

Unannounced Care Inspection Report 17 January 2019



Killadeas Day Centre

Type of Service: Day Care Service
**Address: 221 Lisnaskea Road, Shanaghy,
Lisnaskea, BT92 0JZ**
Tel No: 02867722798
Inspector: Angela Graham

www.rqia.org.uk

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 that provides care and day time activities for up to 28 service users with a learning disability. The day care setting is open Monday to Friday and is managed by the Western Health and Social Care Trust (WHSCT).

3.0 Service details

Organisation/Registered Provider: Western Health and Social Care Trust Responsible Individual: Anne Kilgallen	Registered Manager: Patricia Griffith
Person in charge at the time of inspection: Patricia Griffith, Registered Manager Ann Finch, Day Care Worker	Date manager registered: 21 June 2013
Number of registered places: 30	

4.0 Inspection summary

An unannounced inspection took place on 17 January 2019 from 09.05 to 16.10 hours.

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 previous care inspection and to determine if the establishment was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to staff training, knowledge regarding adult safeguarding, infection prevention and control that promoted safe care. Regarding effective practice, examples of good practice were found in relation to audits, service user reviews and communication between service users, staff and other key stakeholders. Good practice was found regarding compassionate care in relation to the culture and ethos of the day care setting, dignity and privacy, listening to and valuing service users. Finally, good practice was found in relation to governance arrangements and maintaining good working relationships supporting well led care in the setting.

No areas requiring improvement were identified during this inspection.

Service users were asked to provide their views regarding the day care setting. Examples of some of the comments made by service users are “staff are lovely and they listen to what I say”; “I have some of my art projects displayed in the library” and “I like going swimming and going out for coffee”.

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	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Patricia Griffith, Registered Manager and Ann Finch, Day Care Worker, 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.

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
- Incident notifications that highlighted that no incidents had been notified to RQIA since the last care inspection on 13 March 2018
- The previous care inspection report and QIP
- Pre-inspection assessment audit.

During the inspection, the inspector met with the registered manager, senior day care worker and four day care workers. Introductions were made to service users during the course of a walk around the setting; with individual interaction with twelve service users.

The day care worker was provided with ten questionnaires to distribute to service users/relatives for their completion. The questionnaires asked for service user and relatives' views regarding the service, and requested their return to RQIA. Nine service users' and/or relatives questionnaires were returned to RQIA. The content of the questionnaires is discussed in the main body of the report.

At the request of the inspector, the day care worker 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. Five responses were received within the timescale requested, including a response by a visiting professional.

The inspector requested that the day care worker place a 'Have we missed you' card in a prominent position in the day care setting to allow service users and relatives 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 the day care worker to be displayed in the day care setting for service users.

The following records were examined during the inspection:

- Complaints and compliments records
- Accident/untoward incident records
- Staff roster
- RQIA registration certificate
- Staff supervision and appraisal records
- Records confirming registration of care staff with the Northern Ireland Social Care Council (NISCC)
- Elements of three service users' care files
- Sample of policies and procedures
- Sample of quality assurance audits
- Fire drill records
- Fire risk assessment findings dated 17 December 2018
- Staff training information
- Minutes of three staff meetings
- Minutes of three service user meetings
- Three monthly monitoring reports.

One area for improvement identified at the last care inspection was reviewed and assessment of compliance recorded as met.

The inspector would like to thank the registered manager, senior day care worker, service users and staff for their involvement in the inspection process.

The findings of the inspection were provided to the registered manager and day care worker at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 13 March 2018

The most recent inspection of the establishment was an unannounced care inspection.

6.2 Review of areas for improvement from the last care inspection dated 13 March 2018

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 28 (5)	The registered provider shall maintain a copy of the monitoring report in the day care setting and make it available on request to the	

<p>(a)</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the time of the inspection</p>	Regulation and Improvement Authority.	<p>Met</p>
	<p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the day care worker confirmed that this area for improvement had been addressed. The inspector reviewed a number of reports and confirmed that the monthly quality monitoring reports were available and up to date.</p>	

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.

