

Unannounced Care Inspection Report 2 September 2019



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

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 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	Registered Manager: Melanie Nolan
Responsible Individual: Cynthia Cranston (Awaiting Registration)	
Person in charge at the time of inspection: Development coordinator	Date manager registered: 27 March 2009
Number of registered places: 37	

4.0 Inspection summary

An Announced inspection took place on 2 September 2019 from 09.15 to 14.30.

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

As a public-sector body RQIA have 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 services have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted.

Evidence of good practice was found in relation to staff training, risk management. Further areas of good practice were also noted in relation to care records, communication between attenders, staff and other key stakeholders, the culture and ethos of the day care setting, listening to and valuing attenders and taking account of their views. In addition, good practice was also observed in regard to governance arrangements, staff supervision and appraisal, quality improvement and maintaining good working relationships.

There was evidence identified throughout the inspection process that the day centre promotes attenders human rights; this was evident in relation to the areas of consent, autonomy, equality, decision making, privacy, confidentiality and attenders involvement.

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

Staff comments:

- "Good supervision and appraisal."
- "Staff training is excellent and ongoing."
- "The manager is very supportive."
- "Any training identified is provided."
- "We always provide choice to attenders."
- "We treat people with dignity and respect."
- "We focus on positive outcomes for attenders."

The findings of this report will provide the establishment 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 development coordinator, 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 the inspection a range of information relevant to the service was reviewed. This included the following records:

- The registration details of the day centre
- Information and correspondence received by RQIA since the last inspection
- Unannounced care inspection report dated 22 October 2018.

During the inspection, the inspector met with three day care staff. Introductions were made to some attenders while walking around the setting. Individual interaction was difficult due to communication difficulties; however attenders appeared to be happy and settled in their individual activities with the support of staff.

Ten service user and/or relatives' questionnaires were provided for distribution; eight service users/relatives' questionnaires were returned to RQIA within the timeframe for inclusion in this report.

Comments:

- "Wonderful staff and facility. The staff go over and above for those in their care, priceless."
- "They give my daughter first class care I could not fault them."
- "I'm very happy at the moment."
- "The centre is perfect for me."
- "I'm very happy with the care and attention my ***** receives. The carers are respectful; they inform me of all activities undertaken."

At the request of the inspector, the manager 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; two responses were received. The respondents indicated that they were satisfied that the care provided in the day centre was safe, effective, compassionate and well led.

A range of documents relating to the service were reviewed during the inspection and are referred to within the body of the report.

The inspector would like to thank the attenders and staff for their support and co-operation throughout the inspection process.

6.0 The inspection

6.1 Inspection findings

6.2 Is care safe?

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

The inspector reviewed the day care setting's systems in place to avoid and prevent harm to attenders which included a review of staffing arrangements in place within the day centre.

There were arrangements in place to ensure that staff are registered with the NISCC. Information regarding registration details and renewal dates are maintained by the centre advising when a staff member's renewal date is pending. The person in charge confirmed that all staff are currently registered with NISCC. Records were available for review.

The person in charge described the staffing levels which have been assessed as necessary to provide a safe service in the setting. Assurances were provided to the inspector that sufficiently qualified, competent and experienced persons are working at all times to meet the assessed needs of the attenders, taking into account the size and layout of the premises, the number of attenders accommodated, fire safety requirements and the statement of purpose. A review of a sample of the staffing roster evidenced that the planned staffing levels were adhered to. The rota information evidenced that attenders had a core staff team to help provide them with continuity of care and develop positive relationships. This can have a positive impact on the attenders' experience of a dignified service.

The setting's training record demonstrated that there was an ongoing programme of mandatory training for staff, relevant to their roles and responsibilities, which will assure staff know how to keep service users safe. There was evidence that compliance with completing mandatory training was routinely monitored by the manager and any training now due for update was being followed up with the staff by the manager. Staff feedback regarding training was positive and they confirmed that the manager proactively encouraged and supported staff to access training opportunities over and above mandatory requirements. Examples of additional training included: MAPA, eating and drinking, autism awareness, and diabetes awareness.

