



The Regulation and
Quality Improvement
Authority

Everton Centre
RQIA ID: 11177
589/593 Crumlin Road
Belfast
BT14 7GB

Inspector: Ruth Greer
Inspection ID: IN024058

Tel: 02895044106
Email: marka.johnston@belfasttrust.hscni.net

**Unannounced Care Inspection
of
Everton Centre**

8 March 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced care inspection took place on 8 March 2016 from 10 15 to 16 00. Overall on the day of the inspection the day care setting was found to be delivering safe, effective and compassionate care. This inspection was underpinned by The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Settings Regulations (Northern Ireland) 2007 and The Day Care Settings Minimum Standards 2012.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection Outcome

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

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Belfast Health and Social Care Trust/ Martin Joseph Dillon	Registered Manager: Mark Johnston
Person in Charge of the Day Care Setting at the Time of Inspection: Mark Johnston	Date Manager Registered: 2 December 2015
Number of Service Users Accommodated on Day of Inspection: 91	Number of Registered Places: 125

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards and theme have been met:

Standard 5: Care Plan - Where appropriate service users receive individual continence promotion and support.

Standard 8: Service Users' Involvement - Service users' views and comments shape the quality of services and facilities provided by the day care setting.

4. Methods/Process

Prior to inspection the following records were analysed: the registration status of the service; incidents notification and the Quality Improvement Plan (QIP) from the previous inspection.

During the inspection the inspector met with 12 service users, the registered manager and seven staff. There were no visiting professionals and no representatives/family members present on the day. The inspector undertook a tour of the environment and observed staff/service users interactions throughout the day.

The following records were examined during the inspection: the statement of purpose, service users' guide, monthly monitoring reports, accidents/incidents, complaints, supervision audit, six service users' care files, and policies required by legislation and relevant to the standards inspected.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an unannounced care inspection dated 12 December 2014. The completed QIP was returned and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the Last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 20(2)	The registered person must ensure that staff working in the centre are appropriately supervised (Ref. Standard 22.2).	Met
	Action taken as confirmed during the inspection: There was written evidence verified by discussions with staff that supervision is in line with legislative requirements and the Trust's own policy.	

<p>Requirement 2</p> <p>Ref: Regulation 9</p>	<p>The current management arrangements do not present a clear and satisfactory model for the management of the centre and do not meet the requirements of Regulation 9 of The Day Care Setting Regulations (NI) 2007, which states, “The registered person shall appoint an individual to manage the day care setting...”</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection: Mr Mark Johnston has been appointed as registered manager since the previous inspection.</p>		

5.3 Standard 5: Care Plan - Where appropriate service users receive individual continence promotion and support

Is Care Safe?

Service users require varying degrees of assistance with the management of continence. Continence needs are identified at the initial referral stage and a care plan is generated in order to meet the need. An examination of six files showed that all care plans were specific in response to the individuals' preferences as well as needs. The care plans were fully inclusive and were completed in pictorial form as well as English. The care plans had been reviewed regularly and amended as changes occurred.

There was a continence management and promotion policy in place dated May 2015.

An environmental audit of the premises in relation to infection prevention and control had been carried out in February 2015.

Training for staff in the management and promotion of continence had been provided in September 2015.

Is Care Effective?

There was evidence that, in relation to continence management, the centre has undertaken much work to ensure the care in this area is effective. It is commendable that questionnaires in relation to personal care have been devised and provided to service users. A review of the returned questionnaires showed that service users feel their personal care needs are fully met in a manner which suits each individual. One comment stated, “I like the way they (staff) remind me to go.” There are ample toileting and showering facilities available throughout the centre. In discussion with staff they confirmed that they had access to plentiful supplies of personal protective equipment and continence products. Care records showed that, where required as a result of assessment of need, there was an up to date care plan to manage continence. The care plans had been reviewed regularly and amended if necessary.

Is Care Compassionate?

