

Unannounced Care Inspection Report 11 October 2016











Foreglen Community Association

Type of service: Day Care Setting Address: 267 Foreglen Road, Dungiven BT47 4PJ

Tel No: 02871338347 Inspector: Maire Marley

1.0 Summary

An unannounced inspection of Foreglen Community Association took place on 11 October 2016 from 10.00 to14.30 hours.

The focus of this inspection was to monitor the management arrangements within the day care setting and review the progress of the action plan submitted to RQIA in August 2016.

A Notice of Decision to impose three conditions on the registration of Foreglen Community Association was issued on 25 July 2016 to the registered person. These conditions related to the appointment of a suitable qualified manager, recruitment practices and the arrangements to monitor the matters set out in The Day Care Setting Regulations (Northern Ireland) 2007 Schedule 3. On 19 August 2016 RQIA were informed that the responsible person had made an appeal to the Care Tribunal to appeal the Notice of Decision. This appeal is ongoing.

On Friday 5 August 2016 a meeting was held with members of the Foreglen Community Association and representatives from the WHSC Trust. The organisation had submitted an action plan to RQIA and during this inspection there was evidence that substantial progress had been made to address the identified improvements detailed in the submitted action plan. However, the organisation had not been successful in recruiting a manager with the appropriate qualifications and an acting manager remains in position. The WHSC Trust is supporting this manager as agreed with RQIA. The inspector was informed these arrangements were changing and a requirement regarding the proposed change is made in the main body of this report.

The organisation's policies and procedures were available for examination and were found to be indexed and presented in a comprehensive manner. The policies had been revised and the registered person reported that they had been completed with the assistance of the WHSC Trust and were in accordance with the minimum standards. Several policies had been dated and signed by staff to confirm that they had read the policy. A review of a random selection of policies established they were in compliance with the minimum standards.

During the inspection staff were observed communicating with service users in a manner that was respectful of their choices and preferences. Throughout the period of observation the care delivered indicated that service users' needs were being met safely by the staff on duty.

The centre was warm and comfortable and there were no obvious hazards for service users or staff.

In conclusion, a requirement and three recommendations are made as an outcome of this inspection.

The inspector would like to thank the staff and service users for their hospitality and participation in the inspection process.

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

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and	1	2
recommendations made at this inspection	Į	3

Details of the Quality Improvement Plan (QIP) within this report were discussed with Ms Eileen Jones, acting manager; Anne Hegarty, responsible person; and Marie McCloskey, as part of the inspection process. The timescales for completion commence from the date of inspection.

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 care inspection on 28 July 2016.

2.0 Service details

Registered organisation/registered person: Foreglen Community Association/Ms Anne Hegarty	Registered manager: No registered manager in post. Ms Eileen Jones Interim manager appointed on 19 July 2016.
Person in charge of the day care setting at the time of inspection: Ms Eileen Jones	Date manager registered: Not applicable
Number of service users attending on the day of inspection:	Number of registered places: 25

3.0 Methods/processes

Prior to inspection we analysed the following records:

- Previous inspection report and returned QIP
- Failure to comply notices
- Notice of Proposal and Notice of Decision
- Information relating to appeal to Care Tribunal
- Submitted action plan
- Any correspondence received from the organisation

During the inspection the inspector was introduced to all service users and spoke to five service users in a group. In addition, discussions were held with Eileen Jones, acting manager; Anne Hegarty, responsible person and Marie McCloskey, committee member.

The following records were examined during the inspection:

- Staff duty roster
- Record of staff meetings
- Record of staff training
- Records relating to the employment of three volunteers
- Record of monthly monitoring reports
- Record of supervision
- Monthly reports
- Random selection of policies
- Record of Accidents/Incidents

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 22 September 2016.

The most recent inspection of the day care setting was an announced estates inspection. The QIP will be reviewed by the estates inspector when it is returned.

4.2 Review of requirements and recommendations from the last care inspection dated 28 July 2016

Last care inspection	Validation of compliance	
Requirement 1 Ref: Regulation 13 (1) (a)	The registered provider must ensure that the day care setting is conducted so as to promote and make proper provision for the care and welfare of service users.	
Stated: Third time	As such the registered provider is required to confirm:	
To be completed by: 30 September 2016	 (a) that those policies and procedures outlined in Appendix 2 of the DHSSPS Day Care Settings Minimum Standards (January 2012) are in place and have been reviewed so there are in accordance with statutory requirements and good practice guidance. (b) there are appropriate arrangements in place to 	Met
	ensure that all staff employed in the day care setting have an awareness of policies and procedures and how to access these.	

Action taken as confirmed during the inspection:

There was evidence that the organisation had revised the policies and procedures outlined in Appendix 2 of the DHSSPS Day Care Settings Minimum Standards (January 2012).

The inspector was informed that staff are given some time each day to read, sign and date the policies when they have read them. This information was confirmed on those policies that were held in central files that are available to staff in the office.