The development of a learning culture in the agency which promotes good practice will contribute to better quality of care and improved outcomes for attenders.

The day care setting's governance arrangements in place to highlight and promote the identification of and management of risk were inspected. All incidents and accidents were recorded on an electronic system which are reviewed and audited by the manager, to ensure follow up of any outstanding actions, and the centre.

Discussion with the person in charge and review of sample of records evidenced that there is a robust and transparent system for recording, reporting and investigating any incidents and accidents in a timely manner. This includes consideration of any lessons learnt.

Observation of and discussion with staff evidenced that they were very knowledgeable regarding each attender and the support they required in order to ensure their safety. In addition, discussions with staff evidenced that they had an understanding of the management of risk, and an ability to balance assessed risks with the wishes and human rights of individual attenders.

Discussion with the staff confirmed that there was a clear pathway for staff to follow in relation to referring any safeguarding concerns to the appropriate professionals. This reflected staff awareness of their safeguarding roles and responsibilities and how they are supported to report concerns through existing management arrangements. This helps to ensure that appropriate and timely action is taken if service users' rights are at risk of being breached. The inspector was advised of the arrangements for the adult safeguarding position report which is due to be completed by 31 March 2020.

Discussions with the staff also confirmed that they were aware of their obligations in relation to raising concerns with respect to attenders' wellbeing and poor practice, and were confident of an appropriate management response. They were aware of the centres whistleblowing policy if they could not resolve their concerns locally but indicated that they would be unlikely to need this due to the transparent working relationships that existed within the team.

The person in charge reported that there were no restrictive practices in place within the setting.

Records showed a weekly alarm test was carried out. The last fire evacuation drill was undertaken on 22 March 2019. A fire risk assessment had been undertaken in May 2019 and is due review 2020.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff training and risk management.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.3 Is care effective?

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

The inspector reviewed the day care setting's arrangements for appropriately responding to and meeting the needs of people who use the service.

Information relating to the nature and range of services provided was outlined in the Statement of Purpose.(2019) Observations throughout the inspection confirmed that the day care setting was providing care in accordance with their Statement of Purpose.

The inspector reviewed elements of five attenders' care files; they contained referral information, care agreements, transport assessments, manual handling assessments, individualised risk assessments, general assessment and care plans. The inspector noted that assessments and care plans were comprehensive, person centred, holistic and concisely reflected the needs of the attenders. They also gave consideration to the attenders' level of awareness, ability to participate and consent in the assessment and care planning process and any specific communication needs.

The records viewed were signed, as appropriate, by the attenders and/or their next of kin, evidencing consultation and agreement with arrangements in place.

Discussion with the person on charge and review of records confirmed there were systems in place to review placements within the centre and ensure that they are appropriate to meet their health and social care needs. In relation to the records selected for inspection, the reviews were conducted within the required timescales; there was evidence of annual care reviews in partnership with attenders and/or their relatives and community keyworkers; these provided positive feedback from attenders and their representatives with regard to the day care service. It was noted that minutes of meetings were not always supplied by the local trust, however this was discussed and suggestions made as to the retrieval of minutes from the trust. This will be actioned by staff.

Attenders care records were noted to be well organised and regularly audited. Records were stored safely and securely in line with data protection requirements.

Staff who spoke with the inspector clearly demonstrated the knowledge, skills and experience necessary to fulfil their roles and responsibilities. They were knowledgeable about the centre's philosophy of care, promotion of human rights and risk management. Staff described how they observe attenders, noting any change in dependency or mood and proactively take appropriate measures to promote/ensure the safety and wellbeing. They also demonstrated knowledge of attenders' preferences regarding daily activities.

Observation of attenders' interactions with staff evidenced that they were empowered to express their views routinely on a day to day basis

Areas of good practice

There were examples of good practice found throughout the inspection in relation to care records and reviews, communication between attenders, 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

6.4 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.