Discussion with the day care worker, staff and service users on the day of inspection confirmed that sufficiently competent and experienced persons were working in the centre to meet the assessed needs of service users. The day care worker was able to describe contingency measures that would be taken to ensure the safety of the service users if staffing levels could not be provided on any given day. A review of the staffing roster for weeks commencing 14 December 2018 until 17 January 2019 evidenced that the planned staffing levels were adhered to. Records showed the numbers of staff working each day and the capacity in which they worked. No concerns were raised regarding staffing levels during discussion with service users and staff.

The day care worker confirmed that staff employment records were held within WHSCT human resources department and that all appointments were made in compliance with relevant legislative requirements and trust policy and procedures. The day care worker confirmed that an induction programme was available for newly appointed members of staff. A review of this induction programme noted that it was comprehensive and included areas such as privacy and dignity, confidentiality, risk management, complaints procedure, health and safety and adult safeguarding.

The day care worker confirmed that competency and capability assessments were undertaken for any person who is given the responsibility of being in charge of the centre for any period in the absence of the registered manager. Records of competency and capability assessments were retained and examined during the inspection. These were noted to be satisfactory.

Observation of and discussion with staff on duty demonstrated a clear understanding of service users' needs and how those needs should be met. They described the training they received as effective and of a good quality. Discussion with staff and review of a sample of staff training records concluded staff had received mandatory since the previous care inspection such as first aid, moving and handling and adult safeguarding training. It was positive to note that staff received training in addition to the mandatory training requirements such as: equality, good relations and human rights; autism awareness and information governance.

The day care worker advised that staff have access to a rolling mandatory training programme; this was confirmed during discussion with staff, who advised that they had access to training to support them in meeting the roles and responsibilities of their job.

The day care worker advised there had been no recent safeguarding referrals in the setting and that any suspected, alleged or actual incidents of abuse would be fully and promptly referred to the relevant persons and agencies for investigation in accordance with procedures and legislation; and that written records would be retained. In addition discussion with staff established that they were aware of the roles and responsibilities in relation to reporting adult safeguarding concerns and maintaining safeguarding records. It was positive to note that an induction programme was available for agency staff and records were maintained.

The day care worker confirmed that the WHSCT adult safeguarding practices are directed by the regional Adult Safeguarding Prevention to Protection in Partnership, July 2015 and its associated Operational Procedures, September 2016. An Adult Safeguarding Champion (ASC) was identified for the service. Discussion with the day care worker further confirmed that there was a clear pathway for staff to follow in relation to referring any safeguarding concerns to appropriate professionals.

Staff confirmed that they had the confidence to report poor practice, should they identify it. However, all expressed the view that practice throughout the centre was of a high quality and that team members worked well together. Staff also confirmed that they were aware of the setting's whistleblowing policy and were able to access the policy.

Observation of the environment confirmed that the setting was warm, clean, odour free and had suitable lighting. Fire exits were observed to be clear of clutter and obstruction. Records examined identified that a number of safety checks were undertaken including: fire safety drills to ensure service users can exit safely, safety checks of fire doors; fire extinguishers and weekly fire alarm tests. The review of fire drill records confirmed that a fire drill had been undertaken on 22 October 2018. Discussion with staff confirmed they were aware of the evacuation procedure. The discussion with the day care worker confirmed that the furniture, aids and appliances were fit for purpose for the needs of service users.

A fire risk assessment was completed on 17 December 2018. No significant findings were recorded.

Infection prevention and control measures were in place and a good standard of hygiene was observed throughout the centre. Measures included the availability of hand sanitisers around the setting, "seven step" hand hygiene notices positioned at wash hand basins and supplies of liquid soap and hand towels mounted on the wall. Staff had effective access to gloves and aprons as required. Staff training records confirmed that staff had received training in infection prevention and control in line with their roles and responsibilities and control of substances hazardous to health (COSHH). Observation of staff practice evidenced that staff adhered to infection prevention and control procedures.

