



The Regulation and
Quality Improvement
Authority

Inspector: Dermott Knox
Inspection ID: IN023783

Killadas Day Centre
RQIA ID: 11231
Share Unit
Derryadd
Lisnaskea
BT92 0EQ
Tel: 028 677 22798

Email: patricia.griffith@westerntrust.hscni.net

**Unannounced Care Inspection
of
Killadeas Day Centre (11231)**

14 March 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced care inspection took place on 14 March 2016 from 10.30 to 16.00. Overall on the day of the inspection the Day Care Setting was found to be delivering safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Settings Regulations (Northern Ireland) 2007, The Day Care Settings Minimum Standards 2012.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection Outcome

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

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Western Health and Social Care Trust/Ms Elaine Way, CBE	Registered Manager: Ms Patricia Griffith
Person in Charge of the Day Care Setting at the Time of Inspection: Mrs Ann Finch, Day Care Worker	Date Manager Registered: 21 June 2013
Number of Service Users Accommodated on Day of Inspection: 22	Number of Registered Places: 28

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards have been met:

Standard 5: Care Plan - where appropriate service users receive individual continence promotion and support.

Standard 8: Service Users' Involvement - service users' views and comments shape the quality of services and facilities provided by the Day Care Setting

4. Methods/Process

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

Prior to inspection the following records were analysed:

- Record of notifications of events
- Record of complaints
- Quality Improvement Plan from the previous inspection on 26 March 2015

During the inspection the inspector met with:

- Four service users individually and eight others in groups
- The day care worker in charge of the centre
- The registered manager and senior day care worker at the conclusion of the inspection
- Three care staff for individual discussions

The following records were examined during the inspection:

- File records for four service users, including care plans and review reports
- Progress notes for four service users
- Five monitoring reports for periods in 2015
- Record of notifications of events

- Record of complaints
- The statement of purpose
- Minutes of two service users'/Members' Council meetings
- Minutes of three staff meetings
- Training records for three staff
- Supervision and appraisal records for three staff
- A Competence and Capability Assessment for one staff who may take charge of the centre in the absence of the Day Care Worker.
- A sample of written policy and procedures documents.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an announced care inspection dated 26 March 2015. The completed QIP was returned and approved by the specialist inspector.

The one issue to be followed up is that which is set out in the Quality Improvement Plan from the previous inspection (see 5.2 below).

5.2 Review of Requirements and Recommendations from the last Care Inspection

Previous Inspection Statutory Requirements	Validation of Compliance
--------------------------------------------	--------------------------

No requirements or recommendations resulted from the primary announced inspection undertaken on 26 March 2015

Previous Inspection Recommendations	Validation of Compliance
<p>Recommendation 1</p> <p>Ref. Standard 13.8</p>	Partially Met
<p><u>Safeguarding</u></p> <p>The registered manager is to inform RQIA of the outcome of one reported safeguarding matter which is being investigated by the WHSC Trust.</p> <p>Action taken as confirmed during the inspection:</p> <p>In an email to the registered manager, dated 19 February 2016, the social worker with responsibility for this case explained the progress to date and stated that the investigation is ongoing. This recommendation remains in place.</p>	

5.3 Standard 5: Care Plan - Where appropriate service users receive individual continence promotion and support

Is Care Safe?

Killadeas Day Centre has guidelines, written by the manager in June 2015, for staff providing continence care for service users. A copy of the WHSCT Guidelines for the Selection of Continence Supplies/Products was also available. There is low level of continence care and support required in this centre. Staff members confirmed that they were confident in providing good quality continence care and had been appropriately trained for this aspect of their work, on 19 June 2015. Review records for four service users showed that care matters had been addressed to the satisfaction of the service user, a relative and/or a relevant professional.

The toilets and personal care facilities were considered by staff members to be satisfactory for current service users, each of whom is capable of carrying out a broad range of self-help tasks. There were numerous expressions of confidence in the staff who supported them and all contributors stated that they enjoyed their attendance at the centre and the activities in which they took part.

There was good evidence in records of incidents, accidents, complaints and staff meetings to show that safety and safeguarding were pursued with care and discussed regularly in order to promote the best possible outcomes for service users.

The evidence available during this inspection indicates that safe care is provided.

Is Care Effective? (Quality of Management)

A small number of the service users had assessed needs with regard to personal care and the objectives and working methods related to these needs were clearly set out in each of the care plans inspected. Care plan objectives were based on assessed needs, with related actions clearly identified for day centre staff to implement with each person. In discussions, staff members expressed the view that effective care was provided to meet each service user's care needs. Progress notes were found to be relevant, well detailed and up to date. Appropriate training for this aspect of the work had been provided for the staff team.

Monthly monitoring visits and reports were being completed regularly by a Trust appointed manager and on each visit the monitoring officer met with a number of service users and with staff to ascertain their satisfaction with service outcomes and with the operation of the centre. A sample of the centre's records was examined on each visit and any requirements arising from the visit were set out in an action plan to be reviewed the following month. The management and staff are commended for the thoroughness of their quality assurance processes and for the good efforts in pursuit of continuous improvement.

Is Care Compassionate?

Discussions with service users and staff confirmed that compassionate care is provided consistently in this centre. This conclusion was supported by observations of practice throughout the day of the inspection. Staff members, who were interviewed, spoke knowledgeably about each individual's assessed needs and all comments conveyed a strong

sense of compassion and caring for the person concerned. Service users spoke enthusiastically about their involvement in the centre and the wide variety of activities in which they participated.