A discussion was held on the organisation's responsibility to ensure that the policies and procedures direct and influence staff in the delivery of day care services and the need to ensure staff understanding is monitored through the format of supervision. The inspector suggested that the organisation might want to highlight those very pertinent policies such as safeguarding, management of complaints and reporting accidents and incidents, and discuss them at staff meetings. This would ensure that all staff understand their responsibilities in delivering care in accordance with the organisation's policies and procedures.

4.3 Inspection Findings

A Notice of Decision to impose three conditions on the registration of Foreglen Community Association was issued on 25 July 2016 to the registered person. These conditions related to the appointment of a suitable, qualified manager; recruitment practices and the arrangements to monitor the matters set out in The Day Care Setting Regulations (Northern Ireland) 2007 Schedule 3.

Members of the Foreglen Community Association, along with a representative from the Western Health and Social Care Trust, requested and attended a meeting in RQIA on 5 August 2016. During this meeting assurance was provided that the Trust would support the organisation by providing a registered manager from one of their day care centres to oversee the management of the day care centre. In addition, the Trust would undertake monthly monitoring visits to the centre and provide training to assist the responsible person and other committee members to undertake this responsibility. It was further agreed the remaining policies and procedures would be revised, and where necessary updated, by 30 September 2016. An action plan along with timescales was subsequently forwarded to RQIA.

On 19 August 2016 RQIA were informed that the responsible person had made an appeal to the Care Tribunal in respect of RQIA's Notice of Decision. This appeal is ongoing.

Management Arrangements

In September 2016 Foreglen Community Association informed RQIA that despite a recruitment drive they had been unable to appoint a suitably qualified manager. In the interim period a care assistant appointed in July 2016 was assuming responsibility for the centre as an acting manager. As previously stated the WHSC Trust had provided a registered manager from one of their day care centres to support this manager two days a week and assist with the general management tasks.

On the day of inspection a review of the management arrangements was undertaken and included a review of the duty roster and discussion with the acting manager, responsible person and a committee member. This review established that the manager from the Trust had spent two days per week in the centre and was also available for support on the telephone. The increased management presence had been beneficial and these benefits were reflected in the improved quality of policies and procedures, staff supervision, activities and the general overall management arrangements.

The hours the manager from the Trust spends in the centre should be recorded on the duty roster. Discussions with the acting manager and responsible person provided assurances that there were effective working relationships with the Trust. However, the inspector was informed that these management arrangements are changing as this manager is moving to take up a new post. The registered person must inform RQIA of the interim arrangements agreed with the Trust that will ensure this day care centre is appropriately managed until the appointment of a suitable, qualified manager.

Competency and Capability Assessment

The record relating to the acting manager's competency and capability assessment was not available for inspection. This record was submitted following the inspection and provided evidence that the assessment had been completed. The record was signed and dated by the person completing the assessment and the acting manager.

Policies and Procedures

The organisation had submitted, as requested, a range of policies to the care inspector for review in August 2016. These included policies on Staff Recruitment; Accidents; Missing Service Users; Volunteers; Whistleblowing; Staff Induction; Staff training and Development; and Managing Aggression and Challenging Behaviour. Feedback was provided by the inspector and the registered person confirmed that the comments provided at that time on the identified policies and procedures had been adopted by the organisation.

The agency's policies and procedures were available for examination and were indexed and presented in a comprehensive manner. It was noted that the policies had been updated and the inspector was informed that all policies specified in the minimum standards were in place and had been completed with the assistance of the WHSC Trust.

The agency's complaint policy was examined and was in accordance with regulations and standards. The inspector was advised that there had been no complaints received since the previous inspection. A service user's comments regarding the enforcement activity had been recorded and actioned appropriately. The organisation's recruitment processes were examined and included a review of the organisation's recruitment and selection procedures; the review established that the policy was compliant with regulations.

The policy on the management of records was viewed and found to contain the arrangements in relation to the creation, storage, retention and disposal of records.

A review of the organisation's accident policy established that the policy detailed the action to be taken in the event of an accident and the records to be completed by staff.

The inspector was informed that staff are allocated time each day to read the policies and they then sign and date each policy to confirm they have read the policy. It was acknowledged that the organisation were taking measures to ensure policies and procedures direct and influence staff in the delivery of day care services; however, the inspector suggested that staff understanding could be further developed and monitored through the format of supervision. It was also suggested that the organisation might want to highlight those very pertinent policies such as safeguarding, management of complaints and reporting accidents/incidents, and discuss them at staff meetings. This would ensure that all staff are up to date and understand their responsibilities in delivering care in accordance with policies and procedures.

No further issues were identified relating to policies and procedures, and the review of the aforementioned policies found them to be compliant with the minimum standards.

Pre-employment Checks

The organisation had submitted confirmation to RQIA that outstanding pre-employment checks identified during an inspection undertaken on 7 June 201 6 had been completed. The inspector was shown evidence that three volunteers who had to leave until their pre-employment checks had been completed were now either back in post or returning to their posts, and there was evidence that Enhanced Access NI checks had been completed. A copy of the completed certificate was maintained in each person's file. It was recommended that management ensure that records relating to these checks are maintained in accordance with Access NI's code of practice. Disclosure information should be maintained in a confidential and secure manner.

