



The Regulation and
Quality Improvement
Authority

Mica Drive Day Centre
RQIA ID: 11178
1a Mica Street
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BT12 7BQ

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Unannounced Care Inspection

of
Mica Drive Day Centre
Incorporating Fallswater Day Centre
on
17 November 2015
&
19 November 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An unannounced care inspection took place in Mica Drive Day Centre on 17 November 2015 from 10.40 to 16.30 and Fallswater Day Centre on 19 November 2015 from 09.30 to 15.00. Overall on the day of the inspection the day care service 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 HSC Trust/Martin Joseph Dillon	Registered Manager: Maria O'Hagan
Person in Charge of the Day Care Setting at the Time of Inspection: Maria O'Hagan	Date Manager Registered: 22 June 2012
Number of Service Users Accommodated on Day of Inspection: Mica - 17 November 2015: 37 Fallswater - 19 November 2015: 15	Number of Registered Places: 65

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 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 which revealed 11 incidents had been reported to RQIA
- written and verbal communication received since the previous care inspection which revealed the manager had enquired regarding merging the registration of Fallswater Day Centre with Mica. The manager was advised to submit a variation of registration; and this was completed prior to this inspection.
- the returned quality improvement plan (QIP) from the care inspection undertaken in February 2015 regarding the previous year's inspection standards. No recommendations or requirements had been made.

During the inspection, care was observed by the inspector and a tour of the general environment took place. The inspector met with all of the service users and staff in Fallswater and Mica during the two days of inspection. Eleven service users and one staff member in Mica and three service users and two staff in Fallswater completed RQIA questionnaires which have been used as part of this inspection. There were no visiting professionals or representatives/family members available for discussion during the inspection.

The following records were examined during the inspection:

- The settings statement of purpose and service user's guide.
- Five (Mica) three (Fallswater) service users individual care records including care plans, assessments and review documentation.
- Five (Mica) none (Fallswater) complaints/issue of dissatisfaction received since the last inspection.
- A sample of the setting's monthly monitoring visit records (regulation 28) for April, August and October 2015 (for Mica and Fallswater).
- A sample of the setting's incidents and accident records recorded since December 2014 to November 2015.
- A sample of the service users' meetings from January to September 2015 (Mica and Fallswater).
- Minutes of two user council meetings held in 2015.
- The setting's annual quality assurance arrangements; focus on communication.
- Policies and procedures regarding standards 5 and 8.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the Mica Drive Day Centre was an announced care inspection dated 4 February 2015. The completed QIP which had no recommendations or requirements was returned and approved by the care inspector. The previous inspection of Fallswater Day Centre was an unannounced care inspection dated 11 December 2014. The completed QIP

which detailed one recommendation and no requirements was returned and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the last Care Inspection (Fallswater)

Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 22.2	The registered manager should make appropriate arrangements for all staff, including those on temporary or agency contracts to be supervised in compliance with this standard and criterion. That is, individual supervision should be provided to all staff, no less than every three months.	Met
	Action taken as confirmed during the inspection: The review of agency staff supervision provided evidence agency staff had been provided with an opportunity to meet with a day care worker and discuss training, policies and procedures and service users' needs.	

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

Is Care Safe?

There are currently around 10 per cent of service users in Mica and about one third of service users in Fallswater who require a specific care plan regarding continence care and promotion. The staff team had worked on how choice and need is communicated with service users prior to this inspection and this involved two actions. Firstly a continence support plan was completed with the service users whom have an identified need and secondly questionnaires were issued to the service users to ascertain how they felt about how their intimate and personal care needs are met in the setting, if they are happy with the care they had received; and could staff do anything better. Overwhelmingly the responses identified all of the service users involved were happy with their care and felt their dignity and privacy was being respected. The review of the completed documentation identified the methods of communication used included questionnaires using symbols and pictures; this is to ensure service users could fully participate in the consultation and discussion. The information collected from service users clearly reported their choices and preferences, therefore the inspection concludes this process was inclusive and person centred. Furthermore, this is evidence that staff are actively seeking service users' and their representatives' views and incorporating them into practice to ensure that choices and any issues of concern are recorded and acted on

There is a continence promotion policy and procedure in place dated May 2015; the procedure details arrangements for identifying and meeting continence needs. This could be updated to include the processes undertaken in Mica and Fallswater such as the questionnaire and person centred plan. Advice was given in this regard. Each centre had a continence promotion file which detailed the day centre's processes for responding to concerns and delivering intimate

care. This included the guidance and protocols for infection prevention and control, moving and handling and guidance regarding personal and public involvement and human rights.

