

# Unannounced Care Inspection Report 16 October 2018



## Thackeray Day Centre

**Type of Service: Day Care Service**

**Address: 12 Ballyclose Street, Limavady, BT49 0BE**

**Tel No: 02877769450**

**Inspector: Dermott Knox**

[www.rqia.org.uk](http://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 20 places providing care and day time activities for people who are elderly and infirm and those who are living with dementia.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Western HSC Trust  <b>Responsible Individual(s):</b> Dr Anne Kilgallen	<b>Registered Manager:</b> Mrs Sonia Marie McDermott
<b>Person in charge at the time of inspection:</b> Mrs Sonia Marie McDermott	<b>Date manager registered:</b> 27 September 2010
<b>Number of registered places:</b> 20 - DCS-DE, DCS-I	

### 4.0 Inspection summary

An unannounced inspection took place on 16 October 2018 from 10.15 to 16.10.

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 day care service was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to communication with service users and their carers, organisation of fulfilling activities, staffing, staff training, maintaining a safe environment, leadership and monitoring of the quality of the service.

No areas requiring improvement were identified at this inspection. Advice was offered and discussed with the manager on a small number of aspects of the provision and management of the service.

Service users said:

- “The exercises are very good for keeping my muscles working.”
- “Every one of the staff is excellent, I can’t complain at all.”
- “This gets me out of the house every week and I really enjoy the company and the friendships.”

The findings of this report will provide the day care service 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	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Sonia McDermott, registered manager, 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.

## 4.2 Action taken following the most recent care inspection dated 09 January 2018

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 9 January 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:

- record of notifications of events
- record of complaints
- the previous inspection report dated 9 January 2018

During the inspection the inspector met with:

- five service users in group settings
- one relative/carer of a service user
- two care staff in individual discussions
- the registered manager throughout the inspection

Ten questionnaires were left with the manager to be distributed to service users and their carers. All ten were completed and returned to RQIA within two weeks of the inspection. The findings from the questionnaires are discussed in section 6.6 of this report.

The following records were examined during the inspection:

- The day centre's Certificate of Registration.
- The Statement of Purpose.
- File records for three service users, including assessments and review reports.
- Progress records for three service users.
- Monitoring reports for the months of June, July, August and September 2018.
- Records of staff meetings held on 31 January 2018, 30 April 2018 and 9 July 2018.
- Minutes of Service Users' Meetings dated 18 January 2018, 19 April 2018, 5 July 2018 and 8 October 2018.

- Selected training records for staff.
- Policy for Infection Control and the Prevention Cleaning Procedures (2015).
- A Fire Risk Assessment dated 6 November 2017.

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

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 09 January 2018

The most recent inspection of the day care service 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 9 January 2018

Areas for improvement from the last care inspection		
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 5.3  <b>Stated:</b> First time	The registered person shall ensure that all key documents in service users' records and staffs' records are signed and dated appropriately.  Ref: 6.5	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> There was evidence in the records inspected to confirm compliance with this aspect of service provision.	

### 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.**

Thackeray Day Centre premises were well maintained and in good decorative order. No obvious potential hazards for service users or staff were identified during this inspection. Service users' individual risk assessments were available in each of the files examined and these identified risks and set out the measures to be taken to minimize potential harm to each person. Risk areas included in the sampled care records included Transport, Mobility, Moving and Handling, Swallowing/Choking, Medications and Isolation. The centre's policy manual contained a section on Infection Control, including the policy "Zero Tolerance to Preventable Healthcare-associated Infections (HCAI's). Staff had signed to confirm that they had read and understood the policy. The file also contained a detailed "Prevention Cleaning Procedure" to be followed by support services staff. The WHSCT states that it has "realised significant reductions in infections caused by MRSA and C.Difficile in the ten years since regional infection surveillance commenced".

The centre's records included Fire Safety Manual dated April 2016, containing a Fire Safety Policy and a range of related documents and the required records of fire safety checks. These were complete and up to date. A fire risk assessed was completed on 6 November 2017 and a Fire Safety Audit carried out on 8 May 2018 resulted in no concerns being identified. A WHSCT Fire Officer completed a fire drill walk-through with staff on 29 September 2017 and did not identify any concerns. Fire safety training for all of the centre's staff is scheduled to take place on 1 November 2018. It was noted in the fire safety records that weekly fire alarm tests were activated from different zones within the premises, to ensure that all areas are tested over a period of months. In a tour of the premises, fire exits were seen to be clear of obstructions.

