

Care Inspection Report

14 September 2016



Shankill Day Centre

Type of service: Day Care Service
Address: 151-157 Shankill Road, Belfast, BT13 1FD
Tel no: 02895043220
Inspector: Dermott Knox

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of Shankill Day Centre took place on 14 September 2016 from 10.15 to 15.45 hours.

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

Is care safe?

The day centre premises were in good condition with no obvious hazards for service users or staff. There is substantial space available for group activities and for individual work with service users, when necessary. Records and discussions with staff and service users confirmed that staffing levels met the assessed needs of the service users. Safeguarding principles and procedures were understood by staff who were interviewed. Risk assessments were carried out routinely in an effort to minimize risks and to manage them consistently. Observation of the delivery of care, throughout the period of the inspection, provided evidence that service users' needs were being met safely by the staff on duty. No areas for improvement were identified at this inspection with regard to the provision of safe care.

Is care effective?

Well-structured assessments and care plans for each service user contributed to the delivery of effective care for those whose circumstances and records were examined at this inspection. Progress and outcomes for service users were recorded using a clear care planning format. The positive value of the day care service was confirmed by all of the service users and staff members who met with the inspector. There was written evidence in review reports of service users, their representatives and a range of community based Trust workers being satisfied with the outcomes of the day care service in terms of benefits for service users. Staff were deployed in a manner that made good use of their skills and experience and enabled the team to function efficiently and effectively. The use of existing resources, including the transport vehicle, facilitated provision of a good range and variety of activities. Staff members spoke of supportive and positive working relationships within the team and with community based professionals. Overall, the evidence indicated that effective care is provided by Shankill Day Centre.

Is care compassionate?

Interactions between staff members and service users were seen and heard to be good humoured, respectful and caring. The discrete manner in which personal care and confidential matters were dealt with was commendable. The caring nature of practices that were observed was reflected in progress records, written at least once for every five attendances of each service user. Staff members confirmed their confidence in the caring qualities of their colleagues and were certain that poor practice would not be tolerated. Eleven service users contributed a variety of positive comments on their enjoyment of attending the centre and on its value to them socially and for both physical and mental wellbeing. Questionnaire responses to RQIA from five service users and from five staff members were unanimous in their positive views of the service in all four of the domains examined at this inspection. The evidence presented at this inspection indicated that compassionate care was provided consistently by the Shankill Day Centre.

Is the service well led?

The Belfast HSC Trust and the Shankill Day Centre have systems in place to ensure that staff are well-informed on the responsibilities of their various roles and the expected standards of practice. There is a well-planned programme of training and staff are supervised and well supported within the team. Evidence from discussions with staff indicate that the manager has positive working relationships with members of the staff team and that they have the confidence and support of their colleagues. Service users in the centre stated that the service was well organised and well suited to their needs. Records of service users' meetings and staff meetings were satisfactory. Monthly monitoring reports were clear and comprehensive. There was evidence of good leadership in all of the key aspects of the service that were examined at this inspection, including deployment of staff, staff training, care planning, reviewing care programmes, and management of the environment.

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

1.1 Inspection outcome

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

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Kerry Maguire, day care worker, 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 care inspection on 04 June 2015.

2.0 Service details

Registered organisation/registered person: Belfast HSC Trust/Mr Martin Joseph Dillon	Registered manager: Mr Jason McIlvenna
Person in charge of the service at the time of inspection: Kerry Maguire, Day Care Worker	Date manager registered: 17 August 2010

3.0 Methods/processes

Prior to inspection we analysed the following records:

- Record of notifications of events
- Record of complaints
- Quality Improvement Plan from the previous inspection on 04 June 2015
- The statement of purpose.

During the inspection the inspector met with:

- Eight service users in two separate group settings
- Three service users in one to one discussions
- Three care staff, two of whom for individual discussions.

Questionnaires were left with the manager to be distributed to service users, staff and a number of relatives or carers of service users. Three completed service users' questionnaires were returned to the inspector on the day of the inspection and three from staff members were returned electronically within the following week.

