

Unannounced Care Inspection Report 19 July 2017



Fortwilliam Centre

Type of Service: Day Care Setting

Address: 17 - 19 Alexandra Gardens, Belfast, BT15 3LJ

Tel No: 02895040400

Inspector: Dermott Knox

www.rgia.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 with 50 places that provides day care services for adults who have a learning disability. Some of the people who use the service also have assessed needs related to a physical disability or mental illness.

3.0 Service details

Organisation/Registered Provider: Belfast HSC Trust Responsible Individual(s): Mr Martin Joseph Dillon	Registered Manager: Mr Mark Johnston
Person in charge at the time of inspection: Initially, Ms Sheena McGovern, Assistant Manager, and from late morning, Mr Mark Johnston, registered manager	Date manager registered: 22 November 2011
Number of registered places: 50 - DCS-LD, DCS-MP, DCS-PH	

4.0 Inspection summary

An unannounced inspection took place on 19 July 2017 from 10.15 to 16.15.

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 since the last care inspection and determined 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:-

- Providing an attractive, safe and suitable environment for the service
- Ensuring clear communication with service users
- Involving service users in the running of the centre
- Promoting choice for service users
- Providing meaningful and fulfilling activities for service users
- Promoting staff development and qualifications
- Promoting staffs' confidence, knowledge and skills
- Sharing information in the team
- Record keeping.

No areas requiring improvement were identified and the management and staff are commended for developing and maintaining a high quality service.

Service users said:-

"I do a lot of drama and art and I like it here".

"I learn to cook and I get to eat some of the things we make".

“I can show you round the centre”.

The findings of this report will provide the service 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	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mark Johnston, Manager, along with Sheena McGovern and Drew Smilie, Assistant Managers, as part of the inspection process and can be found in the main body of the report.

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

5.0 How we inspect

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

- Record of notifications of significant events
- Record of complaints
- Inspection report from the previous inspection on 30 August 2016
- The RQIA log of contacts with, or regarding Fortwilliam Day Centre.

During the inspection the inspector met more than 20 service users in their groups and spoke with two individually. Five day care staff were interviewed individually and brief discussions were held with catering and clerical staff. No visiting professionals or service users’ visitors/representatives were available on the day of the inspection.

The following records were examined during the inspection:

- The Statement of Purpose
- The Service User’s Guide
- Four sets of minutes of service users’ meetings held in 2017
- Minutes of two staff meetings held in April and in June 2017
- Reports of four monitoring visits for March, April, May and June 2017
- The staff training report for 2016-17
- Record of complaints
- Record of Incidents and Accidents
- Three service users’ files
- A quality survey and report regarding ‘Lunchtime for service users’
- A quality survey titled, “Tell us what you think of the service”.

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

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 30 August 2016

The most recent inspection of the day centre was an unannounced care inspection.

6.2 Review of areas for improvement from the last care inspection dated 30 August 2016

There were no areas for improvement made as a result of the last care inspection.

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 day centre premises were well maintained and in good decorative order, with no obvious hazards for service users or staff. There are several rooms of varying sizes available for group activities and for individual work with service users, when necessary. Work on the redesigned outdoor areas has almost been completed and one service user, with the assistant manager, conducted a tour of these areas, pointing out the extensive improvements that make the rear garden safe and attractive for everyone to use.

All staff members expressed strong commitment to their work with service users, which, they confirmed, is enjoyable and fulfilling. All new staff undertake a detailed induction programme, as described by one relatively recently appointed day care worker. The manager, two assistant managers and three other staff members, who met with the inspector, confirmed that they have confidence in the practice of all members of the staff team in their work with service users.

Safeguarding procedures were understood by staff members who were interviewed, who 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 excellent quality and that team members worked well together. There were systems in place to ensure that risks to service users were assessed regularly and managed appropriately and this included inputs by community based professionals, service users and, where appropriate, a carer.

Risk assessments with regard to transport, mobility and moving and handling, or other areas, such as choking or epileptic seizures, specific to an individual, were present where relevant and each one had been signed as agreed, either by the service user or a representative. Staff members were observed interacting sensitively with service users and being attentive to each person's needs. Observation of the delivery of care, throughout the period of the inspection, provided evidence that service users' needs were being met safely by the staff on duty.