Staff members expressed strong commitment to making the service safe in all of the programmes to which they contributed. New staff undertake a detailed induction programme, which takes account of the NISCC Induction Standards. Safeguarding procedures are revisited in bi-annual staff training and were understood by staff members who were interviewed. Staff members who were interviewed expressed the view that practice throughout the centre is of a high standard and that team members work well together. Each staff member stated that they have confidence in the safe practice of their colleagues in the team. There was evidence in the records of and from discussions with staff, to show that the registered manager and staff strive continually to improve the service, including the safety of each individual. Untoward events and near misses are treated by the registered manager as learning opportunities and she verified that such issues are addressed in staff meetings or in individual supervision, or both, as necessary.

During the inspection visit service users demonstrated in activities their enjoyment of attending the centre and confirmed that they felt safe and well cared for in the premises and in the transport vehicles. Staff presented as being well informed of the needs of service users and of methods of helping to meet these needs safely. It was noted throughout the inspection that staff were very attentive to certain service users while they moved from one area of the centre to another. Service users' rights and feelings, and the methods available to them of raising a



concern or making a complaint were set out in the service user guide and information had been provided for service users to help them understand and use the procedures for making their views known to staff. The monitoring officer includes safety checks in each monthly visit, reports of four of which were examined.

The evidence presented supports the conclusion that safe care is provided in Thackeray Day Centre, with staff making every effort to ensure the identified risks are well managed.

### Areas of good practice

Examples of good practice found throughout the inspection included, implementation of safety procedures, staff training, empowerment of service users, adult safeguarding, infection prevention and control, risk management and maintaining the environment.

### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	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 are presented in a format and with content that meets the requirements of The Day Care Setting Regulations (Northern Ireland) 2007 and the relevant minimum standards.

Three service users' files were examined and each was found to contain satisfactory referral and assessment information on the individual and on his or her functioning, along with a written and signed agreement on the terms of the individual's participation. An up to date care plan was present in each person's file, presented in a consistent format and with objectives that were clear for staff members to understand. Actions required to meet the objectives were clearly described. Each care plan was dated and signed by either the service user or a representative and the key worker and manager of the day care service.

Risk assessments, appropriate to the individual service user, were present in each file and provided clear information to guide a staff member working with that person. Records were kept of each service user's involvement and progress at the centre and the frequency of entries was in proportion to the person's attendance. Records of annual reviews for each person demonstrated that an evaluation of the overall suitability of the placement had been discussed in detail and agreed. Each person's progress at the centre had been reviewed within the past year. Well written review records, informed by progress notes and including the service user's views, were available in all files examined.

The premises are spacious, providing a range of potential activity spaces. These are all on one level, facilitating ease of movement for those with mobility difficulties. There is a small garden area at the rear of the building and staff confirmed that this provided a safe outdoor space for the enjoyment of service users in fine weather. Activities were planned and arranged with a

focus on promoting the health and wellbeing of service users, who were observed engaging with enthusiasm in a session of armchair exercises. Two staff led this session skilfully and with appropriate attention to the safety and comfort of those who participated. Other activities included music, art, crafts, word-games, reminiscence sessions and quizzes. One service user emphasised the benefits that she and others had gained from attendance at the day centre. A relative of one service user spoke positively about the value of the service to his parent and, indirectly, to the whole family.

Overall, the evidence indicates that the centre provides an effective service.

### Areas of good practice

Examples of good practice in effective care, found throughout the inspection, included, assessment of each service user's needs, engaging service users in a variety of constructive activities, communication between service users and their carers and the management and staff of the centre, care plans, records of progress and involvement, care reviews, transport arrangements.

### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	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.**

Observations of activities throughout the centre provided evidence of service users relating positively to staff and to each other. Service users enjoyed tea or coffee when they arrived in the morning and spent time together chatting with friends and staff members. Discussions with the registered manager and staff members focussed on the structure and suitability of the activities available to service users when they attend. Usually, all service users participate together in the same activity, although alternatives were made available for those who preferred them. One service user said that she felt there was a good selection of activities that were beneficial to everyone's health and wellbeing. She said that she felt free to choose whether or not she took part in anything that staff had arranged.

