

Unannounced Care Inspection Report 17 May 2017



SENSE

Type of service: Day Care Service

Address: Units 4,5,6, Meadowbank Road, Carrickfergus, BT38 8YF

Tel no: 02893355665

Inspector: Dermott Knox

www.rgia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of SENSE took place on 17 May 2017 from 10.30 to 17.00.

The inspection sought to assess progress with any issues raised during and since the last care inspection and to determine if the day care service was delivering safe, effective and compassionate care and if the service was well led.

Is care safe?

Sense Day Centre premises, which incorporates four commercial units in a business park site, were clean, fresh, and in good condition, with no obvious hazards for service users or staff. There are sufficient rooms available for group and individual activities. Discussions with the manager, staff and service users confirmed that staffing levels are sufficient to meet service users' needs. Staff members who were interviewed demonstrated their understanding of safeguarding procedures. They confirmed their confidence in the caring qualities and commitment of their colleagues and were confident that poor practice would be reported by team members. Well-detailed risk assessments were being carried out regularly in an effort to minimize risks and to manage them consistently. Observations of the delivery of care, throughout the period of the inspection, provided evidence that service users' needs were being met safely by the staff on duty. No areas for improvement were identified at this inspection with regard to the provision of safe care.

Is care effective?

Service users' records that were examined at this inspection contained detailed assessment information, which supported the development of support plans and the delivery of effective care. Outcomes for service users were clearly stated in review reports. The positive value of the day care service was confirmed by all of the service users and staff members who met with the inspector. Staff are qualified and well informed and were deployed in a manner that made good use of their skills and experience. Three staff members spoke of supportive and positive working relationships within the team. The evidence indicates that Sense Day Centre is providing a good level of effective care that the manager and staff continually seek to develop and improve. No areas for improvement were identified at this inspection with regard to the provision of effective care.

Is care compassionate?

Six service users introduced themselves, or were introduced by staff, to the inspector and contributed a range of positive comments on their enjoyment of attending the centre and on its value to them. There was a friendly and purposeful atmosphere throughout the centre and interactions between staff members and service users were seen and heard to be, respectful, caring and supportive. Verbal feedback from service users was entirely positive with regard to the service provided by Sense. Staff who met with the inspector emphasised the importance of respecting the dignity and choices of each service user and of promoting each person's independence and fulfilment. The caring nature of practices that were observed was reflected in progress records, written at least weekly for each service user.

The evidence presented at this inspection indicates that compassionate care is provided consistently by the staff team in Sense Day Centre.

Is the service well led?

Sense Day Centre has systems in place to ensure that staff are informed on the responsibilities of their roles and the expected standards of practice. Staff development is well embedded in both the philosophy and the practice, as evidenced at this inspection. There is a planned programme of training, including increasingly, e-learning. Staff confirmed that they are supervised and well supported by management and that they have confidence in, and support of, their colleagues. Service users in the centre stated that the service was well run by “very helpful people”. Required records were well kept and up to date. Monthly monitoring reports fulfilled the regulatory requirements and included a good level of detail of feedback from service users and from staff. There was evidence to show that management and leadership of the service has been well maintained by the acting manager and that senior staff were working constructively and creatively to lead and support the staff team.

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

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

Details of the Quality Improvement Plan (QIP) within this report were discussed with as part of the inspection process. The timescales for completion commence from the date of inspection.

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Ms Kathryn Robinson, Acting Manager, 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.

1.2 Actions/enforcement taken following the most recent care inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent inspection on 31 May 2016.

2.0 Service details

Registered organisation/registered person: SENSE/Mrs Collette Gray	Registered manager: Ms Kathryn Robinson, currently Acting Manager and not registered.
Person in charge of the service at the time of inspection: Ms Kathryn Robinson, Acting Manager,	Date manager registered: Application for registered manager not yet submitted by Sense

3.0 Methods/processes

Prior to inspection we analysed the following records:

- Record of notifications of events
- Record of complaints
- Quality Improvement Plan from the previous inspection on 31 May 2016.

During the inspection the inspector met with:

- Six service users in group settings
- One service user individually
- Three care staff, in individual discussions and two others in group settings
- The registered manager at the commencement and conclusion of the inspection.