Staff confirmed that they felt care was safe in this setting. Discussion with both staff and service users confirmed that service users have had access to a consistent staff team who have developed a holistic and effective understanding of service users' needs. Observation of, and discussion with staff on duty evidenced they were sufficiently experienced to meet the assessed needs of the service users present. Staff demonstrated a clear understanding of service users' needs and how those needs should be met.

Staff and the registered manager described the importance of staff monitoring for any changes in service users' needs which may lead to an ad hoc care review and/or onward referral to relevant WHSCT professionals. In addition, staff spoken with on the day of inspection confirmed that their role was to ensure service users enjoyed their time in the day centre by undertaking stimulating activities and that they felt safe and comfortable in the setting.

There were arrangements in place to ensure that staff are registered with the Northern Ireland Social Care Council (NISCC).

Discussion with service users and staff on the day of inspection revealed that they felt the care provided was safe. The following is a sample of comments made:

Service users' comments:

- "Staff help keep me safe as I sometimes need help due to my poor eyesight."
- "All is good here."
- "Staff help me when I am cooking if I need to cut things."

Staff comments:

- "It is important service users are safe in our care and we work hard as a team to ensure the service users safety. We are fully aware of their needs and all risks that are identified."
- "A variety of practices lead to safe care including appropriate training, supervision and good teamwork."

Nine service users and/or relatives returned questionnaires to RQIA. The respondents confirmed they were "very satisfied" regarding questions on "is care safe" in this setting. The respondents confirmed there were enough staff to help them, they felt protected and free from harm, they could talk to staff if they had concerns and the environment was safe and clean.

Four staff and one visiting professional returned questionnaires to RQIA post inspection. The staff and visiting professional confirmed they were "very satisfied" regarding questions on "is care safe" in this setting.

On the day of the inspection Killadeas Day Centre was found to be delivering safe care. There was positive feedback from twelve service users and six staff about the delivery of safe care in the day centre. Observations of care practices showed there was a culture of ensuring service users were safe and protected from harm.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff training, knowledge regarding adult safeguarding, infection prevention and control and knowledge and competency in respect to safe care.

Areas for improvement

No areas for improvement were identified in this domain during the inspection.

	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 inspector reviewed the day care settings arrangements for appropriately responding to and meeting the needs of people who use the service. Information relating to the nature and range of services provided is outlined within the Statement of Purpose. Observations throughout the inspection confirmed that the day care setting was providing care in accordance with their Statement of Purpose.

Discussion with the day care worker established that staff in the day care setting responded appropriately to and met the assessed needs of the service users.

The inspector reviewed elements of three service users' care files. The inspection of the care records found they were maintained in line with the legislation, the assessments of need, risk assessments, care plans and records of health and well-being of the service users were current and had been reviewed.

During discussions staff revealed that they felt care provided to service users within the setting was effective. They were knowledgeable regarding service users' needs and care plans; they described how intervention with each service user was person centred depending on their individual needs. Staff discussed the systems in place to ensure any updates or changes in service users' needs were discussed and shared as necessary.

A record was kept of each service user's involvement and progress at the centre and entries were made in proportion to the frequency of attendance of the individual. Dates and signatures were present in all of the files examined. Records of annual care reviews for each person demonstrated that an evaluation of the overall suitability of the placement had been discussed and agreed.

Discussion with the day care worker and review of arrangements concerning the storage of confidential records confirmed that service users' records were stored safely and securely in compliance with legislative. Staff recognised the importance of maintaining accurate and contemporaneous records to guide their practice and ensure that care provided was safe, effective and timely.

