

The Regulation and
Quality Improvement
Authority

Killadeas Day Centre
RQIA ID: 11247
Lackaboy Unit 1
Units 14 – 17
Enniskillen Business Centre
Tempo Road
Enniskillen
BT74 4RL

Inspector: Dermott Knox
Inspection ID: IN023782

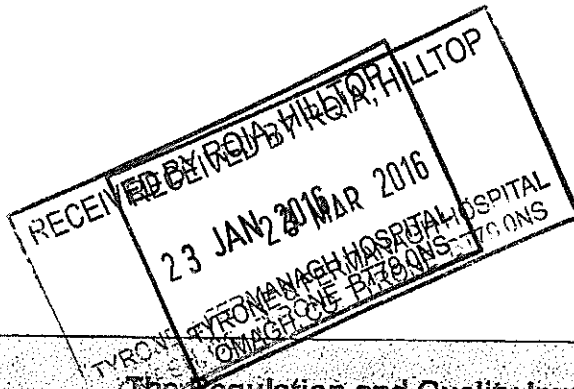
Tel: 028 6632 0031

Email:

patricia.griffith@westerntrust.hscni.net

Unannounced Care Inspection
of
Killadeas Day Centre (11247)

23 February 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 23 February 2016 from 11.00 to 17.00. 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 HSC Trust Ms Elaine Way CBE	Registered Manager: Patricia Griffith
Person in Charge of the Day Care Setting at the Time of Inspection: Ms Pauline Corrigan, Senior Day Care Worker	Date Manager Registered: 21 June 2013
Number of Service Users Accommodated on Day of Inspection: 18	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:

During the inspection the inspector met with:

- Twelve service users in their group settings
- Three service users individually
- The senior day care worker in charge of the centre
- The registered manager, during and at the conclusion of the inspection
- One member of care staff and one student nurse for individual discussions

The following records were examined during the inspection:

- File records for five service users, including care plans and review reports
- Progress notes for five service users
- Five monitoring reports for selected months in 2015
- Records of incidents and accidents,
- Records of complaints and compliments
- The statement of purpose
- Minutes of three Members' Council meetings
- Minutes of two staff meetings
- Training records for two staff

- Supervision and appraisal records for two staff
- The Statement of Purpose
- The Service User Guide, including a pictorial version
- Three editions of the monthly newsletter, mostly in pictorial form

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 31 March 2015. The completed QIP was returned and approved by the specialist inspector.

5.2 Review of Requirements and Recommendations from the last Care Inspection

Previous Inspection Statutory Requirements	Validation of Compliance
No requirements were made at the last care inspection	

Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 15.5	<u>Unmet need</u> One service user who raised a concern in regard to the long delay (approx. 40 weeks) before a suitable wheelchair for outside use could be provided. This means he cannot go outside of the centre when all his peers can do so. It was recommended that the manager escalates this unmet need to senior management and a care management review called to address this matter.	Met
	Action taken as confirmed during the inspection: This matter had been pursued by the day care service management and while the existing waiting list for adapted wheelchairs meant there was a significant delay, the service user's wheelchair was reported to be almost ready for delivery, with fittings having been completed.	

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 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. Records for service users provided evidence of personal care needs, including continence care, having been identified for a number of those who attend the centre. Staff members confirmed that they were appropriately trained for personal care work, confident in providing good quality personal care and in respecting each service user's privacy and dignity. Review records for five service users showed that care matters had been addressed to the satisfaction of the service user, a relative and/or a relevant professional.

The toilet and personal care facilities were considered by staff members to be satisfactory for current service users, several of whom have complex care needs. Several service users were keen to speak about their experiences of participating in the centre's activities and in their individual care programmes. There were unanimous expressions of confidence in the staff who supported them and all contributors felt that they enjoyed their attendance at the centre. There was good evidence in records of incidents, accidents, complaints and staff meetings to show that safety and safeguarding were pursued meticulously 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 number of the service users had assessed needs with regard to continence promotion and care and the objectives and working methods related to these needs were clearly set out in each of the care plans inspected. Assessed needs had been accurately translated into care plan objectives resulting in clarity of objectives and related actions that day centre staff should work toward with each person. In discussions, staff members expressed the view that effective care was provided to meet personal care needs. Progress notes were found to be relevant, well detailed and up to date. The centre is awaiting a WHSCT written policy for continence promotion and care, although the Trust has informed RQIA that the draft policy is at an advanced stage in its approval process. 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, staff and a student on placement 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.

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 staffs' interactions with service users, throughout the inspection period, presented evidence of calm, compassionate care being delivered and of service users responding well with staff, both individually and within the group settings.

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 their work 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. 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. Two people confirmed that they felt very safe in the centre.

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 small number of representatives 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 (11247).

Is Care Effective? (Quality of Management)

Killadeas Day Centre and the WHSCT have quality assurance systems in place, through which operations are monitored and staffs' practice is evaluated. Staff members' files showed that formal supervision and annual appraisals were taking place regularly. Records of staffs' 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 excellent detail. A record was kept of each service user's involvement and progress, with individual timetables produced in a clear pictorial and text format. 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. Records of reviews were available in each of the files examined.

There was written evidence to show that staff members were appropriately qualified and trained for their designated roles, although there had been some reliance on the use of agency staff over a period of absences of permanent staff members. Good records of staff meetings provided evidence of a wide range of topics having been discussed. The senior day care worker, in day to day charge of the centre, completes a detailed monthly health check which is then scrutinised within the monthly monitoring visits. 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 cookery/baking, arts and crafts, health and beauty and music, some of which were led by qualified tutors from the regional college of education. The manager and staff worked creatively to involve service users in a variety of experiences, making full use of the available rooms, including a sensory room.

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 activities and to create both a monthly newsletter for service users and their families and individual photo files for service users, one of whom shared her file with the inspector. There were several display boards throughout the premises showing 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.

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. Overall there was evidence to confirm that the centre provides a constructive, creative and compassionate care service to those who attend. The management and staff are commended for their commitment to providing a high quality service.

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

5.4 Additional Areas Examined

Not applicable.

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	<i>P Griffiths</i>	Date Completed	<i>11/3/16</i>
Registered Person	<i>Caia Hay</i>	Date Approved	<i>21-03-2016</i>
RQIA Inspector Assessing Response	<i>James H. King</i>	Date Approved	<i>04/04/16</i>

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

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