The following records were examined during the inspection:

- File records for four service users, including care plans and review reports
- Progress notes for four service users
- Monitoring reports for the months of January, April and August 2016
- Record of complaints
- Minutes of a service users' meeting, held on 29 July 2016
- Minutes of four staff meetings, held in October and November 2015 and April and July 2016
- Training records for one staff member
- A sample of written policies, including those on 'Recruitment and Selection', 'Induction Policy and Management Guidelines', 'Staff Supervision' and 'Protection of Vulnerable Adults'.
- Service User Guide
- A report of the Quality Assurance Survey, carried out in late 2015, with the report being issued on 02 March 2016.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 08 December 2015

The most recent inspection of the service was an announced premises inspection. The completed QIP was returned and approved by the specialist inspector. This QIP will be validated by the specialist inspector at the next premises inspection.

4.2 Review of requirements and recommendations from the last care inspection dated 04 June 2015

Last care inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 21.8 Stated: First time	The registered manager should develop a Staff training record that is compliant with this standard. The record should be available for future inspections. The returned QIP should confirm this record has been established, will be maintained, updated and available for future reference by staff or for inspection.	Met
	Action taken as confirmed during the inspection: Training records for staff working in the day centre are now kept on the Trust's computer network. They were not examined at this inspection. Individual staff have access to their own records and take responsibility for maintaining their NISCC related learning and development portfolio. The registered manager confirmed, by phone, that all training records are kept up to date and that the schedule for staff training is comprehensive.	

4.3 Is care safe?

Two staff members, who met individually with the inspector, confirmed that they have confidence in the practice of all other members of the staff team, in their work with service users. Two day care workers are assessed as capable and competent to take charge of the centre in the manager's absence and one of these staff was in charge throughout the day of this inspection. Recruitment and selection methods were reported by staff members as being standardised and professional, in keeping with the Trust's procedures.

There were systems in place to ensure that risks to service users were assessed regularly and managed appropriately and this included inputs by community based professionals, service users and, where appropriate, a relative/carer. Written risk assessments, including transport and moving and handling, were present, where relevant, in service users' files and each one had been signed as agreed by the service user or a representative. A small number of service users made their own way to and from the centre, some living within one or two hundred yards of the premises. Fire alarm systems checks were carried out and recorded on a weekly basis. A fire risk assessment was completed for the centre on 31 July 2016, following which an action plan was drawn up to address identified risks. A personal evacuation plan (PEEP) for each person was available on file.

Nine questionnaires were completed and returned to RQIA; five by staff members and four by service users. Respondents were unanimous in their praise of the quality and safety of care provided. During the inspection visit, three service users contributed, individually in discussions, to the inspection process and spoke very positively of the quality of care provided at the centre and of their enjoyment in taking part in the various activities. All three confirmed that they felt safe in the centre, in the transport bus and in organised activities. In group discussions, several service users praised the quality of the cooked lunches provided for them, saying that they were always of a good standard and were suitable for each individual's needs. A cook is employed part-time in the centre. She was knowledgeable of each person's dietary needs and communicated in a relaxed and supportive manner with service users.

Service users' rights and the methods available to them of raising a concern or making a complaint are made clear in writing in each person's agreement, when they first attend the centre. Service users' satisfaction with the quality of care is a regular agenda item for their meetings. Evidence from discussions, observations and in written records indicated that staff seek the views of service users regarding their care preferences and the activities in which they wish to participate. Staff presented as being well informed of the needs of service users and of methods of helping to meet these needs safely.

Two notifiable events had been reported to RQIA in the year preceding this inspection. One was judged by staff to be a low risk event while the other, much higher risk event, had involved a vulnerable service user being left 'home' at the wrong address by a contracted taxi company. Each of these events had been managed appropriately by the manager and staff. There had been one complaint, regarding an environmental matter, recorded in the year preceding the inspection and this had been resolved to the full satisfaction of the complainant.

The centre was clean, very spacious, well decorated and in good repair. Service users confirmed that they were provided with a safe and comfortable environment in which to take part in activities. There was wide-ranging evidence to support the conclusion that safe care is provided in The Shankill Day Centre.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements:	0	Number of recommendations:	0
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4.4 Is care effective?

The Belfast HSC Trust has quality assurance systems in place, through which operations are monitored and staffs' practice is evaluated. The manager and staff members' confirmed that formal supervision and annual appraisals were taking place regularly. Records of staffs' training were up to date and there was evidence from discussions with staff to confirm that the team was supportive and well-motivated to provide effective, high quality care. A number of service user's records included reports by other professionals, e.g. Speech and Language Therapists, Occupational Therapists and Physiotherapists. Staff stated that they had good working relationships with these community services which they regarded as an important part of the overall effectiveness of the support for service users.

