

# Unannounced Care Inspection Report 24 March 2017



## Carn Court Day Care

**Type of service: Day Care Service**  
**Address: Main Street, Rosslea, BT92 7DG**  
**Tel no: 028 6775 1902**  
**Inspector: Angela Graham**

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Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An unannounced inspection of Carn Court Day Care took place on 24 March 2017 from 09.40 hours to 15.30 hours.

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

### **Is care safe?**

On the day of the inspection Carn Court Day Care was found to be delivering safe care. There was positive feedback from seven service users and a service user's representative about the delivery of safe care in the day centre. Observations of care practices showed there was a culture of ensuring service users were safe and protected from harm. Staff were knowledgeable of their specific roles and responsibilities in relation to adult safeguarding.

The staff in Carn Court Day Care were observed caring for a range of service users' needs. The staffing levels were responsive to service user's needs, welfare and safety.

Service users who completed and returned questionnaires to RQIA following the inspection indicated satisfaction and that the care provided was safe. No issues or concerns were raised or indicated.

### **Is care effective?**

On the day of the inspection it was established that the care in Carn Court Day Care was effective. Observations of staff interactions with service users and discussion with seven service users and a service user's representative evidenced this. There were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users.

The inspection of elements of three service users care records; incident recording; discussion with seven service users, a service user's representative and staff concluded care was being delivered at the right time, in the right place, and with the best outcome. Staff demonstrated a high level of commitment to ensure service users received the right care at the right time. Staff spoken with understood their role, function and responsibilities. Staff also confirmed that if they had any concerns, they could raise these with the manager.

Service users who completed and returned questionnaires to RQIA following the inspection indicated satisfaction and that the care provided was effective. No issues or concerns were raised or indicated.

### **Is care compassionate?**

On the day of the inspection Carn Court Day Care was found to be delivering compassionate care. The inspection of records, observations of practice and discussions with staff, seven service users and a service user's representative confirmed that service users were being treated with compassion, dignity and respect. Furthermore they were encouraged by staff to be involved in decisions affecting their care and support.

Staff were observed responding to service users' needs and requests promptly and professionally. Discussion with seven service users and a service user's representative and observation provided evidence that service users were listened to, valued and communicated with in an appropriate manner.

Service users who completed and returned questionnaires to RQIA following the inspection indicated satisfaction and that the care provided was compassionate. No issues or concerns were raised or indicated.

### Is the service well led?

On the day of the inspection there was evidence of effective leadership and management in Carn Court Day Care and a culture focused on the needs of service users. Staff confirmed that they were well supported in their roles and that good training is provided.

Service users who completed and returned questionnaires to RQIA following the inspection indicated satisfaction and that the service was well led. No issues or concerns were raised or indicated.

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
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Martina McLaughlin, 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 02/09/2015.

## 2.0 Service details

<b>Registered organisation/registered person:</b> William Henry Murphy	<b>Registered manager:</b> Martina McLaughlin (Acting)
<b>Person in charge of the service at the time of inspection:</b> Martina McLaughlin	<b>Date manager registered:</b> 25/10/2016

### 3.0 Methods/processes

Prior to inspection the following records were analysed:

- The registration details of the day centre
- Written and verbal communication received since the previous care inspection
- The previous care inspection report and quality improvement plan (QIP)

Specific methods/processes used in this inspection include the following:

- Discussion with the manager
- Discussion with two care staff
- Discussion with seven service users
- Discussion with a service user's representative
- Examination of records
- File audits
- Evaluation and feedback

The manager was provided with five questionnaires to distribute to service users; five staff members and five relatives for their completion. The questionnaires asked for service user, staff and relatives views regarding the service, and requesting their return to RQIA. Three service users' questionnaires were returned to RQIA. The content of the questionnaires is discussed in the main body of the report.

The following records were examined during the inspection:

- Complaints and compliments records
- Accident/untoward incident record
- Staff roster
- Staff supervision and appraisal records
- Elements of three service users' care records
- Sample of policies and procedures
- Sample of quality assurance audits
- Staff training information
- Minutes of three staff meetings
- Minutes of three service user meetings
- Three monthly monitoring report

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 02/09/2015

The most recent inspection of the day care service was an unannounced care inspection. The completed QIP was returned and approved by the care inspector.

#### 4.2 Review of requirements and recommendations from the last care inspection dated 02/09/2015

Last care inspection recommendations		Validation of compliance
<b>Recommendation 1</b> <b>Ref:</b> Standard 18.1 <b>Stated:</b> First time	The registered person should ensure that the continence promotion policy is further developed to include information on the action to take regarding referrals in the event of concerns regarding a members continence needs.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Discussion with the manager confirmed that a continence promotion policy had been developed. A continence promotion policy was available in the day care setting on the day of inspection.	
<b>Recommendation 2</b> <b>Ref:</b> Standard 5.2 <b>Stated:</b> First time	The registered manager should confirm that the care/support plans have been further developed to include specific assistance/support required for individual members.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Discussion with the manager and review of three service user's care records evidenced that this recommendation had been addressed.	
<b>Recommendation 3</b> <b>Ref:</b> Standard 27.7 <b>Stated:</b> First time	The registered person must ensure a suitable container is available for the disposal of continence products.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> On the day of inspection a suitable container was available for the disposal of continence products.	

