

Unannounced Care Inspection Report 20 September 2018



Clogher Valley Day Centre

Type of Service: Day Care Setting
Address: 38 Augher Road, Clogher, BT76 0AD
Tel No: 028 85549320/321
Inspector: Angela Graham

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service 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 is registered to provide care and day time activities for up to 22 service users for older people over the age of 65, who may be frail, have dementia or have mental health needs, a learning disability or living with a physical disability. The day care setting is open Monday to Thursday and is managed by the Southern Health and Social Care Trust (SHSCT).

3.0 Service details

Organisation/Registered Provider: Southern Health and Social Care Trust Responsible Individual: Shane Devlin	Registered Manager: Martin Stevenson
Person in charge at the time of inspection: Beverly Thompson, Senior Day Care Worker	Date manager registered: 07/10/2010
Number of registered places: 22	

4.0 Inspection summary

An unannounced inspection took place on 20 September 2018 from 09.40 to 16.10.

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 last 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 and risk management that promoted safe care. Regarding effective practice, examples of good practice were found in relation to individualised care planning, audits and 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 and respecting service users and taking account of the views of service users. Finally, good practice was found in relation to governance arrangements and quality improvement supporting well led care in the setting.

One area requiring improvement was identified as outlined in the quality improvement plan (QIP). Please refer to section 7.0.

Service users were asked to provide their views regarding the day care setting. Examples of some of the comments made by service users are “this place is the best you’ll get”, “staff are always pleasant and happy to help”, “I’m looking forward to the crafts class this afternoon, we have a tutor that comes in from the college to take the class”, “I’m safe here and cared for extremely well”, “the dinners are great and you always get a choice” and “the centre is an important part of my life”.

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	1

Details of the Quality Improvement Plan (QIP) were discussed with Beverly Thompson, Senior Day Care Worker, as part of the inspection process. The timescales for completion commence from the date of inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 1 August 2017

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 1 August 2017.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

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

During the inspection, the inspector met with the senior day care worker, three support workers, two ancillary staff, eleven service users, two service user's representatives and a visiting professional. The senior 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. Two relatives and six service users' questionnaires were returned to RQIA. The content of the questionnaires is discussed in the main body of the report.

A poster was provided for display to inform staff how they may comment and share their views on the service with RQIA via electronic survey monkey or by use of mobile telephone scan code. No responses were received within the timescale requested.

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 records

- sample of policies and procedures
- sample of activity records
- sample of quality assurance audits
- fire safety risk assessment
- fire drill records
- staff training information
- minutes of three staff meetings
- minutes of three service user meetings
- six monthly monitoring reports.

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

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

The inspector would like to thank the senior day care worker, service users, relatives, visiting professional and staff for their support and co-operation throughout the inspection process.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 1 August 2017

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

The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 1 August 2017

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 Stated: Second time	The registered person must ensure the monthly monitoring visits and reports are improved in compliance with this Regulation, specifically: <ul style="list-style-type: none"> • 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 	Met

	<p>the day care setting as appears necessary in order to form an opinion of the standard of care provided in the day care setting</p> <ul style="list-style-type: none"> Inspect the premises of the day care setting, its record of events and records of any complaints. 	
	<p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the senior day care worker confirmed that this area for improvement had been addressed. Monthly monitoring reports from March 2018 to August 2018 were made available to the inspector. Review evidenced that monitoring visits had been undertaken in line with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.</p>	

6.3 Inspection findings

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.

The senior 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 20 August 2018 until 20 September 2018 evidenced that the planned staffing levels were adhered to.

Staff who were consulted confirmed that staffing levels met the assessed needs of the service users. Observation of the delivery of care at the time of inspection evidenced that service users' needs were met by the number of staff on duty.

The senior day care worker confirmed that staff employment records were held within the SHSCT human resources department and that all appointments were made in compliance with relevant legislative requirements and trust policy and procedures. The senior 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.

