably qualified or suitably trained person; (b) the registered person has obtained a copy of the assessment; (c) there has been appropriate consultation regarding the assessment with the service	Met

	<p>user or a representative of the service user as appropriate;</p> <p>(d) the registered person has confirmed in writing to the service user that having regard to the assessment the day care setting is suitable for the purpose of meeting the service user's needs in respect of his day care; and</p> <p>(e) the day care setting is appropriate to the service user's needs.</p>	
<p>Area for improvement 4</p> <p>Ref: Regulation 16 (1)</p> <p>Stated: First time</p>	<p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. Review of three care records evidenced that this area for improvement had been addressed.</p>	Met
<p>Area for improvement 5</p> <p>Ref: Regulation 21 (1)</p> <p>Stated: First time</p>	<p>The registered person shall not employ a person to work in the day care setting unless —</p> <p>(a) the person is fit to work in the day care setting;</p> <p>(b) subject to paragraph (3), he has obtained in respect of that person the information and documents specified in Schedule 2;</p> <p>(c) he is satisfied on reasonable grounds as to the authenticity of the references referred to in paragraph 3 of Schedule 2 in respect of that person.</p>	Met

	<p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. Discussion with the senior care assistant confirmed that the organisation had not recruited staff since the previous care inspection. A recruitment policy and procedure was available on the day of inspection.</p>	
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
<p>Area for improvement 1</p> <p>Ref: Standard 23.3</p> <p>Stated: First time</p>	<p>The registered person must carry out a competency and capability assessment with any person who is given the responsibility of being in charge of the day care setting for any period of time in the absence of the registered manager.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. On the day of inspection a competency and capability assessment had been completed for the staff member who was in charge of the centre in the absence of the registered manager.</p>	
<p>Area for improvement 2</p> <p>Ref: Standard 3</p> <p>Stated: First time</p>	<p>The registered provider should provide each service user with an individual written agreement in line of Standard 3 of the Day Care Settings Minimum Standards, 2012, which, having regard to the assessment of need, confirms the day service is suitable and appropriate to his or her needs.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. The inspector reviewed three care records. An individual written agreement was available in the care records reviewed.</p>	

<p>Area for improvement 3</p> <p>Ref: Standard 4</p> <p>Stated: First time</p>	<p>The registered provider should ensure:</p> <p>(a) each service user has an up to date person-centred assessment of his or her needs. This should include, as appropriate:</p> <ul style="list-style-type: none"> • information on the service user's physical health; • mental health; • awareness and decision making skills; • emotional well-being; • capacity for the activities of daily living and self care; • if there are any dietary needs; • mobility; • communication and sensory functioning abilities; • lifestyle including their current living arrangements; • social needs including where relevant any cultural or spiritual needs. <p>(b) assessments are dated, signed by the service user, the member of staff completing it and the registered manager.</p> <p>(c) risk assessments must also be in place for each service user.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. Review of three care records evidenced that this area for improvement had been addressed.</p>		

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.

Discussion with the senior care assistant, staff, a relative and service users on the day of inspection confirmed that sufficiently competent and experienced persons were working in the centre to meet the assessed needs of service users. The senior care assistant confirmed the planned daily staffing levels for the day care centre, and that these levels were subject to regular review to ensure the assessed needs of the service users were met. A review of the staffing roster for weeks commencing 4 June 2018 until 5 July 2018 evidenced that the planned staffing levels were adhered to.

A competency and capability assessment had been completed for the staff member who was in charge of the centre in the absence of the registered manager. Review of the competency and capability assessment confirmed that the staff member had received training and was assessed as competent to undertake their role and responsibilities. Discussions with the senior care assistant confirmed that they were aware of the day care setting regulations and standards which they had used to guide practice.

Discussion with staff confirmed that mandatory training and other professional development training was provided. Review of a sample of staff training records concluded staff had received mandatory and other training relevant to their roles and responsibilities since the previous care inspection such as fire safety, infection prevention and control and basic food hygiene training.

A number of training records did not contain the signatures of those attending the training event, the qualification of the trainer or a record of the content of the training. This has been identified as an area for improvement under the standards.

Discussion with the senior care assistant, observation of service users' needs on the day of the inspection and inspection of three service users care records revealed there were no examples of restrictive practices being carried out in this setting. Furthermore there were no environmental restrictions that prevented service users from accessing or leaving the setting at any time.

The senior care assistant reported that no suspected, alleged or actual incidents of abuse had been identified since the previous inspection.

Safeguarding procedures were understood by staff members who were interviewed and who confirmed that they had the confidence to report poor practice, should they identify it. However, all expressed the view that practice throughout the centre was of a high quality and that team members worked well together.