Service users confirmed that they would be comfortable speaking with staff or management if they had any concerns or complaints. The day care setting's Statement of Purpose and Service User Guide provides information on how to make a complaint and the importance of ensuring that service users' opinions and feedback is heard and acted upon. Information is provided to service user's regarding their right to advocacy support and the role of the Patient and Client Council (PCC).

Staff stated that there was effective communication and team work which ensured that safe and effective care was provided to service users. The senior day care worker and staff spoken with advised that there has been a consistent staff team for a number of years, which they reported had a positive impact on the experience of service users and helped develop working relationships. Staff were aware of their roles and responsibilities and lines of accountability.

The day care worker 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, staff training, fire safety, supervision and appraisal and care records and evidenced that actions identified for improvement had been completed.

The interactions observed between staff and service users throughout the inspection confirmed that staff were suitably skilled and effective in communicating with all service users. There was good evidence of person centred interventions that assured service users were involved and communication opportunities were maximised.

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, care reviews, service users and staff meetings.

Discussion with, and observation of service users and staff confirmed that service users had access to a variety of activities to suit individual needs. Staff also support service user's involvement in activities within the wider community, including outings to local restaurants, coffee shops, shops and the local library.

Discussion with service users and staff on the day of inspection evidenced that they felt the care provided was effective. The following is a sample of comments made:

Service users' comments:

- "We have music and dancing in the big hall after lunch."
- "Dinner here is really good."
- "I like coming to the centre and I also work in a coffee shop."

Staff comments:

- "Care records are always updated as changes arise and these changes are shared with all the staff."
- "We have monthly service users meetings and we very much involve the service users in the running of the centre. Activities, courses and outings are always discussed at the meetings."

Nine service users and/or relatives returned questionnaires to RQIA. The respondents confirmed they were "very satisfied" regarding questions on "is care effective" in this setting. The respondents also confirmed that they had got the right care, at the right time in the right place, staff knew their care needs, they were aware of their care plan and the care met their expectations.

Four staff and one visiting professional returned questionnaires to RQIA post inspection. The staff and visiting professional confirmed they were “very satisfied” regarding questions on “is care effective” in this setting. Additional comments made by staff included “Share Centre is a perfect place to work in and for service users to attend”.

The evidence indicates that the care provided in Killadeas Day Centre is effective in terms of promoting each service user’s involvement, development, enjoyment and wellbeing.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to care records, audits and service user reviews and communication between service users, staff and other key stakeholders.

Areas for improvement

No areas for improvement were identified in this domain during the inspection.

	Regulations	Standards
Total number of areas for improvement	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.

The inspection sought to assess the day care setting’s ability to treat service users with dignity, equality and respect and to fully involve service users in decisions affecting their care and support. Service users were informed regarding the RQIA inspector visiting the day care setting and staff encouraged them to engage with the inspector.

Discussions with service users and staff and observation of care during the inspection showed that the promotion of values such as choice, dignity and respect were embedded in the culture and ethos of the day centre.

There were a range of systems in place to promote effective engagement with service users and/or their relatives; they included an open door policy for service users to discuss any issues with staff or the registered manager, care review meetings, bimonthly quality monitoring visits and service user meetings.

Discussion with and observation of service users and staff interactions demonstrated that service users were treated with dignity and respect while promoting and maintaining their independence. Service users related positively to staff and each other. The atmosphere was relaxed and service users were observed engaging spontaneously and enthusiastically with staff.

Staff interactions with service users were observed to be cheerful, compassionate, caring and timely, with staff providing clear information, using appropriate language, demonstrating active listening skills, checking understanding and service users’ expectations. The inspector observed on numerous occasions, staff offering service users choice regarding the activity they

wished to do or where they wished to go. Staff were noted to be busy attending to the needs of service users and they took time to listen and reassure them as needed. It was apparent that service users were familiar with staff as they appeared relaxed and comfortable in their surroundings and interactions. There was genuine warmth in the engagement by staff with service users and staff spoken with were knowledgeable regarding service users likes, dislikes and individual preferences.

