

Unannounced Care Inspection Report

09 January 2018



Thackeray Day Centre

Type of Service: Day Care Setting

Address: 12 Ballyclose Street, Limavady, BT49 0BE

Tel No: 02877769450

Inspector: Dermott Knox

www.rgia.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 twenty places for people over the age of 65 years, some of whom have been referred due to symptoms of dementia and others who have health and social care needs that can be met in a day care programme.

3.0 Service details

Organisation/Registered Provider: Western HSC Trust Responsible Individual(s): Dr Anne Kilgallen	Registered Manager: Mrs Sonia Marie McDermott
Person in charge at the time of inspection: Mrs. Sonia Marie McDermott	Date manager registered: 02 September 2010
Number of registered places: 20 - DCS-DE, DCS-I	

4.0 Inspection summary

An unannounced inspection took place on 09 January 2018 from 10.30 to 16.30.

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 leadership and management, safe practice, compassionate care, staff training, service user involvement and creative activities.

One area requiring improvement was identified with regard to the signing and dating of records.

Service users said:

- “All of the staff are great. They are kind, caring and helpful.”
- “I can’t think of one thing to complain about. We have a lovely time here.”
- “All very nice. I like coming here.”

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	1

Details of the Quality Improvement Plan (QIP) were discussed with Mrs Sonia McDermott, registered manager, 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 26 January 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 26 January 2017.

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
- Quality Improvement Plan from the previous inspection on 26 January 2017
- The Statement of Purpose
- The Service User Guide

During the inspection the inspector met with:

- seven service users in group settings
- one service user individually
- two care staff in individual discussions
- the catering assistant
- the domestic care assistant
- the registered manager at the commencement and conclusion of the inspection

Questionnaires were left with the manager to be distributed to service users and relatives or carers of service users. Eight completed questionnaires were returned to the inspector on the day of the inspection visit.

The following records were examined during the inspection:

- the day centre's Certificate of Registration
- file records for three service users, including assessments and review reports
- progress records for three service users
- monitoring reports for the months of October and November 2017
- records of staff meetings held on 27 April, 14 July and 10 October 2017
- minutes of Service Users' Meetings for February, April, July and October 2017
- selected training records for staff, including staffs' qualifications
- two staff files containing training evaluations and formal supervision records
- policy for Adult Safeguarding
- policy for Risk Management
- a report of the Annual Quality Review of the centre for 2017

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

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 26 January 2017

The most recent inspection of the day centre 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 26 January 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 26(2) (g), (j) Stated: Second time	The registered provider must install a pull cord switch at the commode in the clinical room so that service users, (after a risk assessment has taken place) can use this to summon staff assistance. This will promote service user independence.	Met
	Action taken as confirmed during the inspection: The concerns giving rise to this requirement being made were resolved in another way by the Trust. Plans have been drawn up to equip a currently unused bathroom as a spacious toilet for people with disabilities. This will have ceiling hoist and track provision and a suitable changing surface. People using this facility will have staff attention at all times. Those who manage their toileting needs more independently will use an existing toilet, which is equipped with an alarm pull cord beside the toilet.	

Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
Area for improvement 1 Ref: Standard 5 Stated: Second time	The registered provider should ensure service user's care plans specify where appropriate, the name and size of continence product used by the service user and where this is stored.	Met
	The identified service user's care plan should be updated and new signatures obtained from the service user or their representative, the staff member completing it and the registered manager.	
	Action taken as confirmed during the inspection: Sample care plans, examined at this inspection, contained all of the necessary information.	

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, with no obvious hazards for service users or staff. The centre is suitably furnished for the needs of its service users and has smooth, level floors throughout, making for safe use of walking aids and wheelchairs. The entrance to the centre provides good shelter and easy access for people alighting from or boarding the transport vehicles. There are several rooms available for group activities and for individual work with service users, when necessary, so that a satisfactory sense of space for service users may be maintained.

Safeguarding procedures were understood by staff members who were interviewed, who also confirmed that they would report poor practice, should they identify it. All expressed the view that practice throughout the centre was of excellent quality and this was emphasised by all of the service users who contributed to the inspection findings. 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 carer. Eight service users returned completed questionnaires to RQIA and these were unanimously positive in the ratings given, not only with regard to the provision of safe care, but in all aspects of the service.