Five (Mica) and three (Fallswater) service users' individual records including the needs assessment, risk assessments and care plans were sampled as part of this inspection and this concluded information had been kept under review, amended as changes had occurred and kept up to date to accurately reflect at all times the needs and preferences of the service user. The needs assessment and care plans were appropriately signed.

Discussions with staff provided assurance they had knowledge of the continence products used by service users, their needs and when to use Personal Protection Equipment (PPE). Practice described also presented as consistent with current infection control guidance.

Staff had received continence training which covered the areas of continence promotion and products for service users who attend learning disability services in September 2015.

The observations of the environment, including odour, location/storage of PPE and continence products presented as in keeping with infection control guidance. Discussion with service users in Mica and Fallswater revealed they know where the toilets are and they had no concerns accessing them. At the time of the inspection the service users in Mica were being consulted regarding the Fallswater service users moving to Mica; one service user was concerned that there will not be enough toilets. However, staff discussed the merging of the two centres would also include service users moving to other settings such as day opportunities; therefore service user numbers in Mica would not increase above current numbers.

Discussion with service users and review of the 11 RQIA questionnaires completed by Mica service users; and three completed by Fallswater service users revealed they felt satisfied to very satisfied that they are safe and secure in this setting. Two service users in Mica and one service user in Fallswater felt unsatisfied regarding staffing levels in the centres. Their concerns centred on when they were short staffed. One service user commented: "Not enough staff when staff go out, then not enough to meet everyone else's needs." Another service user commented: "Sometimes there is not enough staff; we used to have three staff in this room, now we have one." However, further discussion with the staff member in the room and the service users identified this group are very independent and the staff facilitate their involvement in community activities rather than deliver personal care; therefore additional staff are not required. The discussion with the remaining service users confirmed on some occasions there are less staff but they felt this was due to unexpected absences and usually there is enough staff. The remaining 12 service users felt satisfied to very satisfied regarding staffing levels. Service users commented: "I'm safe"; "I feel safe because there are fire exits and I know I can get out if there is a fire" and "Staff stay with us if we are in wheelchairs or not able to look after ourselves".

Two staff in Fallswater and one staff member in Mica returned RQIA questionnaires; they reported staff felt satisfied to very satisfied with training provided, two staff felt unsatisfied and one staff member felt very satisfied with timely support from the multi-disciplinary team. The three staff were very satisfied with equipment being obtained in a timely manner, two staff were very satisfied and one staff member in Mica felt unsatisfied with the environment. Staff commented: "Very limited resources, lack of seats in group rooms and kitchens." and "Access for service users using wheelchairs is restricted in certain areas". This was discussed with the staff member who was concerned the chairs in their room go missing when they go on outings, so when they return there is not enough furniture. These comments have been passed to the

manager to ensure Mica is accessible to all service users, staff receives timely support from the multidisciplinary team and there is enough furniture to meet the needs of the service users in the setting.

In conclusion the inspection of the care plan and practice revealed service users receive individual continence promotion and support. The care plans promote safe delivery of care.

Is Care Effective?

The continence products used by service users in this day centre are clearly identified within their person centred plan and products were stored in the day care setting as agreed with the service user/ representative. A walk around the toilet facilities evidenced there were appropriate supplies of continence products and staff were aware of how to meet assessed needs.

Discussion with service users revealed they did feel they had been asked their views and their preferences had been incorporated into their care plan. Service users gave examples of when they had been listened to and this was mainly to gain one to one support.

The manager had introduced a discussion document for those who have continence needs and this had helped to identify continence issues and preferences. If needs changed the manager explained staff would liaise with the service user, the carer or relative regarding making a referral for assessment or reassessment. Staff also discussed they are aware continence support may become a concern because of illness, emotional need etc.

Two staff in Fallswater and one staff member in Mica returned RQIA questionnaires. They identified they are satisfied to very satisfied they have access to supplies of continence products, PPE and based on the care plans staff feel they have sufficient knowledge, skills and experience to assist service users with personal care.

Discussion with service users and review of the 11 RQIA questionnaires completed by Mica service users and three completed by Fallswater service users revealed they felt very satisfied to satisfied the staff are effective and know how to care for them and respond to their needs. Service users commented: "If I need help for the bathroom, a male helps and they do it right", "We tell them (staff) then they know", "We can talk to staff in private", "Staff are always there for us to talk to" and "They (staff) encourage me". Overall this was positive feedback that showed service users felt comfortable discussing their needs with staff and they felt the care they had received was effective.

In conclusion the inspection of standard 5, the care plan identified service users receive effective individual continence promotion and support.

Is Care Compassionate?