#### 4.3 Is care safe?

The manager confirmed the planned daily staffing levels for the day care centre, and that these levels were subject to regular review to ensure the assessed needs of the service users were met. A review of the staffing roster for weeks commencing 24 February 2017 until 24 March 2017 evidenced that the planned staffing levels were adhered to.

Staff consulted confirmed that staffing levels met the assessed needs of the service users. Observation of the delivery of care evidenced that service users' needs were met by the numbers of staff on duty.

Discussion with the manager confirmed that staff were recruited in line with Regulation 21, Schedule 2 of The Day Care Setting Regulations (Northern Ireland) 2007 and that records were retained at the organisation's personnel department.

Review of a completed induction record and discussion with staff evidenced that an induction programme was in place for all staff, relevant to their specific roles and responsibilities.

The manager and staff confirmed that competency and capability assessments were undertaken for any person who is given the responsibility of being in charge of the centre for any period in the absence of the registered manager. Records of competency and capability assessments were retained and examined during the inspection.

Review of a sample of staff training records concluded staff had received mandatory and other training relevant to their roles and responsibilities since the previous care inspection.

Review of records pertaining to accidents, incidents and notifications forwarded to RQIA confirmed that these were appropriately managed.

The staff on duty on the day of inspection discussed the needs of the service users they were looking after. They gave a clear description of their needs and how those needs will be met. The staff stated their aim was for service users to enjoy their time in the day service by undertaking stimulating activities and for service users to feel comfortable and safe in the group environment. The staff confirmed that if they had any concerns regarding safe practice they would discuss this with their colleagues and/or the management team who they described as accessible and supportive. Staff confirmed service users are encouraged to give their views, opinions and preferences. In summary the discussion with staff confirmed they were proactively promoting safe care for service users in this setting.

The manager and staff spoken with clearly demonstrated knowledge of their specific roles and responsibilities in relation to adult safeguarding. The manager stated that there were no current or ongoing safeguarding concerns.

Discussion with staff confirmed that they had attended safeguarding vulnerable adults training in October 2015.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout. There was evidence that hand hygiene was promoted through notices, handwashing supplies and facilities. There were no obvious hazards to the health and safety of service users, visitors or staff. Fire exits and corridors were observed to be clear of clutter and obstruction.

Three service users completed questionnaires for this inspection. These service users confirmed that they felt safe in the setting. These service users also confirmed that they could talk to staff if they were unhappy or had any issues or concerns and they could tell someone if they were worried about someone being treated badly. The service users reported the setting is comfortable and they knew what to do if the fire alarm sounded.

### **Areas for improvement**

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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#### 4.4 Is care effective?

Discussion with the manager established that staff in the day care setting responded appropriately to and met the assessed needs of the service users.

Review of elements of three service users' care records reflected there are risk assessments and care plans in place. There was evidence that risk and other assessments informed the care planning process. There was also recorded evidence of multi-professional collaboration. Care recording for every five attendances was being maintained in the three care records inspected.

Service users and/or their representatives were encouraged and enabled to be involved in the assessment, care planning and review process.

Review of elements of three service users' care records confirmed annual reviews of the individual's day care placement had taken place in the previous year.

It was observed during this inspection that records were stored safely and securely in line with data protection.

The manager confirmed that there were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users at appropriate intervals.

Records were made available for inspection concerning audits of the environment, staff training, supervision and appraisal and care records and evidenced that actions identified for improvement had been completed.

Evidence was provided to verify systems were in place to ensure effective communication with service users, their representatives and key stakeholders. These included pre-admission information, care reviews, service users and staff meetings.

Discussion with the manager and staff confirmed that management operated an open door policy in regard to communication within the day care setting. Staff stated that there was effective teamwork and each staff member knew their role, function and responsibilities. Staff also confirmed that if they had any concerns, they could raise these with the manager. All grades of staff consulted clearly demonstrated the ability to communicate effectively with their colleagues and other health care professionals.

Discussion with the manager and review of records evidenced that service user meetings were generally held monthly. The last meeting was held on 15 March 2017 and minutes were made available.

There was information available to staff, service users and representatives in relation to advocacy arrangements.

Observation of practices evidenced that staff were able to communicate effectively with service users.

Three service users' completed questionnaires. These service users confirmed that they were getting the right care at the right time and staff were communicating well with them.



