

Unannounced Care Inspection Report 22 January 2020



Rosebrook House

Type of Service: Day Care Setting
Address: Brook House, Coleraine, BT52 1QG
Tel No: 02870343084
Inspector: Angela Graham

www.rqia.org.uk

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 12 places that provides care and day time activities for people living with dementia. The day care setting is open Monday to Friday and is managed by the Northern Health and Social Care Trust (NHSCT).

3.0 Service details

| | |
|---|--|
| Organisation/Registered Provider: Northern Health and Social Care Trust Responsible Individual: Anthony Baxter Stevens | Registered Manager: Sylvia Campbell |
| Person in charge at the time of inspection: Sylvia Campbell | Date manager registered: 24 October 2018 |
| Number of registered places: 12 | |

4.0 Inspection summary

An unannounced inspection took place on 22 January 2020 from 10.25 to 15.10.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, 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 day care setting was delivering safe, effective and compassionate care and if the service was well led.

One area requiring improvement was identified regarding the staff duty roster.

Evidence of good practice was found in relation to staff members' registrations with the Northern Ireland Social Care Council (NISCC), infection prevention and control practices and staff training.

Service users were asked to provide their views regarding the day care setting. Examples of some of the comments made by service users are "I am happy to come here"; "the dinner is lovely and I get lots to eat" and "all is good".

The findings of this report will provide the day care setting 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 Sylvia Campbell, manager, the deputy manager and the senior day care worker, 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 6 June 2018

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 6 June 2018.

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 by RQIA since the last inspection
- incident notifications which highlighted that no incidents had been reported to RQIA since the care inspection on 6 June 2018
- unannounced care inspection report and QIP dated 6 June 2018.

During the inspection, the inspector met with the manager, the deputy manager, a senior day care worker, two support workers and a visiting relative. Introductions were made to all service users while walking around the setting with individual interaction with five service users.

Ten service user and/or relatives' questionnaires were provided for distribution; two service user/relatives questionnaire were returned to RQIA within the timeframe for inclusion in this report.

All respondents indicated that they were very satisfied that the care being provided to service users was safe, effective, compassionate and well led. One respondent made the following comment; "A really worthwhile service without which my wife's and my quality of life would be greatly reduced."

At the request of the inspector, the manager was asked to display a poster within the day centre. The poster invited staff to provide their views electronically to RQIA regarding the quality of service provision; one response was received. The respondent indicated that they were very satisfied that the care being provided to service users was safe, effective, compassionate and well led.

The inspector requested that the manager place a 'Have we missed you' card in a prominent position in the day centre to allow service users, relatives and staff who were not available on the day of the inspection to give feedback to RQIA regarding the quality of service provision. No responses were received.

An RQIA information leaflet 'How can I raise a concern about an independent health and social care service' was also provided to be displayed in the day care setting.

A range of documents relating to the service were reviewed during the inspection and are referred to within the body of the report.

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

The inspector would like to thank the manager, the visiting relative, service users and staff for their support and co-operation throughout the inspection process.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 6 June 2018

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

| Areas for improvement from the last care inspection | | Validation of compliance |
|---|---|---------------------------------|
| Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007 | | |
| <p>Area for improvement 1</p> <p>Ref: Regulation 28(4)</p> <p>Stated: First time</p> | <p>The registered person shall ensure that monthly monitoring visits and the related reports provide evidence of thorough examinations of the centre’s operations and summarising the views of service users, their representatives and staff members, so as to fulfil the requirements of the relevant regulations and minimum standards. To ensure a varied range of views is elicited and to maintain confidentiality, reports should use a coded identifier for those service users who are interviewed</p> | Met |
| | <p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. Three monthly monitoring reports were reviewed by the inspector and were found to be satisfactory.</p> | |

6.3 Inspection findings

The manager described the staffing levels which have been assessed as necessary to provide a safe service in the setting. Assurances were provided to the inspector that sufficiently qualified, competent and experienced persons are working at all times to meet the assessed needs of the service users, taking into account the size and layout of the premises, the number of service users accommodated, fire safety requirements and the statement of purpose. A review of the staffing roster for weeks commencing 13 December 2019 until 22 January 2020 evidenced that the planned staffing levels were adhered to. The review identified that the manager and deputy manager's hours of work were not recorded on the staff roster. This has been identified for an area for improvement under the standards.