The senior care assistant confirmed that a copy of Adult Safeguarding Prevention and Protection in Partnership, July 2015 and the associated Operational Procedures September 2016 were available to all staff.

Discussion with staff confirmed the importance of keeping service users safe in the setting and staff were aware of potential risks for each individual. Staff asserted that they had the right knowledge and information to prevent harm to the service users attending the setting.

The staff on duty on the day of inspection discussed the needs of the service users they were looking after. They gave a clear description of their needs and how those needs will be met. The staff stated their aim was for service users to enjoy their time in the day service by undertaking stimulating activities and for service users to feel comfortable and safe in the group environment. The staff confirmed that if they had any concerns regarding safe practice they would discuss this with their colleagues and/or the management team who they described as accessible and supportive. Staff confirmed service users are encouraged to give their views, opinions and preferences. In summary, the discussion with staff confirmed they were proactively promoting safe care for service users in this setting.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout. There were no obvious hazards to the health and safety of service users, visitors or staff. Fire exits were observed to be clear of clutter and obstruction. The review of fire drill records confirmed that a fire drill had been undertaken on 28 June 2018. Discussion with staff confirmed they were aware of the evacuation procedure.

The environment was observed during the inspection and there was evidence of infection prevention and control measures in place such as personal protection equipment which was available for staff, there was evidence that hand hygiene was promoted through notices, hand washing supplies and facilities. Staff training records confirmed that staff had received training in infection prevention and control in line with their roles and responsibilities. Observation of staff practice evidenced that staff adhered to infection prevention and control procedures.

The service users were asked if they felt safe in the day centre, the feedback from service users was they felt safe in this day care setting. Service users stated: "I feel very safe here; staff make sure I'm safe", "Janette has talked us through what to do if there was a fire in the centre" and "this is a safe place to come". The service users confirmed the furniture was comfortable and safe and they could make their way around the setting safely, lastly they confirmed there was enough staff to give them help if they needed it. When discussing fire safety service users knew they had to go outside if the fire alarm sounded and said staff would help them.

Staff were asked is care safe in this setting, they confirmed care was safe because they knew the service users' needs, staff training was provided and as a staff team they had the right skills to ensure care and support was safe and effective.

Nine service users returned questionnaires to RQIA post inspection. Six service users confirmed they were "very satisfied" and three service users confirmed they were "satisfied" regarding questions on "is care safe" in this setting. The service users confirmed there were enough staff to help them, they felt protected and free from harm, they could talk to staff if they had concerns and the environment was safe and clean.

The inspector met with a service user's representative. The representative confirmed that they were "very satisfied" with the safe care in this setting. They confirmed that their relative is safe and protected from harm, they could talk to staff, and the environment is suitable to meet their relative's needs.

On the day of the inspection Lakeland Community Care was found to be delivering safe care. There was positive feedback from fourteen service users and a service user's representative about the delivery of safe care in the day centre. Observations of care practices showed there was a culture of ensuring service users were safe and protected from harm.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff training, knowledge regarding adult safeguarding, infection prevention and control and risk management.

Areas for improvement

One area for improvement was identified in relation to staff training records.

	Regulations	Standards
Total number of areas for improvement	0	1

6.5 Is care effective?

The right care, at the right time in the right place with the best outcome.

Discussion with the senior care assistant established that staff in the day care setting responded appropriately to and met the assessed needs of the service users.

The inspector reviewed elements of three service users' care files. Care records examined contained an up to date assessment of needs, risk assessments and associated care plans. Care records also reflected the multi-professional input into the service users' health and social care needs and were found to be updated regularly to reflect the changing needs of the service user.

Records were stored safely and securely in line with data protection. Staff discussion confirmed they use these records to guide their practice and therefore recognised the importance of keeping records current and relevant. Overall the inspection found the settings management of service user records enabled staff to recognise service users' needs and respond to them effectively.

Care recording for every five attendances was being maintained in the three care records inspected. The review confirmed that service users and/or their representatives were encouraged and enabled to be involved in the review process, where appropriate. Discussion with staff confirmed that a person centred approach underpinned practice.

Service users spoken to during the inspection discussed they were very satisfied with the care and support they had been given in the Lakeland Community Care, they were satisfied staff asked them what they needed and their needs were met.

Discussion with service users confirmed they would speak to staff if they wanted advice or had a concern, furthermore staff stated they would speak to the registered manager if they had a concern regarding anything that was happening in the setting.

The senior care assistant confirmed that there were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users at appropriate intervals. Records were made available for inspection concerning audits of the environment, staff training, complaints, fire safety, supervision and appraisal and care records and evidenced that actions identified for improvement had been completed.