Fire alarm systems checks were carried out and recorded on a weekly basis and fire exits were seen to be unobstructed. Fire safety training has been provided for all staff members on an annual basis.

During the inspection visit, several service users spoke positively of their enjoyment of attending the centre and confirmed that they felt safe and well cared for in the premises and in the transport vehicles. Staff presented as being well informed of the needs of service users and of methods of helping to meet these needs safely. Service users' rights and feelings, and the methods available to them of raising a concern or making a complaint were set out in the service user guide and training had been provided for service users to help them understand and use the procedures for making their views known to staff. The monitoring officer includes safety checks and audits in each monthly visit, reports of four of which were examined.

The evidence presented supports the conclusion that safe care is provided consistently in Fortwilliam Day Centre.

Areas of good practice

Examples of good practice found throughout the inspection included, staff induction, staff training, supervision and appraisal, empowerment of service users, adult safeguarding, infection prevention and control, risk management and the home's environment.

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 centre's Statement of Purpose and the Service User's Guide provide all of the information required by the regulations and the minimum standards. The Service User's Guide includes pictorial support for the written information, helping to make it accessible to many of the service users. The manager expressed interest in the idea of developing a DVD version of the guide.

Three service users' files were examined and each was found to contain detailed referral and assessment information on the individual and on his or her functioning, along with a written agreement on the terms of the individual's participation. Care planning information was included in the records of reviews and referred to the intended outcomes for service users and the extent to which these had been achieved. Care plans clearly reflected the support and assistance required by the individual to achieve his or her goals or objectives. The content of each person-centred care plan was written, appropriately, in the first person and each one presented a clearly individualised plan containing evidence of that person's involvement. One good example of this focus in a service user's records was the document titled, "My day, my choice". A daily timetable for each person was presented in pictures, symbols and text. Each of the files examined contained clear risk assessments appropriate to the individual service user, making the risks clear for staff involved in specific aspects of the work with that

person. 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. Dates and signatures were present in all of the files examined. 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. Well written review records, informed by detailed progress notes and including the service user's views, where possible, were available in all files examined.

The premises are spacious, over two floors for service users' groups and activities, with a third floor used as offices and a meeting room, as it is not accessible by lift. A wide range of activities is provided in the centre to support development of knowledge, skills and confidence with service users. There is good outdoor space, including a large, attractive garden area, in which garden furniture, a lawn and raised flower beds are designed to facilitate service users' involvement and enjoyment.

Service users spoke about their experiences of participating in the centre's activities and all were positive about the benefits they gained from these. Activities included music and drama, art, computer use, gardening and several community based initiatives, including exercise groups for better fitness. A number of service users participated in courses such as the recently completed, eleven session Makaton course, led by a Speech and Language Therapist employed by the Belfast Trust. Many service users had been provided with learning opportunities by staff on topics such as fire safety, active lifestyles and keeping safe.

Two service users completed RQIA questionnaires during the inspection and both were entirely positive about the care and the service provided in Fortwilliam Centre. One completed questionnaire was returned by a relative of a service user who also indicated that she was very satisfied with all aspects of the service. Comments made by this respondent included:

"I have never witnessed any client in the centre being treated badly; quite the opposite. My (relative) smiles a lot in Fortwilliam. Staff are very bubbly."

The evidence indicates that the care provided in Fortwilliam Centre is effective in terms of promoting each service user's involvement, development, enjoyment and wellbeing.

Areas of good practice

Examples of good practice in effective care, found throughout the inspection, included assessment of strengths and needs, person-centred care planning, detailed progress records, care reviews, communication between service users and their carers and the management and staff of the centre. There was evidence of positive links and relationships between the centre and a number of community organisations, in addition to the constructive involvement of a number of community-based professionals within the Belfast Trust.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

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.

Observations of activities throughout the centre provided evidence of service users and staff relating positively to each other in a respectful and adult manner. Almost all of the service users were introduced to the inspector and were enthusiastic in showing examples of the activities in which they engaged. Service users confirmed that staff involve them in deciding what they want to do during their time in the day centre. Several people stated that they enjoy everything about the centre and that it is important for them to have contact and friendships with others. Two service users met individually with the inspector and both provided enthusiastic comments on the enjoyment they got from attending the centre.

