

Unannounced Care Inspection Report 19 January 2017



Killadeas Day Centre

Type of service: Day Care Service Address: 221 Lisnaskea Road, Shanaghy, Lisnaskea, BT92 0JZ Tel no: 028 6772 2798 Inspector: Angela Graham

<u>www.rqia.org.uk</u>

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of Killadeas Day Centre (11231) took place on 19 January 2017 from 9.40 to 16.00 hours.

The inspection sought to assess progress with any issues raised during and since the last care 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 Killadeas Day Centre was found to be delivering safe care. There was positive feedback from all service users and one service user's representative, 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. Staff were knowledgeable of their specific roles and responsibilities in relation to adult safeguarding.

The staff in Killadeas Day Centre were observed caring for a range of service users' needs. On the day of the inspection the staffing levels were responsive to service user's needs, welfare and safety.

Is care effective?

On the day of the inspection it was established that the care in Killadeas Day Centre was effective. Observations of staff interactions with service users and discussions with a total of eleven service users and one service user's representative evidenced this. There were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users.

The inspection of elements of three service users care records; incident recording; discussion with the service users, one service user's representative and staff concluded care was being delivered at the right time, in the right place, and with the best outcome. Staff demonstrated a high level of commitment to ensure service users received the right care at the right time. Staff spoken with understood their role, function and responsibilities. Staff also confirmed that if they had any concerns, they could raise these with the registered manager.

Is care compassionate?

On the day of the inspection Killadeas Day Centre was found to be delivering compassionate care. The inspection of records, observations of practice and discussions with staff, service users and one service user's representative confirmed that service users were being treated with compassion, dignity and respect. Furthermore they were encouraged by staff to be involved in decisions affecting their care and support.

Staff were observed responding to service users' needs and requests promptly and professionally. Discussion with service users and one service user's representative and observation provided evidence that service users were listened to, valued and communicated with in an appropriate manner.

Is the service well led?

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. Staff confirmed that they were well supported in their roles and that good training is provided.

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

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and	0	0
recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. 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.

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

Registered organisation/registered person: Western Health and Social Services Board Elaine Way CBE	Registered manager: Patricia Griffith
Person in charge of the service at the time of inspection: Patricia Griffith, Registered Manager Ann Finch, Day Care Worker	Date manager registered: 21 June 2013

3.0 Methods/processes

- The registration details of the day centre
- 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 three care staff
- Discussion with eleven service users
- Discussion with one service user's representative
- Examination of records
- File audits
- Evaluation and feedback

The day care worker was provided with five questionnaires to distribute to service users; five staff members and five relatives for their completion. The questionnaires asked for service user, staff and relatives views regarding the service, and requesting their return to RQIA. Five staff, five relatives and five service users' questionnaires were returned to RQIA. The content of the questionnaires is discussed in the main body of the report.

The following records were examined during the inspection:

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

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 14/03/16

The most recent inspection of the day care service was an unannounced care inspection.

4.2 Review of requirements and recommendations from the last care inspection Dated 14/03/16

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

4.3 Is care safe?

The day care worker 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. A review of the staffing roster for weeks commencing 2 January until 19 January 2017 evidenced that the planned staffing levels were adhered to.

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.

The registered manager and staff 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.

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 care inspection.

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

The staff on duty on the day of inspection discussed the needs of the service users they were looking after. They gave a clear description of their needs and how those needs will be met. They knew who may need additional time to manage and support their behaviour; and gave examples of how they respond in a safe way to calm and redirect service users. Overall the staff described their aim was for service users to enjoy their time in the day service by undertaking stimulating activities and for service users to feel comfortable and safe in the group environment. The staff confirmed if they had any concerns regarding safe practice they would discuss this with their colleagues and/or the management team; whom they advised were accessible and supportive. Staff confirmed service users are encouraged to give their views, opinions and preferences. In summary the discussion with staff confirmed they were proactively promoting safe care for service users in this setting.

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

Discussion with staff confirmed that they had attended safeguarding vulnerable adults training in September 2016.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout. There was evidence that hand hygiene was promoted through notices, handwashing supplies and facilities. 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.

Five service users completed questionnaires for this inspection. These service users confirmed they felt safe in the setting; they could talk to staff if they were unhappy or had any issues or concerns, they could tell someone if they were worried about someone being treated badly, the setting is comfortable and they knew what to do if the fire alarm sounded.

Five relatives returned questionnaires to RQIA post inspection. They identified they were very satisfied with the safe care in Killadeas Day Centre. They stated their relative is safe and protected from harm, they could talk to staff, the environment is suitable to meet their relative's needs and they would report concerns to the manager.

Five staff members returned questionnaires. Staff confirmed the care was safe, they had received training in safeguarding vulnerable adults, there are risk assessments and care plans in place for service users, they would report poor practice and they receive support to fulfil their roles and responsibilities.

Areas for improvement

No areas for improvement were identified during the inspection.

	Number of requirements	0	Number of recommendations	0
--	------------------------	---	---------------------------	---

		_
caro	effectiv	2

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.

Review of elements of three service users' care records reflected there are risk assessments and care plans in place. There was evidence that risk and other assessments informed the care planning process. There was also recorded evidence of multi-professional collaboration. For example occupational therapists, speech and language professionals and other medical professionals had contributed to assessing needs and were part of formulating a plan to meet these identified needs.

Service users and/or their representatives were encouraged and enabled to be involved in the assessment, care planning and review process. Care recording for every five attendances was being maintained.

