

Unannounced Care Inspection Report

9 March 2020



Strabane Day Centre

Type of Service: Day care

Address: County Buildings, Barrack Street, Strabane, BT82 8EU

Tel No: 028 7138 1601

Inspector: Angela Graham

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 provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

Strabane Day Centre is a Day Care Setting that provides care and day time activities for up to 40 adults with a range of needs associated with old age, learning disability, physical disability and dementia. The day centre is open Monday to Friday and is operated by the Western Health and Social Care Trust (WHSCT).

3.0 Service details

Organisation/Registered Provider: Western Health and Social Care Trust Responsible Individual: Dr Anne Kilgallen	Registered Manager: Sonia McDermott
Person in charge at the time of inspection: Senior Day Care Worker	Date manager registered: 23 January 2020
Number of registered places: 40	

4.0 Inspection summary

An unannounced inspection took place on 9 March 2020 from 09.55 to 13.55.

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

As a public-sector body, RQIA have a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care settings, we are committed to ensuring that the rights of people who receive services are protected. This means we will seek assurances from providers that they take all reasonable steps to promote people's rights. Users of day care settings have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted. All day care settings should safeguard and promote service user choices and freedoms as they relate to the range of services being provided.

There were examples of good practice found throughout the inspection in relation infection prevention and control, the culture and ethos of the day care setting, listening to and valuing service users and taking account of the views of service users and maintaining good working relationships.

Three areas requiring improvement were identified regarding the quality monitoring reports, the management of complaints and the monitoring of staffs renewal dates with the Northern Ireland Social Care Council.

Service users' comments are included throughout the report.

The findings of this report will provide the establishment 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	2	1

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with person in charge, 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 type inspection dated 14 January 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 14 January 2019.

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 14 January 2019
- unannounced care inspection report and QIP dated 14 January 2019.

During the inspection, the inspector met with the senior day care worker, three care assistants and a visiting relative. Introductions were made to all service users while walking around the setting with individual interaction with nine service users.

Ten service user and/or relatives' questionnaires were provided for distribution; no service user/relatives questionnaires were returned to RQIA within the timeframe for inclusion in this report.

At the request of the inspector, the person in charge 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; no responses were received.

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

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

6.0 The inspection

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Day Care Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 17 (1) and Schedule 3 Stated: First time	The registered person shall establish and maintain a system for— (a) monitoring the matters set out in Schedule 3 not less than annually; and (b) improving the quality of care provided in the day care setting.	Met
	This relates to the day centre's annual quality report for 2018 including the all the matters listed in Schedule 3. A copy of which is to be forwarded to RQIA.	
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the person in charge confirmed that this area for improvement had been addressed. A copy of the annual quality report was forwarded to RQIA with the returned Quality Improvement Plan.	

6.1 Inspection findings

The person in charge 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 24 February 2020 until 9 March 2020 evidenced that the planned staffing levels were adhered to.

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 the dates of registration was maintained and available to the inspector. However, renewal dates were not recorded on the NISCC registration monitoring document. An area for improvement is made in this regard. The person in charge confirmed that all staff are currently registered with NISCC.

The person in charge advised that no staff had been recruited since the previous care inspection. The person in charge confirmed that staff employment records were held within the WHSCT's personnel department and that all appointments were made in compliance with relevant legislative requirements and trust policy and procedures.

Discussions with the person in charge and staff on the day of inspection described positive working relationships in which issues and concerns could be freely discussed; staff reported they were confident that they would be listened to. In addition, staff confirmed that they felt supported by management. Staff demonstrated that they had knowledge of their role, function and responsibilities and they had no concerns regarding the practice of any of their colleagues.

The inspector discussed the monitoring arrangements in compliance with Regulation 28 of The Day Care Settings Regulations (Northern Ireland) 2007. The Regulation 28 quality monitoring visits had been undertaken monthly by a senior manager within the organisation who demonstrated a good understanding of the setting; these included a mixture of announced and unannounced visits to the day centre. A sample of reports viewed for November 2019, December 2019 and January 2020 provided evidence that the visits included engagement with service users, staff and relatives and a review on the conduct of the day care setting. The inspector advised that a record of the service users and relatives consulted during such visits should be evidenced, with names anonymised in the reports through use of a unique identifier code, ensuring that information recorded is traceable. In addition, outstanding action(s) from previous visits should be included within the most recent monthly report to help drive improvement and ensure that agreed action plans are kept under effective review. A copy of the report for the quality monitoring visit undertaken in October 2019 was not available in the day centre on the day of inspection. An area for improvement is made in this regard.

