

Unannounced Care Inspection Report 13 September 2017



Meadowcraft Day Centre incorporating The Church Hall

Type of Service: Day Care Setting
Address: 11 Main Street, Richill, BT61 9PJ
Tel No: 02838870932
Inspector: Suzanne Cunningham

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 with 60 places that are spread across two sites in Richill, the main site Meadowcraft and The Church Hall. Day care and day time activities are provided for adults living with a learning disability who may also have physical disability, sensory disability, autism, mental health needs, challenging behaviour and/or dementia.

3.0 Service details

Organisation/Registered Provider: Armagh Care Services	Registered Manager: Mr Daniel McHugh
Responsible Individual(s): Mr Daniel McHugh	
Person in charge at the time of inspection: Paul Murtagh Deputy Manager	Date manager registered: 04 December 2008
Number of registered places: 60 - DCS-LD, DCS-LD(E)	

4.0 Inspection summary

An unannounced inspection took place on 13 September 2017 from 09.30 to 15.00.

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

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the establishment was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to staff recruitment, training and staff support, safeguarding, risk management, the environment, care records, staff approach, the ethos of the day care setting, listening to and taking account of the views of service users, governance arrangements, management of complaints and quality improvement.

One area requiring improvement identified was regarding policies and procedures.

Service users across the two locations said they liked doing activities and were looking forward to preparing for the settings annual show. One service user said they have a “day of fun” when they come to the day care setting. Service users in the Church Hall said staff helped them to do craft activities and helped them choose what they like to do.

One relative in Meadowcraft said the day care was “absolutely brilliant” and described their relative gets out for walks, trips and enjoys doing craft activities.

The findings of this report will provide the establishment with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users’ experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	1

Details of the Quality Improvement Plan (QIP) were discussed with Paul Murtagh, Deputy Manager, 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.

4.2 Action/enforcement taken following the most recent care inspection dated 19 September 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 19 September 2016.

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 from the registered manager and responsible person
- Incident notifications which revealed seven incidents had been notified to RQIA since the last care inspection in September 2016
- Unannounced care inspection report 19 September 2016.

During the inspection the inspector met with:

- The Deputy Manager
- Five service users in Meadowcraft
- Three care staff in Meadowcraft
- Five service users in The Churchall
- Two care staff in The Churchall
- One relative in Meadowcraft.

Questionnaires were given to the staff on duty to distribute between service users, representatives and staff. Four were returned by service users, three were returned by staff and two by relatives.

The following records were examined during the inspection:

- One individual staff records
- Four service users care files
- A sample of service users' daily records
- The complaints/issue of dissatisfaction record from April 2016 to September 2017
- A sample of incidents and accidents records from September 2016 to September 2017
- The staff rota arrangements during June, July, August and September 2017
- The minutes of service user meetings and consultations held in April, May, June and July 2017
- Staff meetings in the form of group supervision held three to four times per month in 2017
- Staff supervision dates for 2017

- Monthly monitoring reports from May to August 2017
- The staff training information for 2016 & 2017
- The settings statement of purpose and service user guide.

One area for improvement identified at the last care inspection was reviewed and assessment of compliance recorded as met.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 19 September 2016

The most recent inspection of the establishment was an unannounced care inspection.

The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 19 September 2016

Areas for improvement from the last care inspection		
Action required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 21 (b)(c) Stated: First time	The registered person must ensure that all information and documents as specified in Schedule 2 have been obtained before employing persons to work in the day care setting.	Met
	Action taken as confirmed during the inspection: Inspector confirmed the documents specified in schedule 2 were obtained by the organisation and checked to assure the staff prior to commencing met the selection criteria which assures staff provide safe, effective and compassionate care. The records were kept at the organisations main office and were made available for inspection	

6.3 Inspection findings

6.4 Is care safe?

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

The settings daily staff arrangements and records were inspected for June, July, August and September. This provided evidence that sufficiently qualified, competent and experienced persons were working in the centre to meet the assessed needs of the service users, taking into account the size and layout of the two premises, the number of service users, safety needs and the statement of purpose. The capacity in which staff worked was recorded as was who was in charge of the centre.