Questionnaires were left with the manager to be distributed to service users, staff and a number of relatives or carers of service users. Five completed questionnaires were returned to RQIA, following the inspection, three from service users and two from relatives/carers of service users.

The following records were examined during the inspection:

- File records for three service users, including assessments and review reports
- Progress records for three service users
- Monitoring reports for the months of January, February and March 2017
- Records of staff meetings held in September, November and December 2016 and February 2017
- The centre's annual quality survey report for 2016
- Selected training records for staff, including staffs' qualifications
- The statement of purpose for the centre (Reviewed 2016)
- The Service User Guide, in three different formats, including DVD.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 31 May 2016

The most recent inspection of the service was an unannounced care inspection. The completed QIP was returned and approved by the specialist inspector. This QIP has been validated by the care inspector at the present care inspection.

4.2 Review of requirements and recommendations from the last care inspection dated 31 May 2016

Last care inspection recommendations		Validation of compliance
<p>Recommendation 1</p> <p>Ref: Standard 18</p> <p>Stated: First time</p>	<p>The registered persons must ensure policies and procedures as identified in Appendix 2 of the DHSSPS Day Care Settings Minimum Standards (January 2012) reflect the relevant Northern Ireland governing legislation, The Day Care Setting Regulations (Northern Ireland) 2007 and Day Care Minimum Standards.</p> <p>In particular the following Sense policies and procedures must be reviewed:</p> <ul style="list-style-type: none"> • Complaints – refer to section 4.3 For details of what needs amended • Recruitment and Selection • Staff Supervision and Appraisal • Whistleblowing. <p>For details of what needs to be amended or reviewed in each of the above policies, refer to section 4.6 in this report.</p> <p>Action taken as confirmed during the inspection: The written policies and procedures are now reviewed and available on the Sense network, for access by staff and inspection by RQIA. Policies and procedures examined at this inspection included: ‘Safeguarding Vulnerable Adults’, ‘Mental Capacity (including guidance on DoL and Restraint’) and, ‘Behaviour Support’. The manager confirmed that policies and procedures are reviewed in accordance with the minimum standards.</p>	<p>Met</p>
<p>Recommendation 2</p> <p>Ref: Standard 21.8</p> <p>Stated: First time</p>	<p>The registered person should, in accordance with Minimum Standard 21.8, ensure a system is in place within the day care setting to ensure staff signatures are obtained when on-line (e-learning) training is completed.</p> <p>Action taken as confirmed during the inspection: The manager confirmed that the system in place ensures that staff members sign and date each e-learning module when it is completed. One staff member described the process.</p>	<p>Met</p>

<p>Recommendation 3</p> <p>Ref: Standard 21.9</p> <p>Stated: First time</p>	<p>The registered person should ensure a recorded evaluation process is in place regarding on-line training.</p> <p>This will enable the manager to evaluate the overall effect of training on practice and procedures for quality improvement and take appropriate action should this be required.</p> <p>Action taken as confirmed during the inspection: The centre has a system in place to record evaluations of all training undertaken by staff.</p>	<p>Met</p>
<p>Recommendation 4</p> <p>Ref: Standard 22</p> <p>Stated: First time</p>	<p>The registered person should, ensure Sense residential care staff supporting service users in the day care setting have formal, individual, recorded supervision regarding their work, development and training needs in the day care setting.</p> <p>The manager should ensure appropriate arrangements are in place for the registered manager of the residential setting to be made aware if there are any relevant training, development or support needs regarding the supervisee, as this information is relevant to the individual's annual appraisal.</p> <p>There should be day care setting procedures which explain and detail the rationale and process of the above. These procedures should be included or appended to the organisation's staff supervision and appraisal policy.</p> <p>Action taken as confirmed during the inspection: The manager explained that residential staff's involvement in the day care service is recorded and that supervision is provided, proportionate to the level of the individual's involvement. When it is deemed necessary, information on the staff member's performance is shared with the manager of the residential unit.</p>	<p>Met</p>

4.3 Is care safe?

The day centre premises were in good condition with no obvious hazards for service users or staff. There are several spacious rooms available for group activities and for individual work with service users, when necessary. The manager and three staff members, who met with the

inspector, confirmed that they have confidence in the practice of all members of the staff team in their work with service users. All three staff members had worked in other care or education settings prior to their employment in the centre and expressed strong commitment to their work with service users, which, they confirmed, is enjoyable and satisfying. All new staff undertake a detailed induction programme and this was described favourably by the most recently appointed staff member.