One complaint had been recorded since the previous care inspection on 14 January 2019. There was no evidence of detailed communication with the complainant, the results of any investigation, the action taken and the outcome of the complaint in relation to the complainant's satisfaction. An area for improvement is made in this regard.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout.

Discussion with the person in charge 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 know all the staff and one is as good as the next; I love it here."
- "A well run place; staff are brilliant and they work very hard to ensure we are happy."
- "The centre is always spotless, warm and comfortable."
- "We are all treated like we are the only one here; great care and attention."
- "Staff always ask my view and listen to what I have to say."
- "Great place to come; I'd be lost without it."
- "Lovely staff and they do all that they can for you; we are all treated equally."

Relative's comments:

- "Xxxx is coming a long time and I feel very content when I leave him in the day centre as he is well cared for."
- "Good communication."
- "Staff are warm, kind and always caring."

Staff comments:

- "Staffing levels meet the service users' needs; staff are very helpful and accommodating if we need staff cover."
- "Care is excellent; we involve the service users in the running of the centre."
- "The ladies and gentlemen are encouraged to make decisions about their day in the centre."
- "I am very comfortable approaching the senior or manager if I wanted to discuss something; the door is always open."
- "Service users tell us they are happy coming here and we want them to have a good day in the centre."
- "The care is very effective; everyone has a detailed care plan that outlines their care."
- "We have very good training and all our mandatory training is up to date."

Areas of good practice

There were examples of good practice found throughout the inspection in relation infection prevention and control, the culture and ethos of the day care setting, listening to and valuing service users and taking account of the views of service users and maintaining good working relationships.

Areas for improvement

Three areas requiring improvement were identified regarding the quality monitoring reports, the management of complaints and the monitoring of staffs renewal dates with the Northern Ireland Social Care Council.

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with the person in charge, 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 Setting Regulations (Northern Ireland) 2007

<p>Area for improvement 1</p> <p>Ref: Regulation 28 (4) (5)</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing</p>	<p>The registered person shall ensure the arrangements for the quality monitoring visits are conducted in a manner that includes the following:</p> <ul style="list-style-type: none"> • a record of the service users and relatives consulted during such visits should be evidenced, with names anonymised in the reports through use of a unique identifier code, ensuring that information recorded is traceable • outstanding action(s) from previous visits should be included within the most recent monthly report to help drive improvement and ensure that agreed action plans are kept under effective review • maintain a copy of the report required to be made under paragraph (4)(c) in the day care setting and make it available on request to the Regulation and Improvement Authority <p>Ref: 6.1</p> <p>Response by registered person detailing the actions taken: All service users have been allocated a unique identified code which will be used in monitoring reports. All outstanding actions from previous visits will be reviewed and progress documented on monthly reports. Copies of the monthly monitoring visits are kept on file within Day Centre.</p>
<p>Area for improvement 2</p> <p>Regulation 24</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing</p>	<p>The registered person should ensure that the centre's complaints procedure is implemented effectively, in keeping with Regulation 24 of The Day Care Setting Regulations (Northern Ireland) 2007.</p> <p>Ref: 6.1</p> <p>Response by registered person detailing the actions taken: Copy of complaints procedure is displayed, staff are trained in correct use and implementation of procedure.</p>

Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012

<p>Area for improvement 1</p> <p>Ref: Standard 21.6</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing</p>	<p>The registered person shall ensure the record that is maintained regarding the staffs registration with the Northern Ireland Social Care Council (NISCC) also evidences the renewal date.</p> <p>Ref: 6.1</p> <p>Response by registered person detailing the actions taken: Record of all staffs' registration details and renewal dates now in place.</p>
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