Competency and capability assessments for staff who acted up in the manager's absence had been completed, the senior day care workers competency assessment was inspected and this showed the day care worker who may be in charge understood and had the knowledge to fulfil their role and responsibility in the absence of the manager. Discussion with the deputy manager and senior day care worker confirmed they were knowledgeable regarding the day care setting regulations and standards. Discussion with two support workers who commenced their post since the last inspection revealed they were aware of their role and responsibilities in the setting, understood the need to respond to safeguarding concerns and report any concerns to their senior. However it was evident they were still learning and growing in confidence, the staff confirmed they felt they were well supported by the management team and would seek advice from the manager, deputy manager or senior in charge at any time.

The induction programme in place for all grades of staff was the organisational induction and this included assessment of the staffs competency to ensure new staff have the right level of knowledge, skill and understanding to provide safe, effective and compassionate care.

One individual staff record was examined and there was evidence the staff recruitment process included recruitment checks that were consistent with the day care setting standards which examined the individual's suitability for recruitment into a day care position, and the induction record which included the NISCC competency standards.

The settings training record recorded staff had received mandatory training and training relevant to their roles and responsibilities. Examples of training staff received in 2016 and 2017 were eating and drinking; infection prevention and control; fire awareness and drills training; manual handling; safeguarding and vulnerable adult training; managing challenging behaviour training; mental health training; and Diabetes training. This range of training was relevant to the service users groups needs and included mandatory training.

Discussion with staff during inspection revealed staff regarded training as one of the ways the organisation had guided and informed them how to provide the right care safely, effectively and compassionately. Other support mechanisms were guidance from the senior, team meetings and supervision.

Discussion with one relative identified they feel their relative was very safe in the day care setting and were "delighted" he was in day care in Meadowcraft. The relative described "staff watch him" and "always keep an eye on him". This was important to the family because their

relative is deaf. They also felt the secure front door was safe for their relative so they couldn't wander out.

The examination of the settings incidents, accidents and notifications forwarded to RQIA found safety issues and risks had been identified and managed. Assessments and care plans had been reviewed and updated as necessary to ensure practice was safe and effective. The sample of records inspected indicated the relevant incidents/notifiable events were reported to RQIA and other relevant organisations in accordance with the legislation and procedures.

Discussion with the manager and inspection of records confirmed safeguarding and vulnerable adult concerns had been fully recorded and promptly referred to the relevant persons/agencies and investigated in accordance with procedures and legislation. Discussion with staff revealed they felt staff care ratios were good, there had been new staff since the last inspection and training had been delivered. The staff team were described they were supportive of each other and management were identified as supporting the whole staff team to provide safe and effective care through provision of training, supervision, team meetings and induction processes.

During the inspection observations of the environment and inspection of records revealed the environment presented as clean and furniture presented as fit for purpose. Discussion with staff revealed they felt the space in Meadows was functional for service users; there was a lift to the first floor and open space for service users to undertake a range of activities. Downstairs there were smaller rooms for dining, a soft relaxing room, space to watch TV and a small activity room. Service users with more complex personal care needs tended to stay downstairs during the inspection and more independent service users were observed making their way around the setting to take part in activities of their choice. The group rooms did not present as overcrowded.

Fire safety precautions were inspected and it was noted fire exits were unobstructed, and the fire drill & fire risk assessment had been updated in the last 12 months.

Three staff returned questionnaires to RQIA post inspection, they identified they were "Very Satisfied" regarding questions on "is care safe" in this setting. They identified service users were safe and protected from harm in the setting; they had received safeguarding training and other training essential for their role and have working knowledge of safeguarding policies and procedures; they would report poor care to their manager; risk assessments and care plans were in place for service users and they receive supervision and appraisal.

Four service users returned questionnaires to RQIA post inspection. They identified they were "Very Satisfied" to "Satisfied" regarding the questions "is care safe" in this setting. They identified they felt safe in the setting, the setting was comfortable; and they could talk to staff.

Two relatives returned questionnaires to RQIA post inspection. They identified they were "Very Satisfied" regarding the questions "is care safe" in this setting. The questionnaires identified their relatives were safe and protected from harm, they can talk to staff about a range of matters, and the environment is suitable.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff recruitment, training and staff support, safeguarding, risk management and the day care setting environment.

