

# Unannounced Care Inspection Report

## 02 June 2016



## Glenside Adult Training Centre

**Type of Service: Day Care Setting**  
**Address: 45A Derry Road, Strabane, BT82 8DY**  
**Tel No: 028 7138 2950**  
**Inspector: Angela Graham**

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Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An unannounced inspection of Glenside Adult Training Centre took place on 02 June 2016 from 09.40 to 16.00 hours.

The inspection sought to assess progress with any issues raised during and since the previous inspection and to determine if the Day Care Setting was delivering safe, effective and compassionate care and if the service was well led.

### **Is care safe?**

On the day of the inspection Glenside Adult Training Centre was found to be delivering safe care. Observations of care practices showed there was a culture of ensuring service users were safe and protected from harm. Staff were knowledgeable of their specific roles and responsibilities in relation to adult safeguarding. A general inspection of the day care setting confirmed that the premises and grounds were well maintained. No areas for quality improvement relating to safe care were identified during this inspection.

### **Is care effective?**

On the day of the inspection Glenside Adult Training Centre was found to be delivering effective care. Observations of staff interactions with service users and discussions with a total of 12 service users evidenced this. There were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users. No areas for quality improvement relating to effective care were identified during this inspection.

### **Is care compassionate?**

On the day of the inspection Glenside Adult Training Centre was found to be delivering compassionate care. Observations of care delivery evidenced that service users were treated with dignity and respect. Staff were observed responding to service users' needs and requests promptly and professionally. Discussions with service users provided evidence they were listened to, valued and communicated with, in an appropriate manner. No areas for quality improvement were identified.

### **Is the service well led?**

On the day of this inspection there was evidence of effective leadership, management and good governance arrangements in Glenside Adult Training Centre and a culture focused on the needs of service users.

This inspection was underpinned by The Day Care Setting Regulations (Northern Ireland) 2007, the Day Care Settings Minimum Standards 2012 and previous inspection outcomes and any information we have received about the service since the previous inspection.

## 1.1 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Mrs Oonah Cassidy, Registered Manager and Mrs Victoria Young, Senior Day Care Worker, as part of the inspection process and can be found in the main body of the report.

## 1.2 Actions / enforcement taken following the most recent care inspection

There were no further actions required to be taken following the most recent inspection.

## 2.0 Service details

<b>Registered organisation / registered person:</b> Western HSC Trust	<b>Registered manager:</b> Mrs Oonah Cassidy
<b>Person in charge of the day care setting at the time of inspection:</b> Mrs Oonah Cassidy, Registered Manager	<b>Date manager registered:</b> 27 September 2010

## 3.0 Methods/processes

Prior to inspection the following records were analysed:

- Written and verbal communication received since the previous care inspection
- The previous care inspection report.

Specific methods / processes used in this inspection include the following:

- Discussion with the registered manager
- Discussion with seven care staff
- Discussion with 12 service users
- Discussion with one service user's representative
- Examination of records
- File audits
- Evaluation and feedback.

The registered manager was provided with five questionnaires to distribute to randomly selected service users; five staff members and five service users' representatives for their completion. The questionnaires asked for service user, staff and service users'

representatives' views regarding the service, and requesting their return to RQIA. One service user's representative questionnaire was returned to RQIA. The content of the questionnaire is discussed in the main body of the report.

The following records were examined during the inspection:

- Complaints record
- Accident / untoward incident record
- Staff supervision and appraisal records
- Elements of three service users' care files
- Sample of policies and procedures
- Sample of quality assurance audits
- Staff training information
- Minutes of staff meetings
- Minutes of service user meetings
- Three monthly monitoring reports.

## **4.0 The inspection**

### **4.1 Review of requirements and recommendations from the most recent inspection dated 29 July 2015**

The most recent inspection of the day care setting was an unannounced care inspection. There were no requirements or recommendations made as a result of this inspection.

### **4.2 Review of requirements and recommendations from the last care inspection dated 29 July 2015**

There were no requirements or recommendations made as a result of the last care inspection.

### **4.3 Is care safe?**

The registered manager confirmed the planned daily staffing levels for the day care centre, and that these levels were subject to regular review to ensure the assessed needs of the service users were met.

Staff consulted confirmed that staffing levels met the assessed needs of the service users. Observation of the delivery of care evidenced that service users' needs were met by the numbers of staff on duty.

