

Inspection Report

27 July 2024



Mainstay DRP

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: Mainstay DRP	Registered Manager: Mrs. Nicola Trainor
Responsible Individual (Acting): Mr. Patrick Moore	Date registered: 20 March 2018
Person in charge at the time of inspection: Registered Manager	
Brief description of the accommodation/how the service operates: This is a Day Care Setting that provides day care for service users who have a learning disability living in the South Eastern Health and Social Care Trust (SEHSCT), Southern Health and Social Care Trust (SHSCT) and Belfast Health and Social Care Trust (BHSCT) areas. The setting's registration allows for up to 80 service users to attend the day care setting daily to receive care and support and take part in day time activities. The setting is open Monday to Friday.	

2.0 Inspection summary

An unannounced inspection was undertaken on 26 July 2024 between 10.30 a.m. and 4.00p.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.

It was positive to note that service users benefited from a well led service. There was a clear leadership and management structure in place which helped to ensure staff were clear about their role and responsibilities.

Evidence of good practice was found in relation to the management of Dysphagia, service user involvement and activity programmes.

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.

The inspector would like to thank the manager, service users, visiting professional and staff for their help and support in the 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 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

Comments received included:

Service users' comments:

- "I enjoy coming here."
- "It's great."
- "The staff are good."
- "I have my review next week."
- "The staff are the best. They help me. I would talk to them if I was worried. I enjoyed the activity today – the dancing was brilliant."

Staff comments:

- “I love working here. I see the service users really improving.”
- “I’m very well supported. If I had any concerns, I would talk to the manager or deputy. I know they would be dealt with.”
- “The range of activities is amazing. The service users are treated so well.”

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:



- 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?
- Do you feel safe when you are at the Centre?

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

- “All staff are more than good to me.”
- “Staff go above and beyond to ensure my needs are met and are so kind and caring to me.”
- “The manager is outstanding making sure day care is a great place for me to go to.”
- “Everything is good and I’m very happy.”
- “Makaton classes should be started up again for staff to learn and service users to keep up their skills.”
- “Mainstay DRP is a great centre but due to funding constraints, there is no transport for outings or trips to the local swimming pool.”

A number of staff and visiting professionals responded to the electronic survey. The respondents indicated that they were ‘very satisfied’ or ‘satisfied’ that care provided was safe, effective and compassionate and that the service was well led. Written comments included:

- “Mainstay DRP Community Hub is a fantastic service. Very well run, plenty of activities & opportunities for all the service users, very forward thinking management, always thinking of new activities/ current events that the service users always enjoy. All service users that attend all seem very happy & state they love to come.”
- “Mainstay DRP Community Hub is a beautiful, cool place to be. The entire staff team are always so welcoming. The decor and the finishing touches to the building create a young, fresh, energetic vibrancy. It is a very unique place. The service users smile, their body language and their engagement with staff and each other only suggests how much of a happy place the Community Hub is. There is so much choice and opportunities within the programmes. An outstanding place in the community. A shining, happy beacon of light.”
- “I started working for Mainstay DRP day care in xxxxxx and loved it. Mainstay DRP are all about the service users, I’m glad I started there.”

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 18 April 2023 by a care inspector. No areas for improvement were identified.

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). The day care setting's annual Adult Safeguarding Position report had been formulated and was reviewed and found to be satisfactory.

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 Procedure.

The day care setting retained records of any referrals made to the Health and Social Care Trust in relation to adult safeguarding. A review of records confirmed that these had been managed appropriately.

A review of incidents notified to RQIA indicated these had been managed appropriately.

Staff were provided with training appropriate to the requirements of their role. The manager reported that none of the service users currently required the use of specialised equipment for transfers. They were aware of how to source such training should it be required in the future.

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.

The manager advised none of the service users currently required support with medication. The Mental Capacity Act (Northern Ireland) 2016 (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 who spoke with the inspector demonstrated their understanding that service users who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the MCA.

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's Restrictive Practice register was reviewed. This was reflective of the current restrictions in place for service users. Advice was given to the manager to ensure details of regular reviews of these restrictions were recorded.

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 9 January 2024. Fire risk assessments for the day care setting were available for the inspection and had been completed on 1 November 2023. There was evidence that identified actions had been followed up. 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. The meetings were chaired by a service user and enabled service users to discuss what they wanted from attending the day care setting and any activities they would like to become involved in. Some matters discussed included:

- How to make a complaint
- Any special visitors they would like

Some service users' comments included:

- "I like the way the Community Hub is managed."

- “I would like new transport.”

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.

The manager and mealtime coordinators had implemented a safety pause at mealtimes. Eating, Drinking and Swallowing (EDS) communication was in place between all day care setting staff regarding the serving of service users' meals and drinks. It was also positive to note the use of personal place mats for service users to support them to eat and drink safely and maintain their health and wellbeing. An annual Dysphagia Competency assessment for staff was in place to regularly measure their skills and knowledge in this area.

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, three-day 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 along with current certificates of public and employers' liability insurance.

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 a system in place for managing instances where a service user did not attend the day centre as planned. This included a system for signing in and out the service users who attend.

The internal environment of the day care setting was maintained to a good standard of cleanliness and decor.

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. Nicola Trainor, Registered Manager, as part of the inspection process and can be found in the main body of the report.



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