



The Regulation and
Quality Improvement
Authority

Keady Day Centre
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Annvale Road
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**Unannounced Care Inspection
of
Keady Day Centre**

19 August 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An unannounced care inspection took place on 19 August 2015 from 10.40 to 14.50. 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	1

The details of the QIP within this report were discussed with Mrs Oonagh McCreesh and Mr Martin O'Neill, Senior Day Care Workers, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Southern HSC Trust/Paula Mary Clarke	Registered Manager: Martin Stevenson
Person in Charge of the Day Care Setting at the Time of Inspection: Mrs Oonagh McCreesh	Date Manager Registered: 7 October 2010
Number of Service Users Accommodated on Day of Inspection: 18	Number of Registered Places: 25

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:

- the previous care inspection report and returned Quality Improvement Plan (QIP)
- notifiable events submitted since the previous care inspection
- written and verbal communication received since the previous care inspection

At the commencement of the inspection, a poster was displayed in the centre informing service users and their representatives that an inspection was taking place and inviting them to speak to the inspector and provide their views of the service.

The inspector met with eighteen service users attending the centre in groups and three service users spoke with the inspector individually.

The registered manager was on annual leave on the day of the unannounced inspection. In the absence of the registered manager, management arrangements are shared between two senior day care workers (band 5) who take charge of the centre two days each week. Throughout the inspection, both senior staff were on duty and as reflected in the staff duty rota one was nominated as in charge.

Four staff on duty met with the inspector individually and discussed the standards being inspected.

The following records were examined during the inspection:

- the statement of purpose
- the service user guide
- complaint records
- compliment records
- monthly monitoring reports
- selected policies and procedures relevant to standard 5 and 8
- minutes of meetings of the service user group
- file records for two service users
- staff duty rotas
- staff training records
- a sample of staff competency and capability assessments
- staff supervisory history.

Care delivery and care practices were observed during periods throughout the inspection and a review of the general environment of the day service was also undertaken.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an unannounced care inspection dated 22 September 2014. The completed QIP was returned and approved by the care inspector.

Three requirements were made and details of the actions taken are recorded below.

5.2 Review of Requirements and Recommendations from the Last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 7.2	The registered manager should ensure that information on how service users can access their care records is included in the service users' guide.	Met
	Action taken as confirmed during the inspection: The inspector confirmed that section 9 of the service user guide had been reviewed and updated on 8 October 2014 to reflect the stated requirement. In addition minutes of a service user meeting held on 15 April 2015 indicated that the revised service user guide was read to service users and discussed.	
Requirement 2 Ref: Regulation 17.1	The day the registered manager is based in the centre should be detailed in the statement of purpose.	Met
	Action taken as confirmed during the inspection: The inspector reviewed the updated statement of purpose which recorded that the registered manager was based in Keady Day Centre, Tuesday and Wednesday of each working week.	
Requirement 3 Ref: Regulation 21.3	The registered manager should confirm that all mandatory training is up to date.	Met
	Action taken as confirmed during the inspection: A sample of staff training records reviewed during inspection and individual discussions with four staff verified that mandatory training for staff was up to date.	

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

Is Care Safe?

An evidenced based continence policy which had recently been reviewed was presented during the inspection. In addition there was a range of associated guidance relevant to continence management. The policy promotes dignity of each individual and identifies individual assessment and care planning regarding continence is necessary. The guidance provides detailed information for managing toilet problems and incontinence.

The staff consulted confirmed that a district nurse from the trust had recently provided an awareness training session to staff on continence issues. The list of attendees confirmed that 6 staff from Keady Day Centre attended the training. The content of the training programme was not available during the inspection, and was identified as an area for improvement. Training information submitted to RQIA on 24 August 2015 (post inspection) was found to be satisfactory.

Discussion with staff confirmed that the majority of service users attending the centre use the toilet independently. A few service users have had a continence assessment and bring their own continence products to the centre. A small number of service users require staff assistance to assist them with their toileting needs and specific details of the assistance required was recorded in individual care and support plans.

Review of two service user individual records confirmed that the needs assessment, risk assessments and care plans are kept under continual review, amended as changes occur and kept up to date to accurately reflect at all times the needs and preferences of the service user and the needs assessment. The care plans had been appropriately signed; and care plans included information regarding continence. To ensure privacy and confidentiality of information for service users, unique identification should be recorded in care records. This was identified as an area for improvement.

Four staff consulted individually had a clear understanding of each service user's continence care needs. They were aware that each service user had their own individual plan for continence management which was detailed in their individual care record. Discussion with four staff and five returned questionnaire responses verified staff satisfaction regarding access to personal protective equipment for infection control purposes such as gloves and aprons.

Service users consulted confirmed that in all aspects of their care, they found staff to be approachable, supportive and respectful when providing assistance and there were no concerns raised.

There was good evidence to confirm that generally continence care and promotion was safe.