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 care effective?

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

The centre's statement of purpose and service users guide contained information required by Regulations and Standards and the content was consistent with the settings registration with RQIA.

Four service user's care files were inspected; they contained the service user's individual assessments and care plans which recorded each individuals needs and how they will be met in day care. Each service user had an individual written plan/agreement and each service users communication preferences were recorded for staff reference.

The inspection of the care records found they were maintained in line with the legislation, the assessments of need, risk assessments, care plans and records of health and well-being of the service users were current and had been reviewed. Records were stored safely and securely in line with data protection. Staff discussion confirmed they use these records to guide their practice and ensure the care provided is effective. They recognised the importance of adhering to plans and if they noticed a change they would report this to ensure records were current and relevant. Care files had been audited by the managers to ensure information remained current and had been reviewed.

Care plans had been reviewed with service users in a timely manner, referrals to other professionals had been made if needs changed or the plan was not working, overall the settings management of service user's records had enabled staff to recognise service users' needs and respond to them effectively.

Observations of service users showed they were familiar with staff caring for them in their room and around the setting. One service user said he could speak to staff and they help him to do the activities he likes to do, he also said he can ask any of the staff if he needs help.

Discussion with staff confirmed they were knowledgeable regarding safeguarding service users in their care. Overall the discussions with the two new staff revealed were able to discuss their views regarding safe, effective and compassionate care; however they lacked confidence in expressing their views. The manager was advised to continue developing opportunities for staff to explore and discuss what safe, effective and compassionate care is, this should further develop their confidence, skills and approach.

Three staff returned questionnaires to RQIA post inspection, they identified they were "Very Satisfied" regarding questions on "is care effective" in this setting. They identified service users got the right care, at the right time, with the best outcome for them; service users were involved in their plan, staff had the right skills, knowledge and experience to care for the service users; there were systems to monitor quality and safety; staff were informed regarding activities; and staff responded to service users in a timely manner.

Four service users returned questionnaires to RQIA post inspection. They identified they were “Very Satisfied” regarding questions on “is care effective” in this setting. They identified they got the right care, at the right time with the best outcome, staff communicate with them, staff knew their needs and choices, staff helped and encouraged them, they choose activities and were involved in their day care review. One service user wrote “the carers is very good to me”.

Two relatives returned questionnaires to RQIA post inspection. They identified they were “Very Satisfied” regarding questions on “is care effective” in this setting. They identified their relative got the right care, at the right time with the best outcome, staff communicated with their relative, they knew their needs and choices, staff encouraged them to be independent, they can choose activities and were involved in their relatives day care review.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to care records and staff approach.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 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.

Discussion with service users, staff and observation of activities found examples of service users being treated with dignity and respect. Service users were being encouraged to use and develop their independent skills in the setting and given assistance when needed. Service users spoken to in Meadowcraft and The Churchall confirmed they had been asked what they liked to do in day care and their activity plan incorporated their preferences.

Staff gave examples of activities they had facilitated for service users of all abilities, they described delivering art, cooking and physical activities that were informed by service users saying what they wanted to do and seasonal options.

Discussion with staff revealed they work across the settings in the organisation including the care home which they identified helped them to be familiar with all service users, policies and procedures, as well as the culture and ethos of the organisation; that focussed on person centred care.

Staff discussed their understanding of compassionate care and was able to discuss care that was not compassionate citing examples of abuse that had been reported by the media. They identified service users must be given time to communicate, be independent and take part. They also recognised the importance of respecting service user’s views, opinions and preferences. Staffs awareness of poor care was good however advice was given to the deputy manager to help staff articulate what compassionate care is.

The annual service users' quality assurance survey had been evaluated for 2016. A summary report and action plan had been written.

The inspection of this domain confirmed the staff were promoting communication between service users and staff.

Three staff returned questionnaires to RQIA post inspection, they identified they were "Very Satisfied" regarding questions on "is care compassionate" in this setting. They identified service users were treated with dignity and respect, involved in decisions, encouraged to be independent and make informed choices, involved in improvements and informed regarding the service they receive.