The inspector confirmed that service users were enabled and supported to engage and participate in meaningful activities, which had been assessed as appropriate for each service user based on their needs and goals. In discussions with several service users, they were able to identify how activities were based on their individual choice or what had been agreed as a group activity. Several service users expressed that they could decide not to participate in activities and this was observed in the afternoon when one service user stated “I didn’t want to go to the music and dance in the hall so I have come back to the centre to colour my pictures”.

Staff were aware of what was important for each service user and their specific interests and organised meaningful activities to support this. Discussions with staff regarding the activities they were delivering confirmed the activities were tailored to meet the needs of the service users, as well as promoting their strengths and providing choice. Service users were enabled and supported by staff to engage and participate in meaningful activities. They discussed the range of activities they could take part in such as cookery classes, beauty therapy, music sessions, swimming and creative crafts.

An observation of the lunch time meal confirmed that service users were given a choice in regards to where they preferred to dine, food and fluid choices and the level of help and support requested. Staff treated service users with dignity and respect affording adequate time for service users to make decisions and choices and offered reassurance and assistance appropriately. The food appeared nutritious and appetising. Staff wore appropriate aprons when serving the lunch time meal. Staff interactions with service users were observed to be compassionate, caring and timely.

Service users meetings also take place within the day care setting. The day care worker confirmed that service user meetings were held approximately monthly. The minutes of the three most recent service users’ meetings were reviewed during this inspection. The meetings had taken place on: 4 January 2019, 28 November and 25 October 2018. The minutes of meetings reflected service users’ views and opinions were sought and form the basis of all discussions. The inspector noted some of the areas recently discussed during meetings included activities, outings, college courses and transport arrangements.

Discussion with service users and staff on the day of inspection revealed that they felt the care provided was compassionate. The following is a sample of comments made:

Service users’ comments:

- “Staff help me with all my art projects. They are all very good to me.”
- “I like coming here.”

Staff comments:

- “Service users are always offered choice and we respect their choices.”
- “We promote all our core values including equality, dignity and independence.”

Nine service users and/or relatives returned questionnaires to RQIA. The respondents confirmed that they were “very satisfied” regarding questions on “is care compassionate” in this setting. The respondents also confirmed that they were treated with kindness, respected and their dignity was maintained, staff informed them about their care and supported them to make decisions about their care.

Four staff and one visiting professional returned questionnaires to RQIA post inspection. The staff and visiting professional confirmed that they were “very satisfied” regarding questions on “is care compassionate” in this setting.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the provision of compassionate care and the involvement of service users.

Areas for improvement

No areas for improvement were identified in this domain 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.

The registration certificate was up to date and displayed appropriately.

There was a clear organisational structure and this information was outlined in the day care settings Statement of Purpose. Evidence gathered at this inspection indicates that the service is currently operating in keeping with its Statement of Purpose. Staff demonstrated awareness of their roles, responsibilities and accountability. Discussion with the day care worker confirmed that they had a good understanding of their role and responsibilities under the legislation.

The Statement of Purpose for the day care service was reviewed and updated by the registered manager in May 2018. The document clearly describes the nature and range of the service to be provided and addresses all of the matters required by Regulation 4(1) of The Day Care Setting Regulations (Northern Ireland) 2007. Evidence gathered at this inspection indicates that the service is currently operating in keeping with its Statement of Purpose.

Positive feedback was provided by staff in respect of leadership they received from the registered manager and effective team working. Staff confirmed that if they had any concerns or suggestions they could raise these with the management team. Staff spoken with confirmed that they enjoyed working in the day care setting and with their colleagues. All grades of staff consulted demonstrated during the inspection the ability to communicate effectively with their colleagues and other multi-disciplinary teams in the best interests of the service users.

The day care worker and staff advised there were a range of policies and procedures in place to guide and inform staff. Policies were maintained in a manner that was easily accessible by staff.