The inspection included observation of staff working with service users and discussions with staff and service users. This concluded staff are knowledgeable regarding individual needs and demonstrate a person centred approach when communicating with individuals and a group. The inspection identified staff use values such as respecting privacy, dignity and promoting choice and independence when delivering care and in records, this ensures care is person centred when staff are meeting identified needs such as continence promotion.

Discussion with service users and review of the 11 RQIA questionnaires completed by Mica service users and three completed by Fallswater service users revealed that they were satisfied the staff assist them when necessary to meet their continence needs. Thirteen of the service users reported they felt satisfied to very satisfied with the care and support they had received. One service user reported they felt unsatisfied and this was raised with the staff member at the time who advised this was a result of their general feeling about day care and potential changes in day care at the time of the inspection. One comment made was: "Staff make us feel very happy, they take us on outings, they are there for us if we have a problem, issue or need to talk. They listen to us".

Two staff in Fallswater and one staff member in Mica returned RQIA questionnaires which detailed they feel very satisfied service users are afforded privacy, dignity and respect at all times and service users are encouraged to retain their independence and make choices.

In conclusion the inspection of standard 5, the care plan does inform care regarding individual continence promotion and support. Staff were using the care plan to deliver person centred care to the service users and were therefore using a compassionate approach.

Areas for Improvement

No areas for improvement were identified regarding Standard 5 - Care Plan: Where appropriate service users receive individual continence promotion and support.

Number of Requirements	0	Number 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?

During the inspection of Mica Drive the staff were observed actively seeking service users' views and incorporating these into day to day practice. The focus of staff was on ensuring views, choices and issues of concern are being recorded and acted on. Staff were observed taking a person centred approach to care and they presented as knowledgeable regarding each service user's individual modes of communication and needs.

The inspection of five files in Mica Drive provided evidence the needs assessment, risk assessments and care plans are being kept under continual review, amended as changes occur and kept up to date to accurately reflect at all times the needs and preferences of the service user. The needs assessments and care plans had been appropriately signed. The person centred plans and annual review preparation showed the meetings are being held in a person centred way which involves service users and any representatives they wish to invite.

There are policies regarding:

- service users' meetings and forums
- service users' involvement in activities and events
- communications with carers and representatives
- safe and healthy working practices.

Service users meetings (group based in Mica Drive), service user forums (Belfast Trust meetings for all LD day centres) and monitoring reports showed service users are encouraged to contribute to the agenda and discussion regarding their attendance at the centre and their views, opinions and choices are recorded to ensure care is responsive to the needs of the group.

In conclusion, the inspection revealed staff promote service users' involvement in this setting by gathering service users' views and comments in a variety of ways. The service user comments and preferences had been used to shape the quality of services and facilities provided by the day care setting and ensure care is safe and responsive to service users' needs.

Is Care Effective

In Mica Drive there was a range of methods and processes where service users' and their representatives' views had been sought, recorded and included details of the action taken, for example the annual review, the questionnaires and surveys that are given to service users during the year, the service user meeting groups in Mica Drive & Fallswater and Belfast Trust forums. Service users are encouraged and enabled to be fully involved in and given opportunities to influence the running of the day care setting through these methods and in day to day discussion when attending Mica Drive. Documentation reviewed was:

- Files: a total of eight service user individual records were reviewed in Mica and Fallswater. The individual files contained evidence of assessment; care planning documentation; activity records; risk assessment; review documentation and minutes. The review of these files identified service users' communication needs and methods had been explored with the service user and if appropriate their representative or relative. The detail was specific to each person and did not just detail how they communicated but also included what they says and what each service user means by what they say if there might be confusion. Service user preferences and choices were clearly described as were their feelings about the care they receive.
- Complaints: From 1 January 2014 to 31 March 2015 no complaints had been recorded in Fallswater and five had been recorded in Mica. The complaints records were reviewed and the issues of dissatisfaction had been investigated by the manager and responded to in compliance with the settings policy and procedure. The complainant's satisfaction was recorded and further areas of dissatisfaction were reported on to the complaints officer in the trust and the social worker supporting the service user, for further investigation. No improvements were required.
- Service user meetings: these had been held at least monthly in each room. A sample of minutes from January to September provided evidence the staff were facilitating service users' involvement in agenda items as well as keeping them informed regarding changes in the settings. Latterly staff had raised the proposal to close Fallswater and move to Mica to enable service users to express their views and concerns regarding the proposal.
- User council meetings: This is a Belfast Trust forum; service users who represent each setting attend meetings in the trust three times this year. The minutes showed the day centres in the learning disability programme of care had met to discuss what they had done in their centre, raised any issues relevant to the user group, discussed trust issues such as transport provision; and given informative talks for example from speech and language and community teams who may offer support to this user group.

