

Unannounced Follow up Care Inspection Report 12 March 2018



Foyle Disability Resource Centre

Type of service: Day Care Service
Address: Glen Road, Londonderry, BT48 0BX
Tel no: 028 7126 6593
Inspector: Maire Marley

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

This is a Day Care Setting with approval for 89 places that provides care and day time activities for people living with a physical or sensory disability. The service operates Monday to Friday.

3.0 Service details

Registered organisation/registered person: Western Health and Social Care Trust Anne Kilgallen	Registered manager: Cathal MacElhatton
Person in charge of the service at the time of inspection: Kevin Murray	Date manager registered: Kevin Murray appointed as manager 27/09/2016 in the absence of the registered manager

4.0 Inspection summary

An unannounced inspection took place on 12 March from 14.00 to 16.00 hrs.

This inspection was underpinned by the Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

The inspection focused on the action taken in response to the areas of improvement identified in the previous inspection dated 25 October 2017. The action taken in regard to the identified areas of improvement are reported on in Section 4 of this report.

Areas requiring improvement were identified in relation to notifications required to be submitted to RQIA relating to the day care setting change of name and the return of the registered manager.

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/patients/residents/clients experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	3	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Kevin Murray, acting 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 25 October 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 25 October 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:

- the registration details of the day centre
- written and verbal communication received since the previous care inspection
- the previous care inspection report and quality improvement plan (QIP)

During the inspection the inspector met with the manager and spoke with a member of care staff.

The following records were examined during the inspection: |

- RQIA registration certificate
- record of complaint
- accident/untoward incident records
- staff roster
- staff supervision and appraisal records
- service user agreements
- elements of four service users' care records
- sample of quality assurance audits
- staff training information
- minutes of three staff meetings
- communication records
- minutes of three service user advocacy meetings
- monthly monitoring reports from Dec 2017 to Feb 2018

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 25 October 2017

The most recent inspection of the day care setting was an unannounced care inspection and the QIP was validated during this inspection.

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 6.1 and 6.2 Stated: First time To be completed by: 31 December 2017	The registered person shall ensure that members' agreements detail any charges payable by or in respect of the service users and the arrangements to manage these, along with the arrangements for reviewing the agreement and the period of notice required for the increase or variation to any fees. Ref: 6.5	Met
	Action taken as confirmed during the inspection: The returned quality improvement plan, discussion with the manager along with the review of service user's agreements and minutes of service user meetings (confirmed that the day centre in consultation with service users had reviewed and updated the agreements. The agreements reviewed detailed the charges payable by service users' and included details regarding the termination notice.	
Area for improvement 2 Ref: Regulation 19.2 Stated: First time To be completed by: 31 December 2017	The registered person shall ensure that a record of any area of di-satisfaction, the action taken to resolve the concern/issue and the outcome of the investigation and record if the complainant was satisfied with the outcome. Ref:6.7	Met
	Action taken as confirmed during the inspection: The returned quality improvement plan, discussion with the manager along with the review of the revised documents confirmed that this requirement had been actioned. The	

	trust had introduced and incorporated a feedback/action plan in each service user file that included the issue raised, action taken and the outcome of the action taken. There were no recorded complaints however the manager reported that an audit of all areas of dis-satisfaction would be maintained.	
Area for improvement 3 Ref: Regulation 17.2 Stated: First time To be completed by: 31 January 2018	<p>The registered person shall submit to RQIA a report of the annual quality review report for the financial year 2015/2016.</p> <p>Action taken as confirmed during the inspection: Inspector confirmed that a copy of the annual quality review report was submitted as requested.</p>	Met
Action required to ensure compliance with the Day Care Settings Minimum Standards 2012		Validation of compliance
Area for improvement 1 Ref: Standard 17.9 Stated: First time To be completed by: 31 December 2017	<p>The registered person shall ensure an audit of the dining room is completed and inform RQIA of the outcome of this audit.</p> <p>Action taken as confirmed during the inspection: The review of the dining room and examinations of service users meetings provided confirmation that this area of improvement had been addressed. Tables had attractive coverings and the manager confirmed that condiments are provided at lunch time. In addition work with service users to improve the over-all decoration of the dining room was ongoing.</p>	Met
Area for improvement 2 Ref: Standard 5.2 Stated: First time To be completed by: 31 December 2017	<p>The registered person shall ensure the support and well-being plan provides sufficient information to direct and guide staff in regard to the care and support each service user requires.</p> <p>Ref: 6.5</p> <p>Action taken as confirmed during the inspection: There was evidence in four care files examined that staff are continuing to review their care planning processes, the manager reported work would continue and this was evidenced in the files examined. The improvements noted enabled the inspector to assess this area as met; progress will continue to be monitored during forthcoming</p>	Met