Discussion with the registered manager confirmed that staff were recruited in line with Regulation 21, Schedule 2 of The Day Care Setting Regulations (Northern Ireland) 2007 and that records were retained at the organisation's personnel department.

Discussion with the registered manager and staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. A schedule for annual staff appraisals and staff supervision was maintained and was available for inspection.

A review of the schedule confirmed that supervisions were completed for staff on a quarterly basis, or more frequently, and staff appraisals were completed annually. Discussion with staff confirmed that they had received supervision and appraisal accordingly.

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 inspection.

Review of a sample of records pertaining to accidents, incidents and notifications forwarded to RQIA confirmed that these were appropriately managed.

The registered manager and staff spoken with clearly demonstrated knowledge of their specific roles and responsibilities in relation to adult safeguarding. The registered manager stated that there were no current safeguarding concerns ongoing.

A review of the service users' environment was undertaken. The day centre was found to be warm, fresh smelling and clean throughout. There were no obvious hazards to the health and safety of service users, visitors or staff. Fire exits and corridors were observed to be clear of clutter and obstruction.

Inspection of the internal and external environment identified that the day care setting and grounds were kept tidy, safe, suitable for and accessible to service users, staff and visitors. To the rear of the day centre there are beautiful gardens including a "secret garden". There are also raised vegetable beds and a large polytunnel.

The day centre has won "The Best Kept Centre Award" seven times, being the overall winner in 2015.

### Areas for improvement

No areas for improvement were identified during the inspection.

<b>Number of requirements:</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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### 4.4 Is care effective?

Discussion with the registered manager established that staff in the day care setting responded appropriately to and met the assessed needs of the service users. Discussions with 12 service users also concluded their needs are being met in the day care setting.

Review of elements of three service user care files reflected there are comprehensive risk assessments and care plans in place. These met Minimum Standards 4 and 5. There was evidence that risk and other assessments informed the care planning process.

Service users and / or their representatives were encouraged and enabled to be involved in the assessment and care planning and review process.

Care records reviewed accurately reflected the assessed needs of service users, and where appropriate, adhered to recommendations prescribed by other healthcare professionals such as speech and language therapist (SALT), dieticians or occupational therapists.

Review of three service user’s care records confirmed annual reviews of the individual’s day care placement had taken place in the previous year.

It was observed during this inspection that records were stored safely and securely in line with data protection.

The registered manager confirmed that there were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users at appropriate intervals. Records were made available for inspection concerning audits of the environment, infection prevention and control and care records and evidenced that actions identified for improvement had been completed.

Evidence was provided to verify systems were in place to ensure effective communication with service users, their representatives and key stakeholders. These included pre-admission information, multi-professional reviews, service users and staff meetings.

Discussion with the registered manager and staff confirmed that management operated an open door policy in regard to communication within the day care setting. Staff stated that there was effective teamwork; each staff member knew their role, function and responsibilities. Staff also confirmed that if they had any concerns, they could raise these with the registered manager. All grades of staff consulted clearly demonstrated the ability to communicate effectively with their colleagues and other healthcare professionals.

There was information available to staff, service users and representatives in relation to advocacy arrangements.

Discussion with the registered manager confirmed that staff meetings were held on a quarterly basis, or more frequently, and records verified this. The last meeting was held on 23 May 2016 and minutes were available.

Service users spoken with expressed their confidence in raising concerns with the day centre’s staff / management.

Service users spoken with and observation of practices evidenced that staff were able to communicate effectively with service users.

**Areas for improvement**

No areas for improvement were identified during the inspection.

<b>Number of requirements:</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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**4.5 Is care compassionate?**

Service users confirmed management and staff listen to them, offer them choices and involve them in decision making during their time in the day care setting.

Staff interactions with service users were observed to be compassionate, caring and timely. Service users were afforded choice, privacy, dignity and respect. For example, one care staff member was overheard offering a service user a choice of activity.

Staff demonstrated a detailed knowledge of service users' wishes, preferences and assessed needs as identified within the service users' care plan. Relationships between all staff and service users were observed to be relaxed and friendly.

Discussions with service users along with observations of practice during this inspection confirmed that service users were enabled and supported to engage and participate in meaningful activities e.g. swimming session, computer session and relaxation in the snoozeleen room.