On the day of inspection the inspector found that an ethos of dignity and respect, independence, rights, equality and diversity was reflected by the expression of staff attitudes towards attenders and service delivery.

Staff were observed informing attenders that the inspection was taking place and they encouraged attenders to interact with the inspector.

Care records reflected that a record was kept of each attender's involvement and progress at the centre and entries were made in proportion to the frequency of attendance of the individual.

Staff approaches and responses to attenders were noted to be caring, cheerful and compassionate. Staff acknowledged that attenders require varying degrees of support with their care needs, and that attender's independence should be promoted in a discreet manner. The inspector observed staff discreetly responding to attenders who required such assistance in regards to eating lunch and participating in activities. In addition, staff demonstrated awareness of their responsibilities and requirements to ensure attenders confidentiality and consent.

Atteners and relatives are advised of what they can do if they are not happy with the service within the Statement of Purpose and Service User Guide. The Service User Guide also provides information regarding what they should expect from the service, which promotes a rights, based approach that empowers people.

Two staff facilitate a "let's talk advocacy group" meeting and attenders are given a choice whether to attend. A review of a sample of minutes from the last two meetings evidenced attenders discussing the following:

- Dols easy read document
- Annual show
- Outings
- Activities
- Holidays
- Health matters
- Food review
- Complaints
- Choir
- Sensory garden.

The setting also facilitates staff meetings and evidence of the past meetings show staff discussing the following:

- RQIA
- NISCC
- Human rights Dols
- Data protection
- Eating and drinking
- Attenders updates
- Training
- Advocacy.

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, listening to and valuing attenders and taking account of their views.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 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 inspector sought to assess the day centre’s leadership, management and governance arrangements to meet the assessed needs of attenders.

The Statement of Purpose and the Service User’s Guide for the day care service had been reviewed and updated by the registered manager.

The day centre is managed on a day to day basis by the manager with the support of day care workers. There was a clear organisational structure and the registration certificate was up to date and displayed appropriately.

An open and transparent culture was evidenced with the reporting of incidents and accidents. Staff felt able to raise issues with the manager, a learning culture was promoted and best practice shared.

The complaints record was reviewed and evidenced that no complaints had been received since the last inspection.

The inspector confirmed that there are a range of policies and procedures in place to guide and inform staff. They are easily accessible to staff.

Discussions with the staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. This included the availability of continuous update training alongside supervision/appraisal processes, an open door policy for discussions with the management team and observation of staff practice. A review of a sample of records verified that staff received regular supervision sessions and annual appraisals.

The inspector discussed the monitoring arrangements in compliance with Regulation 28 of The Day Care Settings Regulations (Northern Ireland) 2007. The Regulation 28 monthly quality monitoring visits had been undertaken monthly and demonstrated a good understanding of the setting.

A sample of reports viewed for February 2019 to August 2019 provided evidence that the visits included engagement with attenders, staff, relatives and HSC trust staff; a review on the conduct of the day care setting and development of action points and review of previous action points. The inspector noted a number of comments received from, attenders, staff and others.

Attenders:

- “I like spending time with my friends.”
- “I love being in the choir.”
- “I like being listened to.”
- “I like my family to coming to the centre for my meetings.”

Staff:

- “Developing new skills is necessary.”
- “Good preparation for reviews.”
- “Good opportunities for attenders to grow and develop.”
- “Objectives are person centred and relevant.”

Relatives:

- “It’s nice to hear about everything my ***** does in the centre and listen to the plans for the coming year.”
- “My ***** enjoys coming to the centre.”
- “It gives my *** and interest outside the home.”
- “I can tell **** is happy as he always look forward to the bus coming.”

HSC Trust staff:

- “The centre is very welcoming.”
- “The centre offers positive structures to attenders daily and is an important part of their week.”
- “Objectives are person centred.”
- “The staff team support me in my role.”