Evidence was provided to verify systems were in place to ensure effective communication with service users, their representatives and key stakeholders. These included pre-admission information, care reviews, service users and staff meetings.

Discussion with the senior care assistant and care staff confirmed that management operated an open door policy in regard to communication within the day care setting. Staff stated that there was effective teamwork and each staff member knew their role, function and responsibilities. Staff also confirmed that if they had any concerns, they could raise these with the manager. All grades of staff consulted clearly demonstrated the ability to communicate effectively with their colleagues and other health care professionals.

Discussion with the senior care assistant and review of records evidenced that service user meetings were generally held quarterly. The last meeting was held on 23 April 2018 and minutes were made available. There was information available to staff, service users and representatives in relation to advocacy arrangements.

Observation of practices evidenced that staff were able to communicate effectively with service users.

Nine service users returned questionnaires to RQIA post inspection. Six service users confirmed they were “very satisfied” and three service users confirmed they were “satisfied” regarding questions on “is care effective” in this setting. The service users also confirmed that they had got the right care, at the right time in the right place, staff knew their care needs, they were aware of their care plan and the care met their expectations.

The inspector met with a service user’s representative. The representative confirmed that they were “very satisfied” with the effective care. They stated that their relative receives the right care, at the right time, in the right place.

Service users spoken to during the inspection felt they were in the right place receiving support and care. They said “staff are always here to help me at any time”, “the centre meets all my needs”, “I am offered choice at all times including what I want to do in the centre” and “I have a meeting with my social worker and staff and we talk about my care here”.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to audits and reviews and communication between service users, staff and other key stakeholders.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

The senior care assistant confirmed that staff in the day care setting promoted a culture and ethos that supported the values of dignity and respect, independence, rights, equality and diversity, choice and consent of the service users.

Discussion with service users, staff and observation of activities and communication found examples of service users being treated with dignity and respect by staff. Examples of staff promoting service users' independence and preferences regarding activities was observed.

On the day of the inspection the service users spoke about activities they were enjoying, for example word games and discussion on topics of interest in the local newspapers. On the afternoon of the inspection the service users enjoyed a party with live music.

Service users reported they had taken part in a number of activities for example bingo, arts and crafts, photography classes, boccia and board games. They stated they like to remain in the day centre for activities during the cold weather and go for outings on the bus in the summertime.

An observation of the lunch time meal confirmed that service users were given a choice in regards to where they preferred to dine, food and fluid choices and the level of help and support requested. Staff treated service users with dignity and respect affording adequate time for service users to make decisions and choices and offered reassurance and assistance appropriately. The food appeared nutritious and appetising. Staff wore appropriate aprons when serving the lunch time meal. Staff interactions with service users were observed to be compassionate, caring and timely. During discussion staff presented as knowledgeable and informed regarding each service user's dietary needs and preferences. All service users spoken with confirmed that they were satisfied with the choice of meals served and that individual preferences were catered for if requested.

During the observation and discussions staff were observed checking service users were comfortable, that their needs and preferences were being met. If the staff identified someone needed additional support they sensitively and discretely got their attention and accompanied the service user to where they could get more individualised care and privacy. Overall staff were observed supporting service users in a compassionate way, encouraging service users to be involved in their care and promoting their independence.

Service users were asked if care in the setting was compassionate and if they were encouraged to be involved in the running of the day care setting. The service users confirmed staff had asked their opinion regarding meals, the menu planning, activities and the environment. Service users also confirmed they felt staff had involved them in what they did in the day care setting. Service users' comments included "I love attending the day centre", "I enjoy doing activities and feel staff look after us well" and "I enjoy the company and staff are very good to me".

Observation of staff members' responses and communication with service users during the inspection showed they knew how to put service users at ease, support them and took time to ascertain their choices.

The staff were asked to describe their delivery of compassionate care. Staff described they used observation and communication to ensure they were informed regarding service users changing needs, they encouraged involvement at the level that each service user is comfortable with and encourage all service users to have a say, particularly those who are less vocal. Staff clearly identified they need to listen to service users and provide effective care with kindness and respect.

Nine service users returned questionnaires to RQIA post inspection. Six service users confirmed that they were "very satisfied" and three service users confirmed they were "satisfied" regarding questions on "is care compassionate" in this setting. The service users also confirmed that they were treated with kindness, respected and their dignity was maintained, staff informed them about their care and supported them to make decisions about their care.

The inspector met with a service user's representative. The representative spoke positively of the service, care delivered and the staff team. Some of the comments made by the representative were "I think the care is very good", "my aunt is very happy coming to the centre", "staff communication is good" and "staff are respectful, kind and helpful".

