

Announced Care Inspection Report 1 October 2020



Mourne Stimulus

Type of Service: Day Care Service

Address: 1 Council Road, Kilkeel, BT34 4NP

Tel No: 02841765897

Inspector: Jim McBride

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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

1.0 What we look for



2.0 Profile of service

This is a day care setting which is registered with RQIA to accommodate a maximum of 37 people with a learning disability. The centre endeavours to integrate the attenders as far as possible into the life of the local community and encourage them to use the full range of social, leisure and commercial facilities in the area. Develop the social skills and educational abilities of attenders as fully as possible. Provide specific training where appropriate to enable attenders to become involved in employment outside the day centre.

3.0 Service details

Organisation/Registered Provider: Mourne Stimulus Responsible Individual: Cynthia Cranston	Registered Manager: Melanie Nolan
Person in charge at the time of inspection: Day care Worker	Date manager registered: 27 March 2009

4.0 Inspection summary

An announced inspection took place on 1 October 2020 from 09.00 to 11.45.

At the request of the people who use the day care services, Mourne Stimulus has requested that RQIA refer to these individuals as 'attenders'.

Due to the coronavirus (COVID-19) pandemic the Department of Health (DOH) directed RQIA to continue to respond to ongoing areas of risk identified in services. The service has not had a primary inspection since the 2 September 2019.

In response to this information RQIA decided to undertake an inspection of the service. To reduce any risk this inspection was carried out using an on-site inspection approach with socially distanced guidance in place.

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

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

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

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

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

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

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

5.0 How we inspect

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

During our inspection we focused on meeting with the attenders and staff to find out their views on the service.

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

- Recruitment records specifically relating to Access NI and NISCC registration.
- Covid-19: guidance for Day care. Provided by RQIA for centres planning to reopen

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

“Tell us” cards were provided for attenders and those who visit them the opportunity to contact us after the inspection with their views. No responses were received prior to the issue of the report.

A poster was provided for staff detailing how they could complete an electronic questionnaire. 6 responses were received prior to the issue of the report; responders were either very satisfied or satisfied with the service.

Comments received:

- “Fantastic team to work with.”

10 questionnaires were also provided for distribution to the attenders and their representatives; 3 responses were returned and comments are detailed below:

Comments:

- “I am very well cared for.”
- “The staff are helpful and pleasant.”
- “I love my day care.”
- “I’m very secure and cared for.”
- “My son loves going to the centre. I am very satisfied they are keeping him safe.”

RQIA information leaflets ‘How can I raise a concern about an independent health and social care service’ were also provided to be displayed appropriately.

Attender's comments during inspection:

- "It's good to be back."
- "Staff are good."
- "Great activities and varied."
- "I enjoy the centre."
- "I missed it here so it's good to be back."
- "I enjoy the company."

Staff comments during inspection:

- "We built up a great bond with relatives during closure."
- "Good promotion of choice."
- "Covid-19 training was comprehensive."
- "I feel safe and secure here."
- "Good supervision and the manager always has an open door policy."
- "Good effective communication with all staff."
- "Good staff flexibility."
- "We are very flexible when offering daily choices of activities."

During the inspection we met with two attenders, the person in charge and two staff, and whilst socially distancing observed other attenders during their activities.

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

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

6.0 The inspection

There were no areas for improvement from the last care inspection.

6.1 Inspection findings

Discussion with the person in charge identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 and Standard 11 relating to Access NI. We reviewed documentation in staff files in relation to pre-employment checks which provided assurances that Access NI checks were completed before commencement of employment.

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

Service quality:

A number of quality monitoring reports were available for review and we noted some of the comments from various stakeholders:

Attendees:

- "I like it here."
- "I am asked about what I want to do."
- "I enjoy doing the things I enjoy."

Staff:

- "All attendees have a part to play, involvement is important."
- "We need to ensure attendees have the right choices for them."
- "Training is helpful."

Relatives:

- "I'm really happy the centre has reopened."
- "The staff team were amazing during lock down."
- "The staff team are really committed."

HSC Trust professionals:

- "The staff team have been really creative."
- "I have no issues or concerns."
- "The staff are very knowledgeable."

Care planning and review:

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

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

We noted some of the positive comments made by attendees and relatives during their 2019 annual review:

- "I'm happy with the service and I enjoy Mourne stimulus."
- "***** receives excellent services at the centre."
- "I have no complaints."
- "I'm happy with all the activities ***** receives."

Areas of good practice

Areas of good practice were identified in relation to the completion of checks with Access NI in conjunction with HR Department and staff registrations with NISCC.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

Covid-19

We spoke with the staff who were aware and knowledgeable in relation to their responsibility related to Covid-19. Staff stated they were aware of the guidance in relation to use of Personal Protective equipment (PPE) for activities that brought them within two metres of attendees.

Staff were also aware of the need to replace PPE between attendees and how to appropriately dispose of used PPE.

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

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

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

We reviewed templates that indicated that attendees and staff have their temperatures monitored in accordance with the guidance. Monitoring records also involved asking about and looking out for the following symptoms, fever of 37.8C or above, cough, loss of or change in sense of smell or taste.

Hand sanitisers have been placed in different areas throughout the centre for attendees, staff and visitors to use to ensure good hand hygiene.

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

The staff on duty demonstrated that they had a good understanding of the donning and doffing procedures and were observed to be using PPE appropriately. The staff discussed the procedures describing how both they and senior staff spot check the use of PPE by staff during

the day. Spot checks on staff practice are undertaken to ensure they are fully compliant with current guidance.

The procedures and guidance in place show that:

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

It was positive to note that staff were working well together to support the best outcomes for attenders, in a caring manner, whilst being caring and compassionate to both attenders and their relatives.

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

Areas of good practice

- Dissemination of information to staff
- Monitor staff practice
- IPC policies and procedures
- Infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19.
- Staff training and guidance.
- Reopening preparation and guidance.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

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



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