Is Care Effective?

Two service users' care records were examined during this inspection with the main focus on the management of continence care.

Continence assessments and risk assessments were completed by staff, culminating in an individual goal based care plan being devised for each service user.

Assessments reviewed were effectively recorded. Care plans recorded for personal care included information on continence management which was specific and person centred. There was evidence to confirm that service users and or their representatives' work together with staff when planning care.

Staff consulted discussed the continence needs of specific individual service users, including the use of products for management of continence, skin care, the promotion of infection prevention and control, and promoting service user dignity when assisting and supporting service users during continence care.

Audit processes for the management of care records were in place and outcomes are discussed with staff during supervision. In addition the nominated monitoring officer representing the responsible individual for the service samples and monitors care records during monthly visits to the centre.

Overall the two care records sampled were well recorded and review care plans examined verified that they were regularly reviewed to ensure care plan objectives remain relevant and accurate.

Discussion with four staff individually and a review of staff training records confirmed that six staff who worked in Keady Day Centre had recently attended training on continence management.

An inspection of the environment confirmed that clean, suitably maintained odour free toilet facilities were available. Personal Protective Equipment (PPE) was also available for staff use.

Service users with memory problems attend the day centre and visible prompts are available to assist service users to identify where the toilet is.

Overall there was evidence to confirm that an effective service was delivered.

Is Care Compassionate?

Staff interaction with service users presented evidence of a high level of compassionate care being delivered throughout the inspection period. Discreet observations of care practices confirmed that service users were treated respectfully and their right to privacy supported.

Questionnaires were also completed and returned to the inspector by four service users and five staff.

Completed staff RQIA questionnaires stated they were either very satisfied or satisfied with:

- the training received by the organisation in core values
- communication methods
- mental health including dementia
- continence management

- access to continence products
- personal protective equipment (PPE)
- how to assist and support a service user with their personal care needs

There were no areas of concern identified within the staff questionnaires reviewed.

Many of the service users discussed their experience of attending the day centre, confirming they were satisfied with all aspects of the service.

Comments made by service users included:

- “I enjoy coming here twice each week, and I have been coming for one and half years”.
- “It’s a wonderful place”
- “If there wasn’t Keady - where would we go?”
- “I am very satisfied with all aspects of this wonderful service”
- “There is not a thing I could complain about”

There was good evidence to confirm that a compassionate service was delivered.

Areas for Improvement

Two areas for improvement were identified. One was in regard to the availability of a staff training programme for continence training being available in the centre.

RQIA received training information post inspection confirming that an awareness training session provided to staff covered the urinary system: how to keep the bladder healthy, types of urinary incontinence, symptoms of urinary tract infections and managing specific incontinence problems. A recommendation was not made on this occasion.

Care records should include unique identification to ensure privacy and confidentiality of information for service users. A recommendation was made.

Number of Requirements:	0	Number of Recommendations:	1
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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?

There was good evidence that the service promotes service user involvement and empowerment. A range of effective trust corporate policies and procedures were in place.

Examples include arrangements for consultation with service users encouraging them to have a say in the operation of Keady Day Centre.

The culture in the centre also supports the wellbeing of service users, enabling them to feel valued and promoting and supporting their engagement and participation in the running of the service. Some of the service users who took part in group discussions confirmed that they were involved in discussions about what took place in the centre.

There was evidence of regular service user meetings with minutes of meetings being retained and available for inspection. Confirmation was provided that minutes of meetings were circulated and displayed on a noticeboard in the day centre.

A service user meeting was scheduled to be held on the day of inspection. At the commencement of the meeting, the chairperson sought permission from service users to permit the inspector to remain in attendance during part of the meeting, and this was approved.

All service users were invited to attend the meeting which was held in the lounge, and the majority chose to attend. A staff member chaired the meeting whilst another member of staff recorded the minutes. The purpose of the meeting was explained by the chairperson and service user comments regarding proposed activities and entertainment events to be held in the centre were invited and discussed. The staff member chairing the meeting ensured all service users' views were considered.

There was evidence from discussions held with service users, the staff team and in records examined, that the registered manager and staff team presented as being committed to ensuring that safe, effective and compassionate care is always delivered.

In accordance with the trust public participation and involvement strategy, an appointed officer from the trust had carried out an independent review with service users on the quality of services provided in the centre. The outcome indicated that service users were positive in their comments about the services provided by the centre.

A system to record complaints was in place and records were maintained of any complaints or expressions of dissatisfaction received together with details of the actions taken.

Whistleblowing policies were also available and training records examined confirmed that these were included in corporate induction training provided to staff.

The registered manager covers more than one day centre service within the Trust and as reflected on the staff duty rota was on annual leave on the day of inspection. In the absence of the registered manager the centre is managed by two senior day care workers (band 5) each with allocated days for being in charge of the centre. Both senior day care workers were on duty on the day of inspection.