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the culture and ethos of the day care setting, dignity and privacy, listening to and valuing service users and taking account of the views of service users.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.7 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

The certificate of registration issued by RQIA was displayed in a prominent position in the day care setting. A certificate of public liability insurance was current and displayed.

The Statement of Purpose for the day care service was reviewed (and updated) by the provider on 6 April 2018. The inspector reviewed the Statement of Purpose. The Statement of Purpose needs to be reviewed to include all relevant information as specified in Schedule 1 of

The Day Care Setting Regulations (Northern Ireland) 2007. This has been identified for an area for improvement under the regulations.

Discussion with staff confirmed there was a range of policies and procedures in place to guide and inform staff, they described they were kept in the office and were easily accessible by staff.

Discussion with staff confirmed that they knew how to respond to a range of situations such as responding to issues of dissatisfaction or an adult safeguarding concern. The staff confirmed that there is good communication across the team and clear working together practices. They described the management team as supportive and they knew they could speak to them for guidance or advice. All grades of staff were clear who they report to and what to do if they had a concern about a staff member or service user. Discussions with staff also confirmed that management were responsive to any suggestions or concerns raised.

Discussion with the senior care assistant and care staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. A review of supervision records confirmed that supervisions were completed for staff on a quarterly basis, or more frequently, and staff appraisals were completed annually. Discussion with staff confirmed that they had received supervision and appraisal accordingly.

Discussion with the senior care assistant confirmed that staff meetings were held generally quarterly, and records verified this. The last meeting was held on 29 March 2018 and minutes were available. Previous staff meetings had been undertaken on 21 December and 10 September 2017. The senior care assistant confirmed that the minutes of staff meetings were made available for staff to consult.

The inspector discussed the monitoring arrangements under Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. The Regulation 28 quality monitoring visits had been undertaken monthly. A monitoring visit had been undertaken on 2 July 2018. Three monitoring reports were reviewed from May to July 2018. The monitoring officer reported on the conduct of the day care setting.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

The complaints record was inspected and this showed no complaints had been recorded from 15 June 2017 to July 2018. No complaints had been recorded however, discussion with the staff confirmed they were aware of how they should respond to a complaint or area of dissatisfaction. Discussion with service users confirmed they would speak to the staff or the manager if they were dissatisfied or were concerned about their day care experience.

The service users were asked if the service is well led, they said they were very satisfied that it was. Service users gave examples such as “staff have the centre running like clockwork”, “and “the centre is well run”. The service users confirmed that staffing was sufficient and they felt assured that the monitoring officer was reviewing the standard of care provided in the setting.

The staff were asked what their opinion was regarding effective leadership in the setting, they described they work well together, the manager had an open door and they had experienced him as approachable and they felt he had empathy which was important in their work.

Nine service users returned questionnaires to RQIA post inspection. Five service users confirmed they were “very satisfied” and four service users confirmed they were “satisfied” regarding questions on “is care well led” in this setting. They also confirmed they knew who was in charge of the setting at any time, the service was well managed, their views were sought about their care and quality of service and they knew how to make a complaint.

The inspector met with a service user’s representative. The representative confirmed that they were “very satisfied” that the service was well led.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance arrangements and maintaining good working relationships supporting well led care in the setting.

Areas for improvement

One area for improvement was identified in relation to the Statement of Purpose.

	Regulations	Standards
Total number of areas for improvement	1	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Janette Murphy, Senior Care Assistant, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 the day care setting. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

Action required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007

<p>Area for improvement 1</p> <p>Ref: Regulation 4 (1)</p> <p>Stated: First time</p> <p>To be completed by: 31 October 2018</p>	<p>The registered provider must submit a revised Statement of Purpose that includes all relevant information as specified in Schedule 1 of The Day Care Setting Regulations (Northern Ireland) 2007.</p> <p>Ref: 6.7</p>
	<p>Response by registered person detailing the actions taken: A new statement of purpose has been sent for all centres on RQIA Inspectors guidance.</p>

Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012

<p>Area for improvement 1</p> <p>Ref: Standard 21.8</p> <p>Stated: First time</p> <p>To be completed by: 31 October 2018</p>	<p>The registered person should maintain a staff training record that clearly details the training provided to the staff. The record should specify:</p> <ul style="list-style-type: none"> • The names and signatures of those attending the training event; • The date(s) of the training; • The name and qualification of the trainer or the • The name and qualification of the trainer or the training agency; and • Content of the training programme. <p>Ref: 6.4</p>
	<p>Response by registered person detailing the actions taken: Training records have been amended to include the above details.</p>



The **Regulation** and
Quality Improvement
Authority

The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9536 1111

Email info@rqia.org.uk

Web www.rqia.org.uk

 [@RQIANews](https://twitter.com/RQIANews)