Fire alarm systems checks were carried out and recorded on a weekly basis and fire exits were seen to be unobstructed. One day care support worker's records showed recent training for the role of 'fire warden'. Fire Safety training had been provided for all staff on 16 December 2017. Risk assessments with regard to transport, mobility and moving and handling, or other areas specific to the individual, were present where relevant and each one had been signed as

agreed, either by the service user or a representative. The manager carries out regular audits of a range of the centre's operations and data is presented monthly in the provider's monitoring reports.

During the inspection visit, seven service users spoke enthusiastically about the activities at the centre and confirmed that they felt safe and well cared for. Staff presented as being well informed of the needs of each service user and of methods of helping to meet those needs safely. Staff members were observed interacting sensitively with service users and being attentive to each person's needs. 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. 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. No complaints had been recorded in the centre since January 2014.

The manager and two staff members, who met with the inspector, confirmed that they have confidence in the practice of all members of the staff team in their work with service users. All expressed strong commitment to their work with service users, which, they confirmed, is enjoyable and rewarding. All new staff undertake an induction programme, in keeping with the Trust's procedures. Records of one staff member's induction programme, dating from June 2017, were available for inspection.

The evidence presented supports the conclusion that safe care is provided consistently in Thackeray Day Centre.

Areas of good practice

Examples of good practice were found throughout the inspection in relation to the home's environment, staff induction, training, supervision, adult safeguarding, infection prevention and control, COSHH, fire safety and overall risk management.

Areas for improvement

No areas for improvement were identified during the inspection in relation to safe care.

	Regulations	Standards
Total number of areas for improvement	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 the Service User's Guide provide the information required by regulations and minimum standards. Seven service users provided information in the course of the inspection, giving feedback that was positive in all respects, including on the effectiveness of the care provided. All seven service users stated that the day care service contributed very positively to their lives through friendships, activities and the excellent care provided.

Three service users' files were examined during this inspection and each was found to contain a written agreement on the terms of the individual's attendance and detailed referral and assessment information including a range of risk assessments, relevant to the person's abilities, disabilities or health conditions. The records of assessed risk and vulnerability provide clear guidance for staff involved in the work with that person. Each file also contained a record of a home visit made by a staff member, as part of the needs assessment and the individual's introduction to the day care service. Care plans set out the service user's needs in good detail, along with objectives for each person's care and the actions required to meet those objectives.

Written records were kept of each service user's involvement and progress at the centre. Entries addressed the person's involvement in the centre's activities, their wellbeing and any specific matters that had been attended to as part of his or her care plan. Entries were made in keeping with the frequency stipulated by the minimum standards. 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. A written Review Report was available in each of the files examined and each report included the service user's views and was informed by the written progress records. Dates and signatures were present in most, but not all of the records examined and a recommendation is made to ensure that this practice is extended to all relevant documents. There was evidence of efforts toward continuous improvement in the care planning and care delivery processes. The clarity of the care plans examined is commendable.

The centre has a large activity room, a similar sized dining room, a small sitting room and a hairdressing room. These provide suitable accommodation for all service users and for the activity programmes in which they participate. Eleven service users were observed taking part in a word quiz session and three people commented later on their enjoyment of this and other activities, such as baking, music and art and craft work. Several people spoke of the value they gained from people's company, which came about through participation in the centre's programmes. Another spoke of her satisfaction at being encouraged to improve her mobility.

Evidence from discussions with service users, from written records and from observations of interactions between service users and staff, confirmed that service users viewed the centre as a very enjoyable and valuable place in which to spend their time. The manager and staff worked purposefully to involve service users in a variety of experiences, making full use of the available facilities. During the inspection, two staff members were interviewed individually and both expressed very positive views on the quality of the service provided and on the confidence they had in the practice of all of their colleagues and the leadership and support of the manager. Two staff completed questionnaires, which were returned to RQIA within two weeks of the inspection. Both respondents indicated that they were either 'satisfied' or 'very satisfied' with the provision of safe, effective, compassionate care and with the leadership of the service.

Overall, the evidence indicates that the care provided is effective in actively pursuing the objectives of each service user's care plan and in promoting service users' wellbeing, enjoyment and fulfilment.

Areas of good practice

Examples of good practice were found throughout the inspection in relation to needs assessments, care plans, reviews, communication between service users, staff and other key stakeholders, the organisation and operation of care/activity programmes, involvement of service users in discussing and evaluating activities. Activities on the day of this inspection appeared to engage service users successfully and enjoyably.

Areas for improvement

Two service users' files and one staff record require improvement regarding the signing and dating of key documents.

	Regulations	Standards
Total number of areas for improvement	0	1

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.