Discussions with staff, a visiting relative and service users confirmed that they felt there were sufficient staff to ensure the safety of service users in the day centre. Observation of the delivery of care at the time of inspection evidenced that service users' needs were effectively met by the number of staff on duty.

There were arrangements in place to ensure that staff are registered with the Northern Ireland Social Care Council (NISCC). Information regarding registration details and renewal dates were maintained and available to the inspector. The manager confirmed that all staff are currently registered with NISCC.

The manager advised that no staff had been recruited since the previous care inspection. The manager confirmed that staff employment records were held within the NHST human resources department and that all appointments were made in compliance with relevant legislative requirements and trust policy and procedures.

The setting's training record demonstrated that there was an ongoing programme of mandatory training for staff, relevant to their roles and responsibilities, which will assure staff know how to keep service users safe. There was evidence that compliance with completing mandatory training was routinely monitored by the manager and any training now due for update was being followed up with the staff member by the manager. 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 such as first aid, adult safeguarding, information governance, fire safety, control of substances hazardous to health (COSHH) and dementia awareness. It was positive to note that the day care setting provided training in regard to equality, diversity and human rights and deprivation of liberty safeguards (DoLS).

The inspector discussed the monitoring arrangements in compliance with Regulation 28 of The Day Care Settings Regulations (Northern Ireland) 2007. The Regulation 28 monthly quality monitoring visits had been undertaken monthly by a senior manager within the organisation, who demonstrated a good understanding of the setting. A sample of reports viewed for October 2019 to January 2020 provided evidence that the visits included engagement with service users and staff; a review on the conduct of the day care setting and development of action points and review of previous action points.

The day centre's fire safety precaution records were reviewed. It was noted the last full evacuation drill was undertaken on 13 May 2019. Discussion with staff confirmed they were aware of the evacuation procedure. An updated fire risk assessment was completed on 5 May 2019 and the review of the assessment confirmed that no significant findings were recorded.

Fire exits were observed to be clear of clutter and obstruction. Records examined identified that a number of safety checks were undertaken including: fire safety drills to ensure service users can exit safely, fire extinguishers and weekly fire alarm tests.

Discussion with the manager and observation of the environment confirmed that furniture, aids and appliances were fit for purpose for the needs of the service users. Infection prevention and control measures were in place, which included the availability of supplies of liquid soap and hand towels mounted on the walls, foot pedal operated bins and seven step hand hygiene notices which were positioned at wash hand basins. Staff also had effective access to gloves and aprons as required.

Service users' comments:

- "I am as safe as houses here."
- "Everyone is good to me; I like coming here."
- "I like doing art."
- "The girls are kind."
- "I have no problems; I am happy here."
- "The staff are good here and they look after me."

Relative's comments:

- "This is an excellent centre; 110% service."
- "Staff are always willing to help and listen to all that I say about xxxx."
- "Xxxx is very happy to come here and staff are kind and caring towards xxxx."
- "Staff are brilliant, they go above and beyond their role."

Staff comments:

- "The centre is staffed appropriately to meet the service users' needs. We review staffing levels if the service users' needs change."
- "It is important that everyone that comes to the centre has a fulfilling day; the centre operates for the service users."
- "Service users' needs always come first."
- "There is very good sharing of information as we are a small team. We have team meetings about every three months."
- "We all have access to the policies and procedures."
- "We treat service users with respect, thoughtfulness and kindness."

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff members' registrations with the Northern Ireland Social Care Council (NISCC), infection prevention and control practices and staff training.

Areas for improvement

One area requiring improvement was identified regarding the staff duty roster.

| | Regulations | Standards |
|--|-------------|-----------|
| Total number of areas for improvement | 0 | 1 |

7.0 Quality improvement plan

An area for improvement identified during this inspection is detailed in the QIP. Details of the QIP were discussed with Sylvia Campbell, manager, the deputy manager and the senior day care worker, 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

An area for improvement has 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 via Web Portal for 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 23.7</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the time of the inspection</p> | <p>The registered person shall ensure a record is kept of staff working each day and the capacity in which they worked.</p> <p>Ref: 6.3</p> <hr/> <p>Response by registered person detailing the actions taken: The manager and deputy managers names and hours of work have been added to the staff roster and will be maintained in the service.</p> |



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