Staff demonstrated a good knowledge of each service user's assessed needs and worked to engage each person in activities of their choice, some of which had been pre-planned as being appropriate for the individual's needs and condition. There was evidence to show that the centre's staff successfully motivate service users to participate in a range of planned activities that have positive outcomes for health and wellbeing. It was also noted that two service users had expressed concerns about the tone of communications from one, recently appointed staff member. However, this matter had been addressed appropriately by management and in all of the practice observed during this inspection, interactions between staff and service users were warm, respectful and encouraging. Staff were observed being attentive to each person's needs, listening to their views and involving them in deciding what they wanted to do while in the day



centre. One relative confirmed in discussion that communications with the day centre's staff were excellent and provided opportunities for carers to seek clarification on any issue. There were measures in place to ensure that the views and opinions of service users were sought formally and taken into account in all matters affecting them. These included regular, quarterly service user meetings, most recently on 8 October 2018, for which there were detailed records on file. An annual survey and a report of the findings was completed, most recently in January 2018. The registered manager acknowledged receipt of the RQIA guidance and template for future Annual Quality Review reports and confirmed her intention to complete and submit this in January 2019. In the most recent quality survey report, service users confirmed that they have very high levels of satisfaction with all aspects of the service. Two complaints had been received in the day centre since the previous inspection and each had been resolved to the full satisfaction of the service user who made the complaint.

During each monthly monitoring visit, the views of a sample of service users were sought and their views were reflected in the four monitoring reports that were reviewed at this inspection. Following the inspection, ten service users returned completed questionnaires to RQIA, indicating unanimously that they were very satisfied, with the quality of the service in all four domains, Is care safe?, Is care effective?, Is care compassionate? and, Is the service well led? One respondent added a comment, "Satisfied so far", suggesting a relatively recent introduction to the centre.

The evidence indicates that Thackeray Day Centre provides compassionate care to its service users.

### Areas of good practice

Examples of good practice were found throughout the inspection in relation to: listening to and valuing service users, facilitating service users' involvement in a range of constructive activities and leisure pursuits, supportive and compassionate interactions between staff and service users, maintaining records of service each user's involvement

### 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.**

Discussions with the registered manager, four service users, one relative and three staff members, and an examination of a range of records, including minutes of staff meetings, staff training schedules, monitoring reports and review reports, provided evidence that effective leadership and management arrangements are in place in Thackeray Day Centre. There was evidence in the most recent annual quality survey to show that service users and their relatives

rated the service very positively. A survey for 2018 was currently in preparation using a revised questionnaire format. The manager confirmed that the requirements of Regulation 17 of The Day Care Setting Regulations (NI) 2007 have been noted and will be met in this year's Annual Quality Review report.

A review of staff training records showed that the registered manager has a system for monitoring each person's completion of mandatory training and other training relevant to their roles and responsibilities. Staff confirmed they had undertaken mandatory training and training specific to the needs of service users in this setting, with some of the training being online through the provider's training department. Staff stated that they were satisfied that the e-learning training was of a good standard, particularly with regard to refresher training that is required every two or three years.

Staff commented that the registered manager's leadership style was supportive and motivated the team to maintain and improve the efficiency and effectiveness of the centre. The registered manager had been absent from the centre for several weeks and there was evidence to confirm that an experienced staff member, in an acting-up capacity, had maintained good standards of practice within the centre. Staff meetings continued to be held quarterly in the centre and the minutes of these were clear and sufficiently detailed. A schedule of formal supervision meetings was prepared by the registered manager as a priority matter on her return following an absence of several weeks and indicated that supervision with each staff member will be held during October 2018.

Staff who met with the inspector were well informed on all aspects of the centre's operations and proved competent in contributing to the requirements for this inspection. There was evidence from discussions with staff to confirm that ideas for improvement are encouraged within the staff team. Staff felt they were supported following any incidents that they found challenging in their work and that their work with service users and with the team was very rewarding. A relative who met with the inspector provided positive comments on the support and communication that their family received from the registered manager and the staff.

Four monthly monitoring reports, for June, July, August and September 2018 were examined and were found to address all of the matters required by regulation. Reports were comprehensive and contained good feedback from discussions with one or two service users and with at least one staff member. A sample of service user records was checked during each visit and a check completed of an aspect of the centre's compliance with a selected standard or area of performance. The manager confirmed that any faults that were found or needs identified through the monitoring process were resolved quickly. Overall, the evidence available at this inspection confirmed that Thackeray Day Care Service is well led.

### **Areas of good practice**

Examples of good practice found throughout the inspection included, leadership, planning, staff training, information sharing, governance arrangements including monthly monitoring, liaising with families and carers and promoting service users' involvement.

### **Areas for improvement**

No areas for improvement were identified during the inspection.

	Regulations	Standards
--	-------------	-----------

Total number of areas for improvement	0	0
---------------------------------------	---	---

## 7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



The Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT

**Tel** 028 9536 1111  
**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
**Twitter** @RQIANews