A review of activity records was undertaken and confirmed an extensive range of person centred activities including flower arranging, drama, cookery / baking, chair based aerobics and line dancing. Activities enjoyed within the local community included credited courses through the local technical college, inclusion dance group, bowling and attendance at a local gym. Service users were also provided with a range of day trips / outings including visits to a spa, fun farm, local beaches and theatres.

Discussion with services users and care staff confirmed a range of activities that were provided for service users and their parents / carers. These activities included a mother's day tea party, father's day fry and an irish stew night.

The registered manager confirmed that service users were listened to, valued and communicated with, in an appropriate manner. Discussions with service users and observation of practice confirmed that service users' needs were recognised and responded to in a prompt, courteous and supportive manner by staff.

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. For example, during a review meeting a service user stated that they would like to learn to play the drums. A care staff member made contact with a local drum tutor and arrangements are in place for the service user to attend drum sessions.

The views of service users were sought during the monthly quality monitoring visits and these comments were included in the monthly reports for February, March and April 2016 which were reviewed.

Service users are consulted in an informal daily basis via discussions with staff and the registered manager. Service users are consulted on a formal basis via service users' meetings; the annual review of their day care placement and they receive an annual quality assurance survey about the quality of the day service in Glenside Adult Training Centre. The findings from the annual survey had been collated into an evaluation / summary report.

Service users spoken with during the inspection commented positively in regard to the care they received. Examples of some of the comments made by service users are listed below:

- "I am going swimming today. I like swimming."
- "I come to the centre one day a week. Staff are very good to me and help me when I am here."
- "Staff are very good to me and take me to the shops."
- "I like working in the garden."
- "I like drawing."
- "Staff are nice."
- "I like going bowling and going on bus trips. I can use the computer in the centre."

- "The food is nice."
- "Everyone is good to me here."
- "I know all the staff. You can talk to the staff about anything."

The inspector met with one service user's representative. The service user's representative spoke positively of the service, care delivered and the staff team. Examples of some of the comments made by the service user's representative are listed below:

"My son really enjoys coming to the day centre. This is an excellent service. Staff are extremely attentive to my son's needs."

Review of the completed service user's representatives RQIA questionnaire asking for opinions on how safe, effective and compassionate the care is and how well led the service is; concluded all of the responses were positive.

### Areas for improvement

No areas for improvement were identified during the inspection.

<b>Number of requirements:</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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### 4.6 Is the service well led?

The registered manager confirmed that there were management and governance systems in place to meet the needs of service users.

A range of policies and procedures were in place to guide and inform staff. Policies were centrally indexed and retained in a manner which was easily accessible by staff. Staff confirmed that they had access to the day centre's policies and procedures.

Discussion with the registered manager and staff evidenced that there was a clear organisational structure within the day care setting. An organisational chart was displayed within the day care setting. Staff were able to describe their roles and responsibilities.

In discussion service users were aware of the roles of the staff in the day care setting and whom they should speak to if they had a concern.

The certificate of registration issued by RQIA was displayed in a prominent position in the day care setting.

A regular audit of accidents and incidents was undertaken and this was available for inspection and is used to identify trends and to enhance service provision. Learning from accidents and incidents was disseminated to all relevant parties and action plans developed to improve practice.

Monthly monitoring visits were undertaken as required under Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007; reports were produced and made available for service users, their representatives and RQIA.



Discussion with staff confirmed they were familiar with organisational and management structure and with their lines of professional accountability. Staff were aware of their individual responsibility in relation to raising concerns.

Discussions with staff also confirmed that there were good working relationships and that management were responsive to any suggestions or concerns raised.

Based on the findings of this care inspection RQIA concluded the day care service was well led. There was evidence of good leadership, robust and effective management and governance systems in Glenside Adult Training Centre which were focused on the needs of service users.

### Areas for improvement

No areas for improvement were identified during the inspection.

<b>Number of requirements:</b>	<b>0</b>	<b>Number of recommendations:</b>	<b>0</b>
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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 person/manager from their responsibility for maintaining compliance with the regulations and standards.



The Regulation and  
Quality Improvement  
Authority

The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email [info@rqia.org.uk](mailto:info@rqia.org.uk)

Web [www.rqia.org.uk](http://www.rqia.org.uk)

 @RQIANews