

Unannounced Care Inspection Report

06 October 2016



Clogher Valley Day Centre

Type of service: Day Care Service
Address: 38 Augher Road, Augher, BT76 0AD
Tel no: 028 8554 9320/321
Inspector: Angela Graham

1.0 Summary

An unannounced inspection of Clogher Valley Day Centre took place on 06 October 2016 from 09.25 to 15.35 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 Clogher Valley Day Centre was found to be delivering safe care. There was positive feedback from all service users and a service user's representative spoken with, 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 Clogher Valley Day Centre were observed caring for a range of service users' needs. The staffing levels were responsive to service user's needs, welfare and safety.

No areas for quality improvement relating to safe care were identified during this inspection.

Is care effective?

On the day of the inspection it was assessed that the care in Clogher Valley Day Centre was effective. Observations of staff interactions with service users and discussions with a total of 13 service users and a 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; complaints recording; discussion with the service users, a service user's representative and staff concluded care was being delivered at the right time, in the right place, and with the best outcome.

No areas for quality improvement relating to effective care were identified during this inspection.

Is care compassionate?

On the day of the inspection Clogher Valley Day Centre was found to be delivering compassionate care. Observations of care delivery evidenced that service users were treated with dignity and respect. Staff were observed responding to service users' needs and requests promptly and professionally. Discussion with service users and a service user's representative and observation provided evidence that service users were listened to, valued and communicated with in an appropriate manner.

No areas for quality improvement relating to compassionate care were identified during this inspection.

Is the service well led?

On the day of the inspection there was evidence of effective leadership and management in Clogher Valley 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.

One area for improvement was identified regarding ensuring that the monthly monitoring visits and reports are in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.

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 recommendations made at this inspection	1	0

Details of the Quality Improvement Plan (QIP) within this report were discussed with Martin Stevenson, Registered Manager and Beverly Thompson, Senior Day Care Worker 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.

1.2 Actions/enforcement taken following the most recent care inspection

There were no further actions required to be taken following the most recent care inspection.

2.0 Service details

Registered organisation/registered person: Southern Health and Social Care Trust	Registered manager: Martin Stevenson
Person in charge of the service at the time of inspection: Martin Stevenson	Date manager registered: 07 October 2010

3.0 Methods/processes

Prior to inspection the following records were analysed:

- 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 a volunteer
- Discussion with 13 service users
- Discussion with one service user's representatives
- Examination of records
- File audits
- Evaluation and feedback.

The senior 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. Four service users, five staff and two relatives' 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 record
- Accident/untoward incident record
- 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 staff meetings
- Minutes of service user meetings
- Four monthly monitoring reports.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 24/11/2015

The most recent inspection of the establishment was an announced premises inspection. The completed QIP was returned and approved by the estates inspector. This QIP will be validated by the specialist inspector at the next estates inspection.

4.2 Review of requirements and recommendations from the last care inspection dated 29/09/15

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

4.3 Is care safe?

The registered manager 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 rota for weeks commencing 19 September until 06 October 2016 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.

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 inspection.

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

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

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.

Four 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.

Two relatives returned questionnaires. They confirmed 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
-------------------------------	----------	----------------------------------	----------

4.4 Is care effective?

Discussion with the registered manager 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.

Service users and/or their representatives were encouraged and enabled to be involved in the assessment and 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 registered manager 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 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 healthcare professionals.

Discussion with the registered manager and review of records evidenced that service user meetings and were held bi-monthly. The last meeting was held on 05 September 2016 and minutes were 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.

Four service users' completed questionnaires which 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.

Two relatives completed questionnaires. They confirmed their relative gets the right care, at the right time, in the right place. They were 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 their involvement in their relative's annual review.

Five staff questionnaire 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?

Discussion with service users confirmed management and staff listen to them, offer them choices and involve them in decision making during their time in the day care setting.

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. Staff interactions with service users were observed to be compassionate, caring and timely.

Staff were aware of each service user's individual needs and were observed responding positively and warmly. During discussion staff presented as knowledgeable and informed regarding each service user's needs.

Discussions with service users along with observations of practice during this inspection confirmed that service users were enabled and supported to engage and participate in meaningful activities.

The registered manager confirmed that service users were listened to, valued and communicated with, in an appropriate manner. Observation of practice confirmed that service users' needs were recognised and responded to in a prompt, courteous and supportive manner by staff.

There were systems in place to ensure that the views and opinions of service users were sought and taken into account in all matters affecting them.

Service users are consulted in an informal daily basis via discussions with staff. Service users are consulted on a formal basis via service users' meetings; the annual review of their day care placement and they receive an annual quality assurance survey about the quality of the day service in Clogher Valley Day Centre. The registered manager confirmed the findings from the annual survey had been collated into an evaluation/summary report.