Staff confirmed their confidence in the compassionate care practices of their colleagues within the team. Progress notes, written by staff were well detailed and verified a professional and caring attitude toward each service user. Observations of staff's interactions with service users, throughout the inspection period, presented evidence of calm, compassionate care being delivered and of staff members respecting each service user's privacy and dignity. Service users responded positively with staff, both individually and within the group settings. There was extensive evidence to confirm that the centre provides a creative, supportive and compassionate care service to those who attend.

Number of Requirements:	0	Number of Recommendations:	0
--------------------------------	----------	-----------------------------------	----------

5.4 Standard 8: Service Users' Involvement - Service users' views and comments shape the quality of services and facilities provided by the Day Care setting

Is Care Safe?

Staff, who met with the inspector, confirmed that they were confident in the practice of all members of the staff team in working with service users. There were systems in place to ensure that risks to service users were assessed continually and managed appropriately and this included inputs by community based professionals. Three of the four risk assessments examined had been signed by the service user.

Four service users contributed through individual discussions to the inspection process and spoke of their enjoyment of spending time at the centre and of taking part in the various activities. All four confirmed that they felt safe in the centre and in organised activities. Service users and their representatives/carers were regularly informed of their rights and of the methods available to them of raising concerns or making a complaint, should they be unhappy with any aspect of their care. A very small number of service users had raised concerns and these had been addressed in keeping with the Trust's procedures.

Evidence from discussions, observations and in written records indicated that staff actively seek the views of service users, their representatives and community based professionals, regarding the support programmes in which they participate. Staff presented as knowledgeable of the needs of service users and of methods of working with them.

The centre was clean, well decorated and in good repair and service users confirmed that they were provided with a safe environment in which to take part in an interesting range of activities. There was a wide range of evidence to support the view that safe care is provided in Killadeas Day Centre (11231).

Is Care Effective? (Quality of Management)

Killadeas Day Centre and the WHSCT have quality assurance systems in place, through which operations are monitored and staff's practice is evaluated. Staff members' files showed that formal supervision and annual appraisals were taking place regularly. Records of staff training were comprehensive and up to date.

Four service users' files were examined and each was found to contain detailed information on the individual and on his or her functioning and assessed needs. Care plans accurately addressed the identified needs in good detail. A record was kept of each service user's involvement and progress, with individual timetables produced in a clear, easy to read format. Several service users were keen to speak about their experiences of participating in the centre's activities and in their individual care programmes. Two people showed their photographic story books which provided evidence of their participation in a wide variety of interesting activities and events. Records of annual reviews for each person demonstrated that an evaluation of the overall suitability of the placement had been discussed in detail and agreed. Good quality review reports were available in each of the files examined and these provided excellent evidence of the service user's involvement in preparing for the review meeting.

There was written evidence to show that staff members were appropriately qualified and trained for their designated roles. Good records of staff meetings provided evidence of a range of relevant topics having been discussed and actions agreed. The day care worker, in day to day charge of the centre, completes a detailed monthly health check for the centre, which is then scrutinised by the registered manager. Monitoring reports showed that all of the required aspects of the centre's operations were rigorously checked, with action plans introduced to ensure that any shortcomings would be addressed within a specified timescale. This good quality assurance practice is commendable.

Evidence from discussions with service users and from written records confirmed that service users enjoyed activities, both within the centre and on outings. Within the centre there was well supported involvement in a range of activities, including gardening, walking, rhythmic exercising, choir, computer work, cookery/baking, arts and crafts, health and beauty and life books. The manager and staff worked creatively to involve service users in a variety of experiences, making full use of the available rooms and community facilities. Staff make excellent use of photography to help service users keep records of their outings and activities. Overall, there was evidence to indicate that the care provided is effective in terms of promoting each service user's involvement, enjoyment and wellbeing.

Is Care Compassionate? (Quality of Care)

Service users related positively toward staff in the centre and spoke enthusiastically about activities, outings and social events in which they had participated. The centre makes excellent use of photographs to record participation in a wide range of activities and to create both a monthly newsletter for service users and their families and individual photo files for service users, two of whom shared their files with the inspector. Several display boards throughout the premises showed photographs of service users and staff at various events. There was good evidence of positive and purposeful relationships between service users and with staff members, who presented as being committed to ensuring that service users were fully supported throughout their attendance at the centre. In all of the interactions observed, service users were engaged with respect and encouragement. Overall there was evidence to confirm that the centre provides a constructive, creative and compassionate care service to those who attend.

Thanks are due to service users who welcomed the inspector to the centre and to the staff for their open and constructive approach throughout the inspection process.

Number of Requirements:	0	Number of Recommendations:	0
--------------------------------	----------	-----------------------------------	----------

5.4 Additional Areas Examined

Service User Questionnaires

Twelve service users completed questionnaires during the inspection. Eleven respondents stated that they were “Very Satisfied” with every aspect of the care provided, as it was reflected under the three Key Indicators, Safe, Effective and Compassionate Care. One person marked “Satisfied” in response to two of the questions and “Very Satisfied” in the other four.

Staff Questionnaires

Four completed questionnaires were returned by staff members. Responses were very positive, with 92% of the questions eliciting a “Very Satisfied” score and the remainder being marked as “Satisfied”. These positive responses were closely aligned with all other findings in this inspection.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager		Date Completed	
Registered Person		Date Approved	
RQIA Inspector Assessing Response		Date Approved	

Please provide any additional comments or observations you may wish to make below:

Please complete this document in full and return to day.care@rqia.org.uk from the authorised email address