A competency and capability assessment had been completed for the staff member who was in charge of the centre in the absence of the registered manager. Review of the competency and capability assessment confirmed that the staff member had received training and was

assessed as competent to undertake their role and responsibilities. Discussions with the senior day care worker confirmed that they were aware of the day care setting regulations and standards which they had used to guide practice.

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 and stated that it provided them with the skills and knowledge to fulfil their roles and responsibilities. Discussion with staff and review of a sample of staff training records concluded staff had received mandatory since the previous care inspection such as fire safety, 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: visual awareness; information governance and reminiscence.

Safeguarding procedures were understood by staff members who were interviewed and they 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.

Discussion with the senior day care worker confirmed that there was a clear pathway for staff to follow in relation to referring any safeguarding concerns to appropriate professionals. The senior day care worker also confirmed that a copy of Adult Safeguarding Prevention and Protection in Partnership, July 2015 and the associated Operational Procedures September 2016 were available to all staff. The senior day care worker confirmed that the organisation has in place an identified Adult Safeguarding Champion (ASC).

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; emergency lighting and weekly fire alarm tests. The review of fire drill records confirmed that a fire drill had been undertaken on 16 May 2018. Discussion with staff confirmed they were aware of the evacuation procedure. The discussion with the senior day care worker confirmed that the furniture, aids and appliances were fit for purpose for the diverse needs of service users.

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 sanitiser 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 and records were maintained of regular checks and cleaning of bathrooms and equipment. 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. Staff described how they give consideration to service users' holistic needs, for instance, they observe service users, noting any change in dependency, ability or behaviour and proactively take appropriate measures to promote and ensure the safety and wellbeing of the service user. Staff also

demonstrated awareness of the need to continually risk assess to ensure that service users remain safe during outings or while engaging in activities within the setting. They recognised the importance of sharing relevant information with relatives and making referrals to other services/professionals as required. Staff commented on the good working relationships which exist with community support services and how they can access such support for service users. In addition staff had received training in first aid and fire safety.

There were arrangements in place to ensure that staff are registered with the relevant regulatory bodies of the Northern Ireland Social Care Council (NISCC) or the Nursing and Midwifery Council (NMC) as appropriate.

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:

- "I am safe in the centre thanks to the staff".
- "Staff have told us what to do if the fire alarm goes off."

Staff comments:

- "We have detailed risk assessments in place to ensure the service users' safety."
- "I have attended lots of training around safety such a fire safety and COSHH."

Six service users returned questionnaires to RQIA post inspection. The service users confirmed they were "very satisfied" regarding questions on "is care safe" in this setting. The service users 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.

Two relatives returned questionnaires to RQIA post inspection. The relatives confirmed that they were "very satisfied" with the safe care in this setting. They confirmed that their relative is safe and protected from harm, they could talk to staff, and the environment is suitable to meet their relative's needs. Discussion with two relatives also confirmed that they were "very satisfied" with the safe care in Clogher Valley Day Centre. Additional comments made by relatives included "this is a great service; I feel the care is very safe in the centre" and "staff are diligent".

A visiting professional described staff in the setting as vigilant. The visiting professional confirmed staff work well between encouraging independence and caring, and was satisfied risk assessments were being used to avoid unnecessary risks and manage risk.

On the day of the inspection Clogher Valley Day Centre was found to be delivering safe care. There was positive feedback from eleven service users, two service users' representatives and a visiting professional 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 and risk management.

Areas for improvement

No areas for improvement were identified 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 senior 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 files found there were risk assessments, care plans and records of health and well-being of the service users which were current and had been reviewed. These files contained a falls risk assessment. These assessments had not been signed by the person completing the assessment nor dated on completion. This does not comply with minimum standard 4.3 and is an identified area for improvement.

Staff discussion confirmed they use these records to guide their practice and therefore recognised the importance of keeping records current and relevant. Overall the inspection found the settings management of service user records enabled staff to recognise service users' needs and respond to them effectively.