- Monitoring visit: The reports written for April, August and October 2015 were sampled. The reports included consultation with service users, representatives and staff. Improvements identified were recorded in an action plan and a short summary is recorded for service users which uses symbols as well as words and is shared with service users in their room meetings.
- Consultation records regarding the proposal of Fallswater closing and moving to Mica: There has been an inclusive approach taken to communicating this proposal and ensuring service users can communicate their feelings about the proposal such as the use of talking mats, using speech and language professionals to assist in the communication plan, use of small group discussions and one to one discussions.

Observations of interactions between staff and service users showed how interested staff are in service users' opinions and views, the service users knew the inspection was being done in both settings and they were encouraged by staff to give their views. The service users did consistently raise their concern during the inspection that Fallswater is planned to close; they knew some service users will move on and some new service users will come to Mica. Generally service users presented as anxious about the potential move and could not envisage how their needs would continue to be met with new staff and additional service users. Staff were very aware of the service users' anxieties and were offering reassurance when they could.

The staff informed service users the inspection was taking place and service users were encouraged to give their views about the standard of care delivered to the day care setting inspector.

There were policies regarding:

- inspections of the day care setting
- consent
- listening and responding to service users' views
- management, control and monitoring of the setting
- quality improvement
- complaints.

In conclusion the inspection provided evidence of compliance with standard 8. Service users are involved in this service and service users' views and comments are effectively shaping the quality of services and facilities provided by this day care setting.

Is Care Compassionate?

The observation of care in this setting and review of records revealed many examples of service users being listened and responded to by staff that were knowledgeable about individual service users' communication. Staff had received training in SALT and Makaton, and were using other examples such as social stories, talking mats, communication, passports etc.

Service users had been encouraged by staff to be involved by attending service user meetings and forums. One service user did not attend on the day of the meeting in the room and prior to

the meeting was encouraged to talk about issues he may want discuss at the meeting with the day care worker; he was also given the minutes of the meeting.

Person centred planning documentation including the review was enabling service users to be kept informed about their needs identified and issues affecting them. The process used ensures service users are treated with respect. Care was being planned around the service users' needs and choices.

Timetables were drawn up using the most appropriate method of communication for the service user and documents had been signed by the service user and or representatives. Service user involvement was reported by the manager as at the core of the trust values and therefore the day care settings values. Service users and representatives/relatives had been informed regarding the complaints process and the complaints record showed issues of dissatisfaction had been resolved locally and in a timely manner.

Two staff in Fallswater and one staff member in Mica returned RQIA questionnaires from this inspection. One staff member reported they are very satisfied, one reported they are satisfied and one staff member reported they are unsatisfied they have time to talk and listen to service users. The staff member who is unsatisfied was reflecting on the reduction of staff in their room and change of approach due to the independence of the group. Ideally they would like more time to listen and talk to service users, however the main focus of the group was facilitating their independence.

The three staff reported they felt satisfied to very satisfied that care was based on the individual's wishes and needs; service users are involved in the running of the centre; systems are in place to seek service users' views; management respond to service users' issues, concerns or complaints; and service users are kept informed regarding any changes or events. One staff member commented: "This centre is a lovely place to work, the staff work well as a team and service users enjoy being here."

Discussion with service users and review of the 11 RQIA questionnaires completed by Mica service users and three completed by Fallswater service users revealed that 13 of them felt satisfied to very satisfied that their views and opinions are sought about the quality of the service. Service users commented: "I like to play Boccia and that makes me happy", "I feel happy in Mica", "I like doing the word searches, "It (Fallswater) gets me out of the house, stops me looking at four walls. Being in the house does my head in", and "Staff listen to us; take us out on bus runs". One service user identified they were unsatisfied that their views and opinions were sought, however this was in the context of generally not being happy in day care. One service user said: "Staff do spend time and listen, sometimes they haven't time so they ask us to wait". Later in discussion the service user identified they don't mind waiting as staff do come back to them.

In conclusion the inspection of standard 8 regarding service users' involvement showed staff do take a compassionate approach to seeking service users' views and comments which are used to shape the quality of services and facilities provided by the day care setting.

Areas for Improvement

No areas of improvement were identified regarding Standard 8 - Service Users' Involvement: Service users' views and comments shape the quality of services and facilities provided by the Day Care Setting.

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

I agree with the content of the report.			
Registered Manager	Maria O'Hagan	Date Completed	17/12/15
Registered Person	Martin Dillon	Date Approved	17/12/15
RQIA Inspector Assessing Response	Suzanne Cunningham	Date Approved	4 January 2015

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.