Monthly Monitoring

Following previous enforcement activity the organisation has submitted to RQIA a copy of the report of the monthly quality monitoring visit. These reports provided evidence that the required visits are taking place in conjunction with a monitoring officer from the WHSC Trust as agreed with RQIA. A review of the reports for the months of July, August and September 2016 established that the monitoring records were detailed and included an update on progress made on planned improvements, an action plan and timescales. The registered person was aware these reports should continue to be submitted to RQIA.

Service Users' Views

The inspector was introduced to and greeted all service users who attended the centre, and joined four service users for coffee and scones. During this period the inspector observed staff communicating with service users in a manner that was respectful of their choices and preferences. Throughout the period of the observation the care delivered indicated that service users' needs were being met safely by the staff on duty.

Service users who met with the inspector provided a range of examples relating to how staff promote their dignity and privacy, and provide care and support. It was evident from speaking with service users that the centre was an important feature in their lives and was held in high esteem. The inspector heard how attending the centre supported service users, provided

friendship and companionship, and gave respite to some from their caring role. Service users spoke highly of staff and were very appreciative of the service provided. There were no issues identified by service users on the day.

Monthly monitoring reports included comments on discussions between the monitoring officer and a number of service users and provided an overview of the service users' experiences in the centre. Minutes of service user meetings, dated 10 September 2015, were available for inspection.

It was good to note that the activity of the day and the menu were displayed, and service users spoke about how the introduction of additional activities had added to their enjoyment at the centre. Activities provided included dance afternoons, bingo, word association, papers and news and crafts. Service users confirmed that they had a choice if they did not like what was on the menu, and those consulted praised the quality of food and how the meals were presented.

Staff Meetings

There was evidence that staff meetings had been held; however, it is recommended that the content of staff meetings are further developed and focus on issues relating to day care provision.

Accidents/Incidents

The inspector was informed there had been no accidents since the last care inspection.

Annual Care Reviews

Since August 2016 the Foreglen Community Association and the Western Health and Social Care Trust developed a programme to assess the needs of all service users attending the centre. There was evidence that annual reviews had either taken place or a date was scheduled for the review.

Environment

The day centre premises were in good condition with no obvious hazards for service users or staff. A variation application to use additional areas of the premises for the purposes of the day care centre was submitted to RQIA for consideration. The estates officer visited the centre on 22 September 2016 to assess the suitability of the additional areas and a number of improvements were identified. The variation application is pending receipt of all requested documentation and information.

Areas for improvement

Areas for improvement were identified during the inspection and refer to: the management arrangements; the record of the hours the manager from the Trust is in the centre; improving the content of staff meetings; and the maintenance of records relating to Enchanced Access NI checks.

Number of requirements:	1	Number of recommendations:	3

5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Eileen Jones, acting manager; Anne Hegarty, responsible person; and Marie McCloskey, committee member as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the day care setting. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on The Day Care Setting Regulations (Northern Ireland) 2007.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Day Care Settings Minimum Standards 2012. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to day.care@rqia.org.uk for assessment by the inspector.

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. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Statutory requirements

Requirement 1

Ref: Regulation 9 (2)

Stated: First time

The registered provider must inform RQIA of the interim arrangements agreed with the WHSC Trust that will ensure this day care centre is appropriately managed until the appointment of a suitable, qualified manager.

To be completed by: 30 November 2016

Response by registered provider detailing the actions taken:
The Forglen committee are actively continuing to secure a registered manager for the centre. This has involved liaising with numerous agencies who have not been able to identify a suitable candidate to date. We have spoken with 4 retired nurses one of them recently retired earlier in the year however each one has given up their registration and therefore do not meet the criteria. We have linked in with the Western Trust to see if they can provide a manager or can advise on other possible avenues. The Trust is currently looking within their own area for a possible suitable interim manager however this is an ongoing process. RQIA have agreed with the newly appointed acting manager at present and the Western Trust is continuing to support this manager by providing training, meetings and support on a regular basis.

Recommendations

Recommendation 1

Ref: Standard 23.7

Stated: First time

To be completed by: 11 October 2016

Recommendations

The registered provider should ensure the hours the manager from the Trust is in the centre is recorded on the duty roster.

Response by registered provider detailing the actions taken:

The hours worked by the Trust Manager are now recorded on the duty roster.

Recommendation 2

Ref: Standard 20.3

Stated: First time

The registered provider should ensure information relating to preemployment checks is maintained in accordance with Enhanced Access NI's code of practice and ensure disclosure information is maintained safely and securely.

To be completed by:

Immediately and no later than 11 October 2016

Response by registered provider detailing the actions taken: All records have been reviewed and are now being maintained in

accordance with Enhanced Access NI's code of practise.

Recommendation 3 Ref: Standard 23.	The registered provider should ensure that staff meetings are further developed and focus on issues relevant to staff development and day care issues.	
Stated: First time	Response by registered provider detailing the actions taken: Staff meetings are being further developed on an ongoing basis and two	
To be completed by: 30 November 2016	have since been held which have included discussions on day care issues and staff and team development.	

Please ensure this document is completed in full and returned to day.care@rqia.org.uk from the authorised email address





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