Care records also reflected the multi-professional input into the service users' health and social care needs. 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. Records of annual reviews for each person demonstrated that an evaluation of the overall suitability of the placement had been discussed and agreed.

Discussions with staff regarding implementation of the care plans provided assurance they knew each individual's needs. Discussion with service users about what they were doing in the centre provided assurances they knew what activity they were going to take part in, who would help them and they were happy that their choices and needs were being met in Clogher Valley Day Centre.

Discussion with the senior 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.

Staff confidently described how they would escalate any concerns and provided examples of liaison with carers and other professionals to ensure the safety and wellbeing of service users.

There was evidence that service users were enabled and supported to engage and participate in a range of meaningful activities. Service users were observed being supported in an arts and crafts class on the afternoon of the inspection. Craft work which had previously been made was displayed around the centre and several service users enthusiastically engaged in conversation with the inspector describing their involvement in and enjoyment of the craft work. Service users gave positive feedback regarding the activities and opportunities the day centre provided for them.

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 users regarding their right to advocacy support and the role of the patient client council.

The senior 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.

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.

Discussions with staff confirmed they were knowledgeable regarding safeguarding service users in their care, they also confirmed if they had to escalate concerns they would speak to the manager or senior day care worker in charge. Staff detailed the communication methods that support their work and professional development such as team meetings, supervision, training and informal team discussions. Overall it was clear the staff work together to support the service users in the most person centred way that is safe, effective and meets their needs within an open and transparent culture.

Discussion with the senior day care worker 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 and each staff member knew their role, function and responsibilities.

Observation of practices evidenced that staff were able to communicate effectively with service users.

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:

- "I am very well looked after here; I want for nothing."
- "My social worker visits me in the centre and we talk about how I'm looked after here."
- "I enjoy all the activities; I particularly enjoy the craft classes."
- "I get a cup of tea when I arrive and the dinner is lovely; you get a choice of dinner every day."

Staff comments:

- "We have a daily handover meeting and discuss the care and any changes regarding the ladies and gentlemen."
- "The service users' needs always come first."

Six service users returned questionnaires to RQIA post inspection. The service users confirmed they were "very satisfied" regarding questions on "is care effective" in this setting. The service users 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.

Two relatives returned questionnaires to RQIA post inspection. The relatives confirmed that they were "very satisfied" with the effective care. They stated that their relative receives the right care, at the right time, in the right place. Discussion with two relatives also confirmed that they were "very satisfied" with the effective care. Additional comments made by relatives included "the day centre meets all my mother's needs and the staff go above and beyond their duty to ensure she is well looked after", "staff are all excellent" and "Clogher Day Centre is like a first class hotel".

The evidence indicates that the care provided in Clogher Valley 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 individualised care planning, audits, reviews and communication between service users, staff and other key stakeholders.

Areas for improvement

One area for improvement was identified regarding the completion of falls risk assessments.

	Regulations	Standards
Total number of areas for improvement	0	1

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.

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. 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 service users 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.

Observations of service users taking part in the arts and crafts session on the day of inspection showed participation was enthusiastic; staff assessed the need to support the service users and offered choice during the activity to enable them to be fully involved.

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 reminiscence, armchair exercises, craft classes, music sessions and games.

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.

During discussion staff presented as knowledgeable and informed regarding each service user's dietary needs and preferences. All service users spoken with confirmed that they were satisfied with the choice of meals served and that individual preferences were catered for if requested.

Discussion with the senior day care worker and review of records evidenced that service user meetings were generally held quarterly. The last meeting was held in September 2018 and minutes were made available. The inspector noted some of the areas recently discussed during meetings included health awareness, activities and visitors to the centre.

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 are the best you’ll find; always friendly and kind.”
- “I feel I could talk to the staff if something was bothering me; I have done in the past.”

Staff comments:

- “We encourage the service users to let us know how they would like to spend their day in the centre.”
- “We provide a very good standard of care.”

Six service users returned questionnaires to RQIA post inspection. The service users confirmed that they were “very satisfied” regarding questions on “is care compassionate” in this setting. The service users 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.

