

Inspection Report

28 October 2021



Mourne Stimulus Day Centre

Type of service: Day Care Setting
Address: 1 Council Road, Kilkeel, BT34 4NP
Telephone number: 028 4176 5897

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Mourne Stimulus Day Centre	Registered Manager: Ms Melanie Nolan
Responsible Individual: Mrs Cynthia Cranston MBE	Date registered: 27/03/2009
Person in charge at the time of inspection: Ms Melanie Nolan	
Brief description of the accommodation/how the service operates: 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.	

2.0 Inspection summary

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

An unannounced inspection was undertaken on 28 October 2021 between 09.00 a.m. and 11.45 a.m. by the care inspector. This inspection focused the Northern Ireland Social Care Council (NISCC) registrations, Adult Safeguarding, notifications, complaints and whistleblowing, Deprivation of Liberty Safeguards (DoLS), restrictive practice, dysphagia arrangements, monthly quality monitoring, Covid-19 practice and guidance.

Good practice was identified in relation to appropriate checks being undertaken before staff were supplied to the setting. Good practice was also found in relation to the system in place for disseminating Covid-19 related information to staff.

There were good governance and management oversight systems in place.

The environment was observed during the inspection and there was evidence of infection Prevention and Control (IPC) measures in place such as PPE which was available for staff.

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

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.

The inspection focused on:

- discussions with the attenders and staff to find out their views on the service
- reviewing a range of relevant documents and policies and procedures relating to the day care setting's governance and management arrangements.

4.0 What people told us about the service

We spoke to attenders and staff including the manager. We provided a number of questionnaires to attenders and/or relatives to facilitate them to provide comments on the quality of service provision. Staff were also provided with an electronic survey. We observed a variety of activities and good communication between staff and attenders. Attenders present were observed involved in a range of activities including one to one work with staff. It was good to note from discussions and review of documents the active relationships the staff had built up with relatives during some difficult times.

Comments received during the inspection process due to the communication issue with some attenders we prompted the discussions with individuals:

Attenders' comments:

- "Happy to be back."
- "Staff are good."
- "I enjoy the centre."
- "Good activities."
- "I like the centre."

Staff comments:

- "We work closely together."
- "A good positive induction."
- "Staff communicated well with each other."
- "Staff were very supportive to me."
- "A good supportive manager and staff."
- "My training is completed to date."
- "A friendly and supportive environment."
- "A good range of activities in place for attenders."

Returned questionnaire comments:

- “We are so grateful to see our centre open again, where our children are looked after and given a purpose in the community.”
- “An excellent entre with wonderful caring staff, who go above and beyond for our loved ones.”

No staff comments were received from the electronic survey prior to the issue of this report.

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 inspection to Mourne Stimulus Day Centre was undertaken on 1 October 2020 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 attenders 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 outlines the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC). The ASC annual report was available for review it was comprehensive and was satisfactory.

Discussions with the manager demonstrated that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting adult safeguarding concerns. Staff could describe the process for reporting concerns.

It was noted that staff were required to complete adult safeguarding training during their induction programme and annual updates thereafter. All training records reviewed were in place and satisfactory. It was good to note some of the post training comments from staff during one training session:

- “I like being refreshed with training.”
- “The trainer had good knowledge.”
- “Information was clear and concise.”
- “The training was very relevant to us.”

Staff indicated that they had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidents of abuse. They could describe their role in relation to reporting poor practice and their understanding of the agency's policy and procedure with regard to whistleblowing.

The setting had a system for recording referrals made to the HSC Trusts adult safeguarding team in relation to adult safeguarding. Records viewed and discussions with the manager indicated that no adult safeguarding referrals had been made since the last inspection.

The day care setting had provided attenders with information in relation to keeping themselves safe and the details of the process for reporting any concerns.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately. It was noted that no incidents had been reported to RQIA since the last inspection.

It was good to note that all staff had completed DoLS training appropriate to their job roles; records reviewed verified training. Discussion with staff clarified their knowledge of the subject. No current attenders are subject to any DoLS arrangements.

Staff demonstrated that they had an understanding that attenders who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the Mental Capacity Act.

There was a good system in place in relation to the dissemination of information relating to Covid-19 and Infection Prevention and Control (IPC) practices. Staff were observed adhering to guidance and were knowledgeable during discussions.

5.2.2 Question with regards care- Dysphagia.

The manager confirmed that the setting had received specific recommendations from the Speech and Language Therapist (SALT) in relation to attenders' dysphagia needs to ensure the care received in the service was safe and effective. A number of assessments were reviewed and were satisfactory. It was noted that staff had completed relevant training.

A number of attenders required supervision when eating and drinking due to having swallowing difficulties; some of whom required their food and drinks to be of a specific consistency. Staff spoken with demonstrated a good knowledge of attenders' wishes, preferences and assessed needs; and how to modify food and fluids.

5.2.3 Are their robust systems in place for staff recruitment?

The review of the day care setting's staff recruitment records confirmed that recruitment was managed in accordance with the regulations and minimum standards; required pre-employment checks were completed before staff members' commenced employment

and direct engagement with attenders. Records viewed evidenced that criminal record checks (Access NI) had been completed for staff.

A review of the records confirmed that all staff provided were appropriately registered with NISCC. Information regarding registration details and renewal dates were monitored by the manager; this system was reviewed and found to be in compliance with regulations and standards. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

5.2.4 Are there robust governance processes in place?

There were monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. Reports relating to the agency's monthly monitoring were reviewed. The process included engagement with attenders, relatives, staff, and HSCT staff. The reports included details of the review of service user care records, accident/incidents, safeguarding matters, complaints, staff training and staffing arrangements.

We noted some of the comments made by attenders; relatives, HSC Trust and staff during the regular monthly quality monitoring:

Attenders:

- "They listen to me."
- "It's great to be out and about."
- "I had my review by Zoom; it was all ok and good to be able to talk about the centre."

Staff:

- "Even with Covid we offer a wide range of activities."
- "It's important to maintain routines during these difficult times."
- "Important to keep training up to date."

Relatives:

- "The centre is a great resource."
- "They are good at letting me know if anything is wrong."
- "They value my*****and take time to make sure *** is happy."

HSC Trust Staff:

- "Staff continue to do an amazing job."
- "Attenders are at the centre of the service."
- "Staff have been very creative."

It was positive to note that an action plan was generated to address any identified areas for improvement and these were followed up on subsequent months, to ensure that matters had been actioned.

There was a process for recording complaints in accordance with the day care setting's policy and procedures. It was noted that no complaints had been received since the last inspection.

Staff described their role in relation to reporting poor practice and their understanding of the setting's policy and procedure on whistleblowing.

It was established during discussions with the manager that the centre had not been involved in any Serious Adverse Incidents (SAIs)/Significant Event Analyses (SEAs) or Early Alerts (EAs).

The annual provider report as required by Regulation 17 was available for review. The report was comprehensive and gave a positive overview of the day care setting.

It was positive to note that a number of care reviews had been completed in line with Covid restricted services and the day care setting must be commended for their actions. We noted some of the comments from attenders and relatives during this review:

- "I'm happy with the level of care in spite of Covid."
- "We are happy with service."
- "Social distancing helped with protection."
- "I'm really happy at Mourne Stimulus."

6.0 Conclusion

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

7.0 Quality Improvement Plan/Areas for Improvement

No areas for improvement have been identified during this inspection.

	Regulations	Standards
Total number of Areas for Improvement	0	0



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