Safeguarding procedures were understood by all of the staff who were interviewed. There were systems in place to ensure that risks to service users were assessed regularly and managed appropriately and this included inputs by community based professionals, service users and, where appropriate, a carer. Risk assessments with regard to transport, activities, mobility, evacuation of the premises and moving and handling, were present where relevant and each one had been signed as agreed, either by the service user or a representative. Observation of the delivery of care, throughout the period of the inspection, provided evidence that service users' needs were being met safely and carefully by the staff on duty.

Staff members were observed interacting calmly and sensitively with service users and being attentive to each person's needs throughout their time in the centre. Individual session plans for service users help to structure the individual's involvement in the centre and clarify what tasks staff are responsible for during specified periods. Fire alarm systems checks were carried out and recorded on a weekly basis and fire exits were seen to be unobstructed.

During the inspection visit, six service users spoke very positively of the quality of care provided at the centre and confirmed that they felt safe in the centre and in the transport vehicle. Staff presented as being well informed of the needs of service users and of methods of helping to meet these needs safely. Service users' rights and feelings, and the methods available to them of raising a concern or making a complaint were set out in the service user guide.

The evidence presented supports the conclusion that safe care is provided consistently in the Sense Day Care Service.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
-------------------------------	---	----------------------------------	---

4.4 Is care effective?

The centre's Statement of Purpose and the Service User's Guide provide all of the information required by the regulations and the minimum standards. The Service User's Guide includes pictorial support for the written information, helping to make it accessible to many of the service users. The manager provided access to a DVD version of the guide, on the computer system and this proved to be well presented and informative.

Three service users' files were examined and each was found to contain detailed referral and assessment information for the individual and on his or her functioning. Care planning information was derived accurately from the detailed assessments and from the information provided by the individual service user in the document, "A bit about me". This information is given primary status and is one of several sources of evidence of good person centred care being provided. The system of planning each person's activity schedule and having a session

plan for each morning and each afternoon, records of reviews focussed on achievements, measured against the desired outcomes of the planned care. The clear and comprehensive presentation of assessment, care planning and review information is commendable and it was evident that the manager and staff were enthusiastic in seeking to continually improve their methods and practices in identifying a range of achievable and measureable goals with each service user. The manager had identified the potential benefits of segregating the assessment, care planning and review information from the larger body of records kept for each service user, in order to make a more readily accessible and manageable working file.

Each of the files examined contained clear risk assessments appropriate to the individual service user, making the risks clear for staff involved in specific aspects of the work with that person. A record was kept of each service user's involvement and progress at the centre and entries were made satisfactorily in proportion to the frequency of attendance of the individual. Dates and signatures were present in relevant records in all of the files examined. Records of annual reviews for each person demonstrated that an evaluation of the overall suitability of the placement had been discussed in detail and agreed. Well written review records, informed by progress notes and monthly summaries, and including the service user's views where possible, were available in all files examined. There was written evidence in the annual quality survey report for 2016 to indicate that all stakeholders were satisfied with the effectiveness of the service and these views were supported in the review reports sampled.

The premises are spacious, through four adjoining commercial units, with a layout that facilitates a wide range of activities, appropriate to the support and development needs of service users. These include a multi-sensory room, equipped to help service users relax, and staffed sufficiently to provide experiences such as hand and foot massage in 'pampering' sessions. A session of life skills training was observed, with a service user being guided in the preparation of a hot drink and a sandwich. Training sessions such as this, with individual service users, are a regular part of the centre's operations and are essential to their learning and skill development. The day centre staff are supported, on a regular basis, by staff of the nearby Sense Residential Home, in which several service users live. Six service users spoke about their experiences of participating in the centre's activities and all were positive about the benefits they gained from these. Activities included a range of self-help and life skills, participative music sessions, art, baking, computer use and walking in the community, including negotiating kerbs and steps.

One service user completed a questionnaire following the inspection and all responses were entirely positive about the care and the service provided in Sense, Meadowbank.