Two relatives returned questionnaires to RQIA post inspection. The relatives confirmed that they were “very satisfied” regarding questions on “is care compassionate” in this setting. Discussion with two relatives also confirmed that they were “very satisfied” with the compassionate care in Clogher Valley Day Centre. Additional comments made by relatives included “staff are very kind and helpful; they went out of their way to support my mother and I during a very difficult time” and “staff are always friendly”.

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 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. Staff demonstrated awareness of their roles, responsibilities and accountability. Discussion with the registered manager confirmed that they had a good understanding of their role and responsibilities under the legislation.

The senior 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 in the office. The inspector reviewed a sample of policies and procedures and they were noted to have been updated in accordance with timescales outlined in the minimum standards.

During discussions with staff they demonstrated awareness of their roles, responsibilities and accountability. Positive feedback was provided by staff in respect of leadership they received from the senior day care workers and 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 discussed they were aware of the whistleblowing policy if they could not resolve their concerns locally, however they would be unlikely to need this due to the transparent working relationships that exist within the 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 staff who met with the inspector appeared well informed on all aspects of the centre's operations and proved very capable in responding to all of the RQIA requirements for this inspection.

A review of governance records evidenced that staff received individual, formal supervision at least quarterly and an annual appraisal. Staff confirmed that there were systems in place to ensure they received support and guidance from the senior day care workers and the registered manager.

Discussion with the senior day care worker confirmed that staff meetings were held at least quarterly, and records verified this. The last meeting was held on 18 September 2018 and minutes were available. Previous staff meetings had been undertaken on 31 May and 8 February 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. The senior 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. There had been no complaints recorded since the previous inspection however, discussion with the staff confirmed they were aware of how they should respond to a complaint or area of dissatisfaction. Samples of compliments were available for review and evidenced a high level of satisfaction with the service provided. Discussion with service users confirmed they would speak to the staff or the manager or senior day care workers if they were dissatisfied or were concerned about their day care experience.

Discussions with staff confirmed that a robust complaints management process is in place within the setting. Service users are advised of what they can do if they are not happy with the service within the Service User Guide and the Statement of Purpose.

The inspector discussed the monitoring arrangements under regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. The Regulation 28 monthly quality monitoring visits had been undertaken bimonthly by an independent monitoring officer. Three quality monitoring reports were examined from March 2018 to August 2018 and found to be

satisfactory. The reports adhered to RQIA guidelines and evidenced engagement with service users, staff and professionals, with positive feedback recorded.

There were systems 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 senior day care worker confirmed that this was addressed with staff through their training, supervision and appraisal process. In addition the senior 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 senior day care worker 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:

- "This place is well run; all the staff are great."
- "I know all the staff here and the staff know me."

Staff comments:

- "Great team work and communication."
- "If I had any issues I could speak to the seniors or the manager at any time and I would be comfortable in doing this."

Six service users returned questionnaires to RQIA post inspection. The service users 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.

Two relatives returned questionnaires to RQIA post inspection. The relatives confirmed that they were "very satisfied" regarding questions on "is care well led/managed" in this setting. The relative confirmed that the service was managed well and they knew how to make a complaint. Discussion with two relatives also confirmed that they were "very satisfied" that the care is well led/managed. Additional comments made by relatives included "the centre is very well run and

staff are very approachable” and “I have no suggestions to improve the centre, it is a great place for my mother to come”.

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.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance arrangements and quality improvement.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with 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 if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the day care setting. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012

Area for improvement 1 Ref: Standard 4.3 Stated: First time	The registered provider should ensure that falls risk assessments are updated, as necessary, signed and dated by the service user, the member of staff responsible for its review. Ref: 6.5
To be completed by: 31 October 2018	Response by registered person detailing the actions taken: The registered manager will update the falls risk assessment when required. The falls risk assessment there will be an amendment to ensure the form is signed and dated. Signatures from the staff and service user will be evident in future this will be implemented from 18-10-18 .

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



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