Review of elements of three service users' 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 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, activities, supervision and appraisal 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 health care professionals.

Discussion with the day care worker and review of records evidenced that service user meetings were generally held monthly. The last meeting was held on 05 December 2016 and minutes were made available.

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

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

Five service users' completed questionnaires. These service users confirmed they were getting the right care at the right time; staff were communicating well with them; their choices are listened to; they choose the activities they take part in; and they had been involved in the annual review of their day centre placement.

Five relatives returned questionnaires to RQIA post inspection. The relatives confirmed they were very satisfied with the effective care. They stated their relative gets the right care, at the right time, in the right place. They also confirmed they are satisfied with communication with staff, their awareness of their relative's needs, preferences and choices and that these are incorporated into the care they receive and that they are involved in their relative's annual review.

Five staff questionnaires confirmed service users are involved in their care plan, care plans inform the care provided, monitoring of quality is in place and that staff respond to service users in a timely manner.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements 0	Number of recommendations 0
--------------------------	-----------------------------

4.5 Is care compassionate?

The day care worker confirmed that staff in the day care setting promoted a culture and ethos that supported the values of dignity and respect, independence, rights, equality and diversity, choice and consent of the service users.

This day centre meets the needs of a diverse group of people who have learning disabilities. Some groups are physically able and can take part in activities with little staff support; other service users have behavioural needs that require a higher level of staff support. In spite of this diverse range of needs; the common ethos displayed by staff throughout the centre was that all service users need to be supported to take part. Staff were observed communicating warmly with the different groups to promote involvement. Staff were observed to be providing care confidently and effortlessly. Discussion with staff revealed the key to achieving good outcomes was in the planning. For example service users were involved in a music group activity that was delivered in the activity room.

Discussion 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. Observations of service users taking part in activities showed participation was good. Furthermore those service user's assessed to need staff support, received this in a timely manner so they were involved in the activity.

A review of activity records was undertaken and confirmed an extensive range of person centred activities including cookery/baking, drama, swimming, arts and crafts and music therapy. Activities enjoyed within the local community included credited courses through the local technical college, social farming project and an organic gardening project.

During the observation and discussions staff were observed checking service users were comfortable, that their needs and preferences were being met. If the staff identified someone needed additional support they sensitively and discretely got their attention and accompanied the service user to where they could get more individualised care and privacy. Overall staff were observed supporting service users in a compassionate way, encouraging service users to be involved in their care and promoting their independence. During discussion staff presented as knowledgeable and informed regarding each service user's needs.

The staff described they consult with service users informally when they are in the day care setting regarding their needs, preferences and choices. They described consultation is not always discussion; it can also be gauging preferences through body language or behaviour.

Service users are consulted on a formal basis via service users' meetings and the annual review of their day care placement.

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 like going swimming."
- "This is a good place to come."
- "I like the food and always get plenty to eat."
- "Ann is good to me."
- "I like cooking in the centre."
- "We go to music and dancing every week. It is fun."
- "Nice place."

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 relative is extremely well looked after in the centre."
- "Anytime I visit the centre is warm and clean."
- "Staff are helpful and approachable. I would feel comfortable raising any issues with Ann or any of the staff."
- "I attend my relative's care review and feel very much involved in the meeting."

Consultation with service users regarding compassionate care and service users' questionnaires confirmed they were treated with respect and are involved in decisions affecting them, the staff are kind and caring, their privacy is respected; they have choices and are involved in decisions.

Five relatives returned questionnaires to RQIA post inspection. The relatives confirmed they were very satisfied their relative was treated with dignity and respect and involved in decisions affecting their care. Their relative is treated well and they are consulted regarding decisions.

Five staff questionnaires confirmed service users are treated with dignity and respect, encouraged to be independent; their views are sought and acted upon.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements 0	Number of recommendations	0
--------------------------	---------------------------	---

4.6 Is the service well led?

The day care worker 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 staff confirmed they were familiar with organisational and management structure and with their lines of professional accountability. An organisational chart was displayed within the day care setting. Staff were able to describe their roles and responsibilities and 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.

Discussion with the day care worker 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.

Discussion with the day care worker confirmed that staff meetings were held generally monthly, and records verified this. The last meeting was held on 21 December 2016 and minutes were available. Previous staff meeting had been undertaken on 24 October and 26 September 2016. The day care worker confirmed that the minutes of staff meetings were made available for staff to consult.

The day care worker confirmed that no complaints were received since the previous care inspection on 14 March 2016. Compliments records were also recorded and maintained by staff.

Three monitoring reports were reviewed from August to December 2016. The reports evidenced visits had taken place on 12 August, 30 September and 6 December 2016.

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

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

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 Killadeas Day Centre which were focused on the needs of service users.

The relatives' questionnaires confirmed they were very satisfied the service was managed well; staff and the manager are approachable, professional and caring. They were informed about the complaints process and they have a copy of the service user's guide.

Five service users' questionnaires confirmed the service was managed well; they said they knew the manager and could talk to the manager if they had any concerns. The service users also confirmed staff had responded well to them and they are asked what they would like to do in the setting.

Five staff questionnaires confirmed the service is managed well, the service is monitored, and communication between the staff and management is effective.

Areas for improvement

No areas for improvement were identified during the inspection.

Number of requirements 0 Number of recommendations 0
--

5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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 provider from their responsibility for maintaining compliance with the regulations and standards.





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

 Web
 www.rqia.org.uk

 ©
 @RQIANews

Assurance, Challenge and Improvement in Health and Social Care