Discussions with the senior day care and staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. The senior day care worker confirmed that staff have an annual appraisal, recorded individual, formal supervision at least every three months. A review of a sample of records verified this.

Staff gave positive feedback in respect of leadership and good team working. Staff stated that this is achieved through effective communication, supervision, staff meetings and the open door approach provided by the registered manager.

Discussion with the day care worker confirmed that staff meetings were generally held monthly, and records verified this. The last meeting was held on 3 January 2019 and minutes were available. Previous staff meetings had been undertaken on 6 December and 8 November 2018. The records included the date of the meeting, names of those in attendance and agenda items. Relevant information was discussed regarding the needs of service users and governance arrangements to ensure delivery of safe and effective care. A review of a sample of records evidenced that meetings had a quality improvement focus; information was shared regarding new best practice guidance. The day care worker confirmed that the minutes of the meetings were made available for staff to consult.

A complaints and compliments record was maintained in the day centre. Review of the complaints record evidenced that there had been no complaints recorded since the previous inspection. Discussion with staff confirmed that they knew how to receive and deal with complaints and ensure that the registered manager was made aware of any complaints.

The inspector discussed the monitoring arrangements under regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. The regulation 28 quality monitoring visits had been undertaken bimonthly by an independent monitoring officer. Three quality monitoring reports were examined from July to November 2018 and found to be satisfactory. The reports adhered to RQIA guidelines and evidenced engagement with service users, professionals and staff, with positive feedback recorded.

The senior day care worker could describe the processes in place to maintain effective working relationships with WHSCT professionals. A review of documentation evidenced that staff referred to or consulted with a range of professionals on behalf of service users when relevant.

Discussion with the senior day care worker and review of records evidenced that systems were in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

The inspector discussed arrangements in place that relate to the equality of opportunity for service users and the importance of the staff being aware of equality legislation whilst recognising and responding to the diverse needs of service users. The day care worker confirmed that this was addressed with staff through their training, supervision and appraisal process. In addition the day care worker confirmed that the day care setting had not received any complaints with respect to equality issues from service users and/or their representatives.

Discussions with service users, staff and the registered manager highlighted evidence that supports service user equal opportunities, regardless of their abilities, their background or their lifestyle. Some of the areas of equality awareness identified during the inspection include:

- Effective communication
- Service user involvement
- Safeguarding
- Advocacy
- Individual person centred care
- Individual risk assessment
- Disability awareness

Discussion with service users and staff on the day of inspection revealed that they felt the service was well led. The following is a sample of comments made:

Service users' comments:

- "I have no complaints, everything is fine."
- "I can talk to the staff anytime if I need anything."

Staff comments:

- "We have an open door policy in addition to regular supervision and staff meetings."
- "This is a very well-run centre and staff work hard to ensure we provide a good service."

Nine service users and/or relatives returned questionnaires to RQIA. The respondents confirmed they were "very satisfied" regarding questions on "is care well led/managed" in this setting. They confirmed that they knew who was in charge of the setting at any time, the service was well managed, their views were sought about their care and quality of service and they knew how to make a complaint.

Four staff and one visiting professional returned questionnaires to RQIA post inspection. The staff and visiting professional confirmed they were "very satisfied" regarding questions on "is care well led/managed" in this setting. Additional comments made by staff included "I feel that we provide the best service that we possibly can. It is led by our service users, as they can verbalise their own ideas. The staff team that we have are all great. We all have different skills that we bring to the team. We also have a lot of relevant training in all areas that are associated with providing a successful service. I feel very lucky to have such a great team of professionals to work alongside and also a great family of service users, who I feel are comfortable in our care."

On the day of the inspection there was evidence of effective leadership and management in Killadeas Day Centre and a culture focused on the needs of service users.

Areas for improvement

No areas for improvement were identified in this domain 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

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

Web www.rqia.org.uk

 [@RQIANews](https://twitter.com/RQIANews)