The annual report which provides a review of the quality of care for 2018/2019 was being reviewed. This will contain all elements as required in Schedule 3 of The Day Care Settings Regulations (NI) 2007.

The inspector noted that both attenders and carers were given the opportunity to comment on some of the following:

Attenders:

- How do you feel about the service being provided at Mourne Stimulus?
- Do you like all the activities which are offered at Mourne Stimulus?
- Thinking about all the activities you do at MSDC, do they provide you with a fun filled and enjoyable day?
- Are you happy with the new timetable of activities?
- Are you involved in the planning of your daily activities?
- Are you happy with the dinners at Mourne Stimulus?
- Are you happy coming to the centre on the bus / taxi?
- Is the bus driver and taxi driver friendly and helpful?
- Is the bus escort friendly and helpful?
- Do you feel safe when using the bus or taxi?
- Are you happy with the amount of days you come to Mourne Stimulus?
- Are you happy in your group room?
- Do you feel staff help you when you need it?
- Do you feel staff listen to you?
- Are you happy with the support you get from the Manager and Staff?

Some comments included:

- I like things the way they are.
- I can't cope with to many changes.
- I am happy the way things are.
- I am happy at Mourne Stimulus.
- I am happy enough.
- I am happy the way things are at Mourne Stimulus.
- I'm Happy.
- I would like to go to the Garden Project.

Carers:

- Do you know who the day care worker is for your son / daughter?
- Does your Son or Daughter like their Day Care Worker?
- Is their Day Care Worker polite and respectful?
- Do they respect your Son or Daughter's privacy or dignity?
- Are you satisfied with the total days allocated to you son / daughter?
- Do you feel your son /daughters Care plan is effective and meets their individual needs?
- Do you feel you son or daughter's views and wishes are respected and listened too?
- Do you feel your son or daughter is kept safe within their programme of care?
- Is your son / daughters care compassionate?
- Has the Monthly Monitoring Officer been in contact with you?
- After receiving the complaints procedure last year, do you feel you could make a complaint?
- If you've had any concerns / complaints were they dealt with appropriately?

Comments included:

- It was discussed that **** might get another day at some stage, I think Thursday was mentioned; however I am well pleased that he has the 2 days already.
- ***** says she would like more days at the centre.
- ***** is a gentleman and so approachable.
- I find all the workers excellent, Kind and caring - could not ask for better. Thank you I am happy with all aspects of care.
- ***** Very happy with his Day Care Worker. No Complaints.
- Happy with drivers and helpers.
- In regards to events and permission slips we would like more notice, but we are very happy with the care and attention that ***** receives in Mourne Stimulus and all the hard work from the staff.
- Mourne Stimulus is a fantastic day centre and the manager and staff are second to none. The attenders are superbly looked after and I am in awe of the care given.
- No Complaints about any part of Mourne Stimulus. Management, Staff and helpers are all first class. Thanks you to all, we would be lost without you.
- I find all the staff, Manager, care team and office staff very friendly, helpful and caring. I'm so happy I can leave my son knowing he is being cared for and protected in a very friendly place. It's a 5 star day centre.

The inspector discussed arrangements in place that relate to the equality of opportunity for attenders and the importance of the staff being aware of equality legislation whilst recognising and responding to the range of diverse needs. Records confirmed that this was addressed with staff through their training, supervision and appraisal process. In addition, it was confirmed that the day centre had not received any complaints with respect to equality issues from attenders and/or their representatives.

The inspector noted that day centre collects equality information in relation to attenders, during the referral and assessment process. The data is used effectively and with individual attenders' involvement when a person centred care and support plan is developed.

Some of the areas of equality awareness identified during the inspection include:

- Effective communication
- Attenders involvement
- Adult Safeguarding
- Equity of care and support
- Individualised person centred care
- Individualised risk assessment
- Disability awareness

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance arrangements, staff supervision and appraisal, quality improvement and maintaining good working relationships.

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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