They also confirmed that their choices are listened to and they choose the activities they take part in. The service users reported that they had been involved in the annual review of their day centre placement.

### Areas for improvement

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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#### 4.5 Is care compassionate?

The manager confirmed that staff in the day care setting promoted a culture and ethos that supported the values of dignity and respect, independence, rights, equality and diversity, choice and consent of the service users.

Discussions with staff regarding the activities they were delivering confirmed the activities were tailored to meet the needs of the service users, as well as promoting their strengths and providing choice.

Discussions with service users along with observations of practice during this inspection confirmed that service users were enabled and supported to engage and participate in meaningful activities e.g. boccia, knitting and bingo. Observations of service users taking part in activities showed participation was good.

Discussion with service users confirmed that they had recently been involved in the Take 5 Project. They had produced a book titled "Our Life Time Community" that included a collection of the service user's memories.

During the observation and discussions staff were observed checking service users were comfortable, that their needs and preferences were being met. If the staff identified someone needed additional support they sensitively and discretely got their attention and accompanied the service user to where they could get more individualised care and privacy. Overall staff were observed supporting service users in a compassionate way, encouraging service users to be involved in their care and promoting their independence.

Staff were aware of each service user's individual needs and were observed to respond positively and warmly. During discussion staff presented as knowledgeable and informed regarding each service user's needs.

The staff described they consult with service users informally when they are in the day care setting regarding their needs, preferences and choices.

Service users are consulted on a formal basis via service users' meetings and the annual review of their day care placement.



Service users spoken with during the inspection commented positively in regard to the care they received. Examples of some of the comments made by service users are listed below:

- “The day centre is a life line for me. Staff are so kind and lovely to us all.”
- “The dinner is excellent and we always get a choice.”
- “I really enjoy coming to the centre. We do lots of things when we are here like knitting, bingo and we recently developed a book about our lives many years ago.”
- “Staff are always very welcoming and helpful.”
- “I think this is a fantastic place. I feel happy and safe here.”

The inspector met with a relative. The relative spoke positively of the service, care delivered and the staff team. Examples of some of the comments made by the relative are listed below:

- “My view is that this is an excellent day centre and very well managed.”
- “My mother enjoys coming to the day centre and is very happy here.”
- “Staff are very friendly and helpful. They keep me informed of any changes in my mother’s care.”

Consultation with service users regarding compassionate care and service users’ questionnaires identified they were treated with respect and are involved in decisions affecting them, the staff are kind and caring, their privacy is respected; they have choices and are involved in decisions.

**Areas for improvement**

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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**4.6 Is the service well led?**

The manager confirmed that there were management and governance systems in place to meet the needs of service users.

A range of policies and procedures were in place to guide and inform staff. Policies were centrally indexed and retained in a manner which was easily accessible by staff. Staff confirmed that they had access to the day centre’s policies and procedures.

Discussion with staff confirmed that they knew how to respond to a range of situations such as responding to issues of dissatisfaction or a vulnerable adult concern. The staff confirmed that there is good communication across the team and clear working together practices. They described the management team as supportive and they knew they could speak to them for guidance or advice. All grades of staff were clear who they report to and what to do if they had a concern about a staff member or service user. Discussions with staff also confirmed that management were responsive to any suggestions or concerns raised.

Discussion with the manager and staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. A schedule for annual staff appraisals and staff supervision was maintained and was available for inspection.

A review of the schedule confirmed that supervisions were completed for staff on a quarterly basis, or more frequently, and staff appraisals were completed annually. Discussion with staff confirmed that they had received supervision and appraisal accordingly.

Discussion with the manager confirmed that staff meetings were held generally monthly, and records verified this. The last meeting was held on 1 March 2017 and minutes were available. The previous staff meeting had been undertaken on 24 February 2017. The manager confirmed that the minutes of staff meetings were made available for staff to consult.

The manager confirmed that no complaints were received since the previous care inspection on 2 September 2015. Compliments records were also recorded and maintained by staff.

The inspector discussed the monitoring arrangements under Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. A monitoring visit had been undertaken on 22 February 2017. Three monitoring reports were reviewed from December 2016 to February 2017. The monitoring officer reported on the conduct of the day care setting and any improvements required were put into an action plan.

The certificate of registration issued by RQIA was displayed in a prominent position in the day care setting.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

Based on the findings of this care inspection RQIA concluded that the day care service was well led. There was evidence of good leadership, robust and effective management and governance systems in Carn Court Day Care which were focused on the needs of service users.

Three service users' questionnaires confirmed that the service was managed well. The service users also confirmed that staff had responded well to them and they are asked what they would like to do in the setting. The service users stated that they knew the manager and could talk to the manager if they had any concerns.

### Areas for improvement

No areas for improvement were identified during the inspection.

<b>Number of requirements</b>	0	<b>Number of recommendations</b>	0
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### 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.



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