Four service users' files were examined and each was found to contain detailed referral and assessment information on the individual and on his or her functioning. Consent forms, signed by the service user, or a representative, were present in each file. Care plans were clearly set out and had relevant care objectives and identified actions required to achieve these. Review outcome reports provided evidence that an evaluation of the overall suitability of each placement had been discussed in detail and agreed.

A record was kept of each service user's involvement and progress at the centre and entries were in proportion to the frequency of attendance of the individual. Eight service users discussed their experiences of participating in the centre's activities and in their individual care programmes and presented positive views of the support that they received from all staff.

Three service users, individually, discussed their experiences of participating in the centre's activities and in their care programmes and presented very positive views of the care and support that they received. Similar positive comments were made by four other service users who were participating in a music and sing-along session and spoke of the enjoyment and general benefits they felt they gained from this and other activities.

The evidence indicates that the care provided is effective in terms of promoting each service user's involvement, enjoyment and wellbeing.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements:	0	Number of recommendations:	0
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4.5 Is care compassionate?

Observations of activities throughout the centre provided evidence of service users relating positively to staff. There was evidence of positive and purposeful relationships between service users and with staff members, who presented as being committed to providing service users with a supportive and enjoyable experience at the centre. In all of the interactions observed, service users were engaged with warmth, respect and encouragement.

Over a morning cup of tea and slice of toast, service users confirmed that staff involve them in deciding what they want to do during their time in the day centre. Several people stated that the most important things for them were the regular contact with others and knowing there was a safe and supportive place for them to spend some time each day. Observation of events throughout the day confirmed that service users were afforded choice and were seen to be encouraged in constructive activities by staff. There was a strong sense of camaraderie amongst various sub-groups within the centre.

There were systems in place to ensure that the views and opinions of service users were sought and taken into account in all matters affecting them. Staff demonstrated an understanding of each service user's assessed needs as identified within the individual's care plan. Responses in all four of the service user questionnaires, returned to RQIA, affirmed strongly that compassionate care was delivered to a high standard within the day care setting. Responses in these questionnaires, plus five from staff members, all rated the service very highly. During each monthly monitoring visit, the views of a sample of service users were sought and their comments were included in all three of the monthly reports examined, January,

April and August 2016. The centre's report of The Annual Survey/Review of the Quality of Care for 2015, provided evidence of consultation with both service users and their representatives. Comments in the centre's annual survey questionnaires, included:

"Very satisfied with everything", and "My father gets so much out of his time there".

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements:	0	Number of recommendations:	0
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4.6 Is the service well led?

The Belfast HSC Trust has clear management information set out in the statement of purpose and in the service user guide, so that stakeholders know the leadership and decision making structure regarding social care services, including day centres. There was evidence from discussions with the manager and staff members to show that staff were appropriately qualified for their designated roles. A system is in place for the identification of staffs' training needs and for meeting these, including planned training days for the provision of mandatory training. Other specific training needs were met throughout the year on an individual basis; for example the manager and a day care worker were attending training on the day of this inspection, on the PARIS system for records management and sharing. The day care worker in charge in the manager's absence had completed a competence assessment for this leadership role.

There was reported evidence from staff of positive working relationships between the registered manager and the staff team members and amongst the whole team. Systems were in place for the provision of staff supervision and support and staff who met with the inspector confirmed that formal supervision was supportive and regular. The staff member in charge confirmed that full recruitment and selection records are held at the Trust's Human Resources Department. The Trust's written policy on Recruitment and Selection has an operational date of June 2016 and confirms that all necessary employment checks are carried out for new staff before they take up their post. The policy is clear and comprehensive and includes sections on: Value Based Recruitment, Pre-employment checks, Identity Verification, Access NI and all of the required steps to ensuring fair and safe employment practices.

Examination of three monitoring reports showed that all of the required aspects of the centre's operations were rigorously checked, with action plans completed to ensure that identified, necessary improvements would be addressed within a specified timescale. Monitoring reports were well detailed in their inclusion of the views of service users, their relatives and staff members and it was evident that they made a constructive contribution to quality improvement in the centre.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations	0
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5.0 Quality improvement plan

There were no areas for improvement 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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