Staff consulted confirmed that the registered manager visited the centre frequently and advised that good support was provided.

All comments received from service users were very positive and no negative comments were received during this inspection.

Is Care Effective

Examples of opportunities which encourage service users' involvement include:

- participation in day care events
- participation in service user groups
- service user participation in questionnaires

- service user meetings.

Records indicated that service users enjoyed fulfilling and rewarding activities, both within the centre and during social events which were arranged.

On arrival to the centre, service users are offered a beverage and snack. During the morning period, all service users attended a chair exercise class led by a staff member and afterwards all took part in a game of bingo. There was good participation by all service users during both activities.

As previously stated a service user meeting was held during the afternoon and several service users also discussed the bus trip to Gosford Park they had enjoyed the day previously.

It was evident from the discussions held with service users they enjoyed these activities.

As part of the centre's admission procedures, a potential service user visited the centre with a family member on the morning of inspection, and was shown around the centre by staff, remaining in attendance and taking part in the morning exercise class.

The service users consulted spoke positively about the service, the facilities and their opportunities for involvement and their ability to exercise choice.

Comments made by service users included:

- "Staff involve us in everything and I feel I can always voice my views"
- "There is great friendship here"
- "This centre has been a great lifeline for me"
- "I know the staff well, they are great"

The two care records reviewed reflected that annual multidisciplinary reviews are held which service users, carers and representatives are invited to attend.

A copy of the annual quality review report for 2014-2015 was in the process of being compiled at the time of inspection. The registered provider annual monitoring report was completed by the day care services manager for the period April 2014 to March 2015 and submitted to RQIA on 3 September 2015.

The report covered areas such as, administration, health and safety, environment, staffing, budget, service users, staff training, visits and additional comments.

The centre demonstrated robust and effective processes in ensuring that there is regular and consistent engagement with service users.

Is Care Compassionate?

Staff interaction with service users was discreetly observed throughout the inspection period. Examples of supportive appropriate language and encouraging tones of voice were observed, as well as good examples of service users being treated with dignity and respect.

Written records reviewed also provided good evidence of the provision of services in a professional and compassionate manner.

Discussions with 18 service users who were attending the centre on the day of inspection concluded that they are treated well and with respect by the registered manager and staff.

Four service users returned completed questionnaires confirming they were fully satisfied with all aspects of the service.

There were no other issues or concerns raised by service users during this inspection.

Assurances were provided that the quality of care provision in Keady Day Centre was safe, effective and compassionate.

Areas for Improvement

There were no areas for improvement identified in respect of this standard.

Number of Requirements:	0	Number of Recommendations:	0
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5.5 Additional Areas Examined

5.5.1 Accidents and Incidents

A review of records of accident and incident which had occurred at the centre had been completed appropriately. Discussions were held regarding notifications received by RQIA since the previous care inspection. Assurances were provided that all had been effectively addressed.

Accidents and incidents which occur in the centre were also reviewed during monthly monitoring visits by the monitoring officer representing the responsible individual.

5.5.2 Complaints

A review of the complaints records and a requested summary of complaints submitted indicated that the service had no complaints recorded from 1 January 2014 to 31 March 2015.

5.5.3 Staff Views

Four staff were consulted during the inspection. Discussions focused on the quality of care provision, continence promotion and support and service user involvement. Staff spoke positively about their roles and duties, staff morale, teamwork and managerial support. Staff informed the inspector they felt a good quality of day service is provided to service users. No concerns were expressed during these discussions.

Five staff also completed and returned questionnaires. The responses concluded staff were very satisfied or satisfied that the quality of care provision in Keady Day Centre was safe, effective and compassionate. There were no further comments recorded.

6. Quality Improvement Plan

The issue identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Oonagh McCreesh and Mr Martin O'Neill, senior day care workers, as part of the inspection process. The timescales commence from the date of inspection.

The registered person/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 person/manager 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Day Care Settings Regulations (Northern Ireland) 2007.

6.2 Recommendations

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

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/ registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to day.care@rqia.org.uk and assessed by the inspector.

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. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the service.

Quality Improvement Plan

Recommendations

<p>Recommendation 1</p> <p>Ref: Standard 7</p> <p>Stated: First time</p> <p>To be Completed by: 30 September 2015</p>	<p>The registered persons should implement a system of unique identification to ensure privacy and confidentiality of service users' personal information.</p> <p>Ref 5.3</p>		
	<p>Response by Registered Person(s) Detailing the Actions Taken: To ensure privacy, and confidentiality, internal day centre service user information, a unique identification will be allocated to each individual service user who attends the day centre. And used in communication recording, within the centre records.</p>		
Registered Manager Completing QIP	Martin Stevenson	Date Completed	28/09/2015
Registered Person Approving QIP	Mrs Angela McVeigh	Date Approved	28/09/2015
RQIA Inspector Assessing Response	Maire Marley	Date Approved	29/09/15

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