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 really enjoy coming here. Staff are like family to me."
- "I am offered choice of meals and what activities I take part in."
- "This is a great day centre and is a life line for me."
- "Care could not be better here. Staff are respectful, kind and at all times helpful."
- "You get a warm welcome from staff every day you come here."
- "In my opinion this is an excellent day centre. I have no suggestions for improvement."
- "Staff could not be better. If I had any issues I would be comfortable talking to the manager or any of the staff."
- "I am very fortunate to be able to come here. The centre provides me with great support and friendship."
- "I enjoy all the activities we do here. We have crafts this afternoon. A lady comes into the day centre from the college and we have made a variety of different things."

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 very well looked after in the centre."
- "All staff are kind and considerate."
- "Excellent service."

Consultation with service users regarding compassionate care and service users' questionnaires identified 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.

Two relative's completed questionnaires. They confirmed that their relative was treated with dignity and respect and involved in decisions affecting their care. They identified they do not have any concerns and their relative is treated well. One relative recorded additional comments which included "I do know my wife is treated with the best care possible. She is so happy in their care."

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 registered manager 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.

In discussion service users were aware of the roles of the staff in the day care setting and whom they should speak to if they had a concern. Service users confirmed that they were confident that staff/management would manage any concern raised by them appropriately.

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 registered manager 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 registered manager confirmed that staff meetings were held generally quarterly, and records verified this. The last meeting was held on 26 July 2016 and minutes were available. Previous staff meetings had been undertaken on 27 April 2016 and 20 January 2016. The registered manager confirmed that the minutes of staff meetings were made available for staff to consult.

The complaints record was reviewed. No complaints were recorded since the previous inspection on 29 September 2015.

The monthly monitoring reports were reviewed from June to September 2016. The reports evidenced visits had taken place on 08 June, 15 August and 05 September 2016. A visit had not been undertaken in July 2016. However the monitoring officer had contacted the service via telephone on 27 July to complete the monthly monitoring report template. The report of the 27 July did not detail the matters to be monitored by the registered person as described under Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007 including obtaining and recording the views of service users, service users' representatives and staff and an inspection of the premises. The monitoring report of 08 June did not include the views of service users or service users' representatives; the monitoring report of 15 August did not

include the views of staff or service users' representatives and included the view of one service user and the monitoring report of 05 September 2016 did not include the views of service users, service users' representatives or staff. A requirement has been made to address these issues.

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

Four 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.

Two relative's questionnaires confirmed the service was managed well; staff and the manager were approachable, professional and caring. They also confirmed they had received a copy of the service user's guide.

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

One area of improvement has been identified during the inspection regarding "is care well led".

The registered person must ensure the monthly monitoring visits and reports are improved in compliance with Regulation 28, specifically:

- Visits must be carried out at least monthly and a report must be written for the visit(s) carried out that month
- Interview with their consent and in private, such of the service users and their representatives and persons employed in the day care setting as appears necessary in order to form an opinion of the standard of care provided in the day care setting
- Inspect the premises of the day care setting, its record of events and records of any complaints.

Number of requirements	1	Number of recommendations	0
-------------------------------	----------	----------------------------------	----------

5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Martin Stevenson, Registered Manager and Beverly Thompson, Senior Day Care Worker, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all requirements and recommendations contained 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 service. 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.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on The Day Care Setting Regulations (Northern Ireland) 2007.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Day Care Settings Minimum Standards 2012. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions to be taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to day.care@rqia.org.uk for assessment by the inspector.

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. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Statutory requirements

Requirement 1

Ref: Regulation 28

Stated: First time

To be completed by:
30 November 2016

The registered person must ensure the monthly monitoring visits and reports are improved in compliance with this Regulation, specifically:

- Visits must be carried out at least monthly and a report must be written for the visit(s) carried out that month
- Interview with their consent and in private, such of the service users and their representatives and persons employed in the day care setting as appears necessary in order to form an opinion of the standard of care provided in the day care setting
- Inspect the premises of the day care setting, its record of events and records of any complaints.

Response by registered provider detailing the actions taken:

The registered manager has spoken in relation to peer provider inspection visits as an agenda item at the locality managers meeting held on 23/11/16 to raise awareness of regulation requirements with peer inspection visits they have spoken with the peer inspector who has adjusted their inspection focus to ensure service user interviews and staff interviews are part of an overall inspection this has been evident in the last two inspection visits.

Please ensure this document is completed in full and returned to day.care@rqia.org.uk from the authorised email address



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