Staff members interviewed spoke knowledgeably of each service user's individual needs and preferences regarding personal care. Staff were articulate and empathetic in describing the potential loss of dignity and independence associated with incontinence and the steps they would take to minimise this. Staff gave many examples of how good quality, compassionate personal care is delivered to individuals in a manner that the person wishes. Staff are commended for their advocacy role in this area, for example where service users' needs mean they are excluded from community facilities. A planned visit to an open farm was not an option due to lack of suitable bathroom facilities. Staff arranged, instead, for the farm staff and some animals to visit the centre. The staff who were interviewed were professional and fully understood the values of dignity, privacy and independence. Overall there was much evidence that the care provided in relation to personal care was compassionate.

Areas for Improvement

There were no areas highlighted for improvement in relation to the management of continence. The centre's approach to and management of this area is highly commended.

Number of Requirements:	0	Number of Recommendations:	0
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5.4 Standard 8: Service Users' Involvement - Service users' views and comments shape the quality of services and facilities provided by the Day Care setting

Is Care Safe?

Evidence from discussions and in written records indicated high levels of consultation with service users and other professionals regarding support plans and the programmes in which service users participate. Meetings of service users are held monthly and minutes were available for inspection. There are robust monitoring and quality assurance systems in place. The manager is diligent in his management audits and a monthly monitoring visit is undertaken by line management. The reports of the most recent monitoring visits (5 January 2016 and 16 February 2016) were examined and found to contain all the elements required by regulation 28. There was evidence that Everton adult centre promotes service user involvement and true empowerment. This was reflected in all aspects of the care provision and supported by policies and procedures in relation to –

- Service user involvement
- Complaints
- Protection of Vulnerable Adults
- Whistle Blowing

Staff members who spoke with the inspector confirmed that they were qualified and experienced in their designated roles. The registered manager, senior staff and care staff have many years' experience in their roles. The staff who met with the inspector confirmed that they were confident in their practice and of other members of the staff team. Staff confirmed that the registered manager was supportive and approachable and that the day centre was well run and managed. There were systems in place to ensure that any risks to service users were assessed continually and managed appropriately.

Is Care Effective?

Service users are fully involved in all aspects of the running of this centre. There was much evidence that service users are central and that their views and preferences underpin and guide all the care proposed and provided. The range of innovative and empowering initiatives inspected was impressive. One example was the Crafted Hands group which is a service user led and operated group which has secured outside funding and operates as a company run by and for service users. Staff role in the group is minimal and mainly for support. The inspector spoke with a service user who has devised peer guidelines and a staff training programme in relation to choking awareness. The service user rolls out his training to Trust staff in all areas, not just the day centre. He has won awards for this work. Staff are highly commended for their support in this project. The RQIA would like to add their congratulations to this service user for his excellent piece of work.

An examination of six care files showed that annual multi-disciplinary reviews take place. Service users invite a representative of their choice to the meeting, and signatures of all attendees were in place on the minute. As a result of discussions with service users and from an inspection of care records it can be confirmed that service users enjoyed fulfilling, well organised and meaningful activities, and that the service is effective in the inclusion of service users in all aspects of the centre care provision. In addition service users are enabled to make their views known through their participation in various forums outside the centre. For example several service users take part in a forum in Knockbracken Healthcare Centre which monitors the provision of meals in the centre. A group of service users contributed to the trust initiative to produce an easy read document "Stop Smoking".

Is Care Compassionate?

Service users made positive comments regarding the care and support delivered by staff, the range of activities and the benefits derived from their attendance at the centre. Throughout the inspection the service users provided strong evidence of caring and supportive relationships with staff and with each other. The centre was welcoming and held many indicators of encouragement for people to make use of the varied active and passive activities available. The manager and staff are commended for their continuing commitment to involving service users in the running of the centre and in seeking development opportunities, including funding, for various projects and activities that contribute to this high quality service.

Areas for Improvement

There were no areas highlighted for improvement in regard to standard 8. The centre is judged to be providing excellent and compassionate care.

Number of Requirements:	0	Number of Recommendations:	0
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No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Mark Johnston	Date Completed	4/4/16
Registered Person	Martin Dillon	Date Approved	4/4/16
RQIA Inspector Assessing Response	Ruth Greer	Date Approved	15/04/16

Please provide any additional comments or observations you may wish to make below:

Please complete this document in full and return to day.care@rqia.org.uk from the authorised email address

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.