On the day of this inspection, the atmosphere in Thackeray Day Centre was welcoming and relaxed. Most of the service users were brought into the centre by the Trust's transport bus and two people specifically praised this service and the care provided by the transport driver. Observations of interactions throughout the day provided evidence of service users being engaged by staff with respect and encouragement at all times and relating positively to staff and to each other. While most people were involved in specific group activities throughout the day, staff respected the wishes of any person who did not wish to participate and alternative, individual activities were agreed. Two people said that their main enjoyment was in meeting and chatting with others who had become their friends.

There is a range of activities, such as art and crafts, cooking, music/singing, quizzes, life story books and armchair exercising. Service users confirmed that staff encourage them to take part in those aspects of the day care service that they find useful and appealing and that their ideas are sought and encouraged. Staff demonstrated an understanding of each person's needs as identified within the individual's referral records, assessments and his or her care plan. The provision of compassionate care reflected the caring tone of the written care plans.

The systems in place to ensure that the views and opinions of members were sought and taken into account included regular service users' meetings, held at least quarterly, daily discussions with people in groups or individually and , an annual quality review report setting out the findings of a questionnaire based survey of service users' satisfaction with the service. The minutes of four of the service users' meetings provided evidence of a strong focus on involving and empowering people to contribute to decisions about the way in which the day care service is run. Each meeting began with a review of the decisions and agreed actions from the previous meeting, providing opportunities for people to comment again or to seek clarification on any matter that was not fully understood.

During each monthly monitoring visit the views of a sample of service users were sought and their views were reflected in good detail in both of the monthly monitoring reports that were reviewed. Each person's file contained progress notes relating to his or her involvement and wellbeing and these reflected the caring nature of the relationships and interactions observed during the inspection. Observations provided good examples of warm and compassionate interactions between staff and service users who were clearly at ease with the staff and with the operations of the centre. Staff members' comments and actions, along with the views expressed by service users, confirmed that compassionate care was being provided consistently in Thackeray Day Centre.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the culture and ethos of the day care setting, listening to and valuing service users, demonstrations of caring attitudes in minute by minute practice, facilitating service users' involvement in the various activities and leisure interests and maintaining records of activities and progress.

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 manager, seven service users and two day care 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 centre's most recent annual quality survey to show that service users and their relatives rated the service very positively.

Staff training records confirmed that staff had received mandatory training and training specific to the needs of service users in this setting. Additional training topics during 2017 included, 'Dementia', 'Legionella Awareness' and 'Challenging Behaviour'. Discussions with staff and examination of records confirmed that staff meetings were held quarterly and that the staff team was well involved in discussing issues related to the operations of the centre. Staff reported that the manager updated information regularly and that they were consulted on a range of decision making aspects of the service. There was evidence from the clear and well detailed staff meetings minutes and from discussions with staff, to confirm that working relationships within the team were positive and supportive and that team morale was good. Staff commented that the manager's leadership style supported and motivated the team to maintain and improve the effectiveness of the centre.

Staff who met with the inspector were well informed on all aspects of the centre's operations and proved very able in contributing to the evidence for this inspection. All care staff held relevant qualifications and were supported in maintaining up to date knowledge and skills for their job roles. Staff members viewed supervision positively and records showed that formal supervision was taking place quarterly, in keeping with the minimum requirement. There was evidence from discussions with staff to confirm that ideas for improvement are encouraged by the manager and several examples of good practice in activity developments were identified. Staff felt they were well supported following any challenging incidents in their work.

Two monthly monitoring reports were examined and were found to address all of the matters required by regulation. Each report contained well-detailed feedback from discussions with service users and with one or two staff members. A sample of service user records was checked during each visit and a check completed of selected aspects of the centre's compliance with a minimum standard or a Trust procedure. Necessary improvements were

clearly set out in an action plan. This approach to monthly monitoring aligns well with the centre's commitment to the provision of a high quality service. 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, supervision, building good working relationships, delegation, information sharing, governance arrangements including monthly monitoring, management of incidents and accidents, promoting fulfilment for service users.

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

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mrs. Sonia McDermott, registered manager, 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

Areas for improvement have 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 5.3</p> <p>Stated: First time</p> <p>To be completed by: 28 February 2018</p>	<p>The registered person shall ensure that all key documents in service users' records and staffs' records are signed and dated appropriately.</p> <p>Ref: 6.5</p> <p>Response by registered person detailing the actions taken: The Registered Manager has dated and signed the staff member's supervision record and has dated the Service User Agreement document in service user's file.</p> <p>The Manager will ensure in future that all key documents are signed and dated appropriately.</p>
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