Four service users returned questionnaires to RQIA post inspection. They identified they were "Very Satisfied" regarding questions on "is care compassionate" in this setting. They identified they were treated with dignity and respect, staff were kind and caring, their privacy was respected, they can choose activities and they were included in decisions and support they received in the setting.

Two relatives returned questionnaires to RQIA post inspection. They identified they were "Very Satisfied" regarding questions on "is care compassionate" in this setting. They identified their relative was treated with dignity and respect, staff treated their relative well, they had no concerns, they had been consulted and involved in their relatives care and staff advocate for their relative.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the ethos of the day care setting, listening to and taking account of the views of service users.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.7 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 registration certificate was consistent with the service being provided on the day of inspection, was up to date and displayed appropriately. Staff confirmed they had access to a range of policies and procedures in place that they use to guide and inform their practice however a sample of policies were selected to check if they had been reviewed in the last three years and included current guidance which would assure safe and effective practice. The Adult Safeguarding policy was updated in June 2017 however the control of infection, restrictive physical intervention, notifiable events and confidentiality policies were all due for review. An improvement is made in this regard.

Supervision records detailed the staff had received recorded individual, formal supervision at least once every three months and inspection of staff meetings showed they were held three to four times a month in a group supervision format. The content recorded detailed discussions of staff being informed regarding service users' needs, best practice examples and potential to improve practice.

Discussion with staff confirmed they were informed regarding the management and staff structure in the setting, they knew who was in charge on the day of the inspection and who they could speak to for advice and support.

Discussion with a visiting relative revealed they were aware of the management structure in the setting and would make contact with the manager, Danny if they had any concerns. The family were assured that their relative was happy in day care because "he is happy when he is going to day care" and "he gives everyone hugs" in day care.

The complaints record was inspected and this showed two complaints had been recorded since the last inspection, they had been responded to in accordance with the settings policy and procedure and the complainant was fully satisfied with the outcome. In both examples learning was recorded and no outstanding concerns remained.

The manager provided audit records of complaints; accidents and incidents; training; supervision, care records, environment and the medicines. The records showed the effectiveness of systems had been audited and findings were recorded to ensure practice was consistent with minimum standards. Improvements were identified by the management team and implemented to improve the quality of care delivered to service users in this setting.

The Regulation 28 monthly quality monitoring visits had been undertaken monthly by the independent monitoring officer. The reports showed the visits included unannounced visits, the format being used ensured the conduct of the setting was audited with outcomes/ findings/ action plans clearly recorded.

Three staff returned questionnaires to RQIA post inspection, they identified they were "Very Satisfied" regarding questions on "is care well led" in this setting. They identified staff felt the service was managed well; quality monitoring was undertaken regularly; management responded to and acted regarding any complaints, issues or suggestions; they could approach the manager regarding concerns; staff meetings were held and communication was effective.

Four service users returned questionnaires to RQIA post inspection. They identified they were "Very Satisfied" to "Satisfied" regarding questions on "is care well led" in this setting. They identified they felt the setting was managed well; they knew who the manager was; the staff responded well to concerns, issues or suggestions and they were asked about what they want to do.

Two relatives returned questionnaires to RQIA post inspection. They identified they were "Very Satisfied" regarding questions on "is care well led" in this setting. They identified they felt the setting was managed well; they knew who the manager was; the staff respond well to communication, concerns, issues or suggestions and they had received information about the complaints process and the setting.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance arrangements, management of complaints and a focus on quality improvement.

Areas for improvement

One area for improvement was identified during the inspection regarding reviewing policies and procedures.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Paul Murtagh, Deputy Manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP to Web Portal assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012	
<p>Area for improvement 1</p> <p>Ref: Standard 18</p> <p>Stated: First time</p> <p>To be completed by: 8 November 2017</p>	<p>The registered person shall review and improve the policies and procedures for this setting so they are current and there is evidence they have been subject to a systematic three year review.</p> <p>Ref: 6.7</p>
	<p>Response by registered person detailing the actions taken:</p> <p>All policies and procedures reviewed and are current.</p> <p>Procedures in place to ensure 3 yearly review of all policies and procedures going forward.</p>



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