	inspections.	
Area for improvement 3 Ref: Standard 10.4 and 10.5 Stated: First time To be completed by: 30 October 2017	<p>The registered person shall ensure the arrangements in the dining room are improved to ensure lunch time is an enjoyable and social experience for service users. Fresh water should be available to all service users at all times.</p> <p>Ref 6.6</p> <p>Action taken as confirmed during the inspection: Discussion with the manager, information in the returned QIP, review of the dining room and minutes of service users meetings confirmed that the arrangements in the dining room had been improved. Jugs of water are available at all tables.</p>	Met
Area for improvement 4 Ref: Standard 7.4 Stated: First time To be completed by: 31 December 2017	<p>The registered person shall ensure that communication dairy/notes are signed and dated after each entry. The record should detail action taken by staff in response to a service users' behaviour</p> <p>Ref. 6.5</p> <p>Action taken as confirmed during the inspection: A review of a sample of daily notes confirmed that this area of improvement had been addressed.</p>	Met
Area for improvement 5 Ref: Standard 10.1 and 10.7 Stated: First time To be completed by: 31 December 2017	<p>The registered person shall ensure that a nutritious and varied diet is available to service users which meet their individual and recorded dietary needs and preferences. Menus should be devised in consultation with service users.</p> <p>Ref: 6.6</p> <p>Action taken as confirmed during the inspection: Evidence was provided during the inspection that service users had been surveyed by catering support services regarding the menu and choices available. There was evidence that suggestions and concerns had been addressed. Arrangements were in place to review the menu with service users at their regular meetings.</p>	Met

Area for improvement 6 Ref: Standard 17.10 Stated: First time To be completed by: 31 December 2017	The registered person shall ensure that the monthly monitoring visits detail if the visit was announced or unannounced. Ref: 6.	Met
	A review of the monthly monitoring visits found these were in place, available for inspection and detailed if the visits were announced or unannounced.	

This inspection focused solely on issues as outlined in section 4.0.

6.3 Inspection findings

The registration certificate was up to date and displayed appropriately. The manager confirmed staff had access to a range of policies and procedures that they use to guide and inform their practice.

Management arrangements were discussed with Mr Murray, manager who was covering the day care setting in the absence of Mr MacElhatton the registered manager. Mr Murray reported he was retiring at the end of the month (31/03/2018) and that the registered manager had returned to work on a phased return. Notification of the management arrangements should be submitted to RQIA.

During the inspection it was noted that the day centre in consultation with service users and representatives had changed the name of the centre. The registered manager should submit the required notification of this change to RQIA.

The statement of purpose and service user guide should also be revised to reflect the change of name and should be submitted to RQIA.

Overall the inspection showed the management team had responded positively and addressed the areas of improvement identified in the previous QIP.

Areas for improvement

Three areas for improvement were identified in respect to notifying RQIA of the change of name for the day care setting, change to management arrangements and a revision of the statement of purpose and service user guide.

	Regulations	Standards
Total number of areas for improvement	3	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Kevin Murray acting manager position, 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

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.



A completed Quality Improvement Plan from the inspection of this service has not yet been returned.

If you have any further enquiries regarding this report please contact RQIA through the e-mail [address info@rqia.org.uk](mailto:info@rqia.org.uk)

Quality Improvement Plan	
Action required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007	
Area for improvement 1 Ref: Regulation 31(e) Stated: First time To be completed by: 30 April 2018	<p>The registered person shall submit a notification informing RQIA of the change of name of the day care setting.</p> <p>Ref: 6.3</p>
	Response by registered person detailing the actions taken:
Area for improvement 2 Ref: Regulation 30 (5) Stated: First time To be completed by: 30 April 2018	<p>The registered person shall inform RQIA in writing of the return of the registered manager</p> <p>Ref: 6.3</p>
	Response by registered person detailing the actions taken:
Area for improvement 3 Ref: Regulation 7 (a) (b) Stated: First time To be completed by: 30 April 2018	<p>The registered person shall revise the revise the statement of purpose and service user's guide to reflect the change of name of the day care setting and management arrangements. The revised documents should be submitted to RQIA. .</p> <p>Ref: 6.3</p>
	Response by registered person detailing the actions taken:

Please ensure this document is completed in full and returned via Web Portal/



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