Staff members presented as being committed to providing service users with purposeful and enjoyable experience at the centre and in community based activities. In all of the interactions observed, service users were engaged by staff with warmth, and encouragement. Staff demonstrated an understanding of each service user's assessed needs and individual care plan. Observation of practice confirmed that service users were afforded choice and were seen to be encouraged by staff in fulfilling and enjoyable activities.

The systems in place to ensure that the views and opinions of service users were sought and taken into account included an annual satisfaction survey and occasional other surveys of specific aspects of the service. Most recent of these was a 'Lunchtime Survey', completed on 08 May 2017, in which service users rated their experiences of the lunchtime environment and the food provided. Overall, the views expressed were very positive, with a small number of suggestions and questions that were then followed up by staff members and, where necessary, were taken to the quarterly Knockbracken Foods Meeting, an area forum at which service users meet with representatives of the Belfast Trust and the catering provider. This is a good example of the involvement of service users in influencing decisions in a specific aspect of the service.

Minutes of two of the centre's service user meetings, held in May and June 2017, were examined. In addition to discussions of matters arising in the centre, service users were provided with copies of the monthly publication, 'Easy News', in which major national and international news events are reported with easy-read text and pictures. Discussion was held on the content of this paper. This evidence of the encouragement of service users' understanding of news and world events is commendable.

Records for service users were presented in appropriate formats that helped each person to understand the content. During each monthly monitoring visit, the views of a sample of service users were sought and their comments were included in all of the monthly monitoring reports examined. The evidence presented at this inspection confirms that compassionate care is provided consistently in Fortwilliam Centre.

Areas of good practice

Examples of good practice found throughout the inspection included, communicating with service users appropriately, listening to and valuing service users, individualising communication methods with each person, involving service users' views in the decision making

process, identifying meaningful development opportunities for service users in the community, encouraging service users' understanding of world events.

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.

Discussions with the manager, two assistant managers and three other staff members, and an examination of a range of records, including minutes of staff meetings, staff training schedules, monitoring reports and review reports, provided evidence that effective leadership and management arrangements are in place in Fortwilliam Centre. There was evidence in the centre's recent quality survey report to show that service users viewed the service as very satisfactory.

Staff training records confirmed that staff had received mandatory training and training specific to the needs of the service users in this setting. This additional training included, 'Dementia with Learning Disability', 'Epilepsy Awareness and Emergency Management', 'Talking Mats' and, 'Dysphagia and Choking Awareness'. Discussions with staff and examination of records confirmed that staff meetings had been held approximately bi-monthly and that the staff team in each of the groups also held regular meetings to address the issues specific to their group. Staff reported that the manager provided detailed information to staff and that they were regularly consulted on a range of decision making aspects of the service. There was evidence from the minutes, from discussions with staff and from the analysis of staff questionnaires to confirm that working relationships within the staff team were supportive and positive and that team morale was good. Staff commented that the manager's leadership style was constructive and motivated team members to accept responsibility for their work and for the overall effectiveness of the centre.

The two assistant managers were 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. It was good to see that both were supported by the Belfast Trust in achieving QCF Level 5 in Leadership and Management.

Staff members viewed supervision as a useful part of their accountability feedback system and of their individual development. In the formal supervision structure, Band 3 staff are supervised by one or other of the assistant managers, while they and the Band 5 staff are supervised by the manager. Staff reported that this system works well and confirmed that they meet with their supervisor at least quarterly. There was evidence from discussions with staff to confirm that the ethos of the team is positive and mutually supportive and that ideas for improvement are

encouraged. Staff felt they were well supported following any incidents that they found particularly challenging in their work with a service user.

Four monthly monitoring reports were examined and were found to address all of the matters required by regulation. Each report contained well-detailed feedback from discussions with service users and with one or two staff members. A sample of service user records was checked during each visit and an audit completed of an aspect of the centre's compliance with a selected area of performance. Any resulting necessary improvements were clearly set out in an action plan. This structured and detailed approach to monthly monitoring aligns well with the centre's commitment to the provision of a high quality service.

Overall, the evidence available at this inspection confirmed that Fortwilliam Day Care Service is well led.

Areas of good practice

Examples of good practice found throughout the inspection included, staff training, supervision, appropriate delegation, building good working relationships with the local community, keeping staff and service users well informed, governance arrangements, management of complaints, management of incidents, promoting fulfilment for service users.

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

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.

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