The evidence indicates that the care provided in Sense Day Centre is effective in terms of promoting each service user's involvement, development, enjoyment and wellbeing.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
-------------------------------	---	----------------------------------	---

4.5 Is care compassionate?

On the day of this inspection, the atmosphere throughout Sense Day Centre was calm, friendly and encouraging. Observations of activities throughout the centre provided evidence of service users relating positively to staff and to each other. There are both centre-based activities and various community-based activities including familiarisation with local areas, using public transport, using a gym and swimming pool, and going ten-pin bowling. In all of the activities and interactions observed, service users were engaged by staff with respect and encouragement.

Service users confirmed that staff listen to them and encourage them to take a full part in developing their activity plans for day care. Activity programmes are clearly set out with each individual's agreement and there was evidence of changes being negotiated in order to accommodate new interests. Many service users contributed positive comments on their enjoyment of attending the centre and on its value to them practically and socially. Staff demonstrated a good knowledge of each service user's assessed needs as identified within the individual's records. The systems in place to ensure that the views and opinions of service users were sought and taken into account, included the booklet, "A bit about me" and, records of sessions in preparation for their reviews or for starting a new activity. Service user advocacy is carried out on an individual basis and provides regular opportunities for each person's views to be aired. Five completed questionnaires were returned to RQIA following the inspection, three from service users and two from relatives. All five respondents recorded that they were very satisfied with the quality of the service, with one relative adding, "My wife is treated very well by the staff".

During each monthly monitoring visit the views of a sample of service users were sought and their views were reflected in good detail in all three of the monthly monitoring reports that were reviewed. The minutes of four staff meetings, held in the eight months prior to this inspection, provided evidence of good consultation with service users and a strong focus on ensuring compassionate care was provided consistently. Each person's file contained a completed "Restrictions Form", addressing a range of matters that might constitute a restriction, restraint, or deprivation of liberty. The detailed and focussed approach to these matters is commendable.

Staff who met with the inspector emphasised the importance of recognising and promoting the dignity of each service user. The caring nature of practices that were observed was reflected in high quality progress records, often written daily for each service user and summarised every month. The evidence presented at this inspection indicates that compassionate care is provided consistently by the staff team in the Sense Day Centre.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
-------------------------------	---	----------------------------------	---

4.6 Is the service well led?

At the beginning of the inspection the manager provided information on the operation of the centre and presented a range of documentary evidence to inform the inspection's findings. These included minutes of staff meetings, monitoring reports, client files, staffing information, written policies and procedures and feedback, dated 22 March 2017, to the manager from the

chair of the Sense Quality Board, whose members had recently completed a quality audit of the service. The quality audit report recognised the person centred approaches in use and the positive support for people to achieve good outcomes. Sense Day Centre has systems in place to ensure that staff are well-informed on the responsibilities of their roles and the expected standards of practice.

At each monthly monitoring visit, the views of a sample of service users and staff were sought and their comments were included in good detail in all three of the monitoring reports examined, which were for January, February and March 2017. Monitoring visits took place regularly and a report was completed each month. Monitoring reports showed that all of the required aspects of the centre's operations were examined and that action plans were completed to ensure that identified, necessary improvements would be addressed within a specified timescale.

There was evidence in records and from discussions with staff members to verify that staff training was well planned and delivered in a way that enabled staff members to connect the training with their day to day practice. Two staff members explained how their specific training needs were identified and recorded in a performance plan. Formal, individual supervision was welcomed by staff members who said that they felt well supported and encouraged in their work.

There was evidence from discussions with staff and from the minutes of staff meetings to confirm that working relationships within the staff team were supportive and positive. In addition to regular, approximately bi-monthly staff meetings, the daily planning of work sessions with the manager and colleagues was regarded by staff as a key part of the effective communications in the team. Staff commented that the manager's leadership style was supportive, constructive and open and helped team members to accept responsibility for their work and for the overall effectiveness of the centre.

The evidence available at this inspection confirmed that the acting manager and senior staff are effectively leading, supporting and motivating staff and that team morale is good. The service is well led.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
-------------------------------	---	----------------------------------	---

5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards.



The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email info@rqia.org.uk

Web www.rqia.org.uk

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