

## Unannounced Follow up Care Inspection Report 14 March 2018











## The Resource Centre

Type of Service: Day Care Setting

Address: Carnhill, Racecourse Road, Derry, BT48 8DA

Tel No: 02871352832 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 cares for and supports up to 20 service users Monday to Friday. They provide care, support and day time activities for older people and adults living with dementia.

#### 3.0 Service details

Organisation/Registered Provider:	Registered Manager:
The Resource Centre Derry	Ellen Doherty (Acting)
Decreasible to distinct (a)	
Responsible Individual(s):	
Paddy McCarron	
,	
Person in charge at the time of inspection:	Date manager registered:
Ellen Doherty	11 September 2017
Number of registered places:	
20	

#### 4.0 Inspection summary

An unannounced inspection took place on 14 March 2018 from 09.50 to 15.30 hours.

This inspection was underpinned by the Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

The inspection focused on the action taken in response to the areas of improvement identified in the previous care inspection dated 28 September and 5 October 2017.

One area for improvement under the regulations identified at the last care inspection has been stated for a second time. This area relates to care plans.

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 is a great place to come", "The food here is better than a hotel", "Staff are always kind, mannerly and helpful", "we do lots of activities such as bowling, movie afternoons and we're having a party this afternoon for Saint Patrick's Day" and "I would be lost without everyone here in the centre".

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	1	0

Details of the Quality Improvement Plan (QIP) were discussed with Paddy McCarron, Responsible Person and Ellen Doherty, Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

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

## 4.2 Action/enforcement taken following the most recent care inspection 28 September and 5 October 2017.

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 28 September and 5 October 2017.

#### 5.0 How we inspect

Prior to inspection the following records were analysed:

- the registration details of the day centre
- written and verbal communication received since the previous care inspection
- the previous care inspection report and QIP

During the inspection, the inspector met with the responsible person, manager, three care staff, one ancillary staff member and ten service users.

The following records were examined during the inspection:

- complaints and compliments records
- accident/untoward incident records
- staff roster
- recruitment and selection records
- elements of three service users' care records
- sample of policies and procedures
- sample of quality assurance audits
- staff training information
- minutes of three staff meetings
- minutes of three service user meetings
- three monthly monitoring reports

Twelve areas for improvement were identified at the last care inspection. These were reviewed and assessment of compliance recorded as met for eleven areas and partially met for one area.

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 responsible person, manager, service users 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 28 September and 5 October 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 28 September and 5 October 2017.

The most recent inspection of the day care setting was an unannounced care inspection and the QIP was validated during this inspection.

Areas for improvement from the last care inspection		
Action required to ensure Regulations (Northern Ire	e compliance with the Day Care Setting eland) 2007	Validation of compliance
Area for improvement 1  Ref: Regulation 21 (1) (2) (3)	The registered person shall not employ a person to work in the day care setting unless he has obtained in respect of that person the information and documents specified in Schedule 2.	
Stated: First time	Ref: 6.4  Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. On the day of inspection two references and proof of identify were available for the identified staff member. Written confirmation that the staff member was physically and mentally fit for the purposes of the work that they perform was also available.	Met

Area for improvement 2	The registered person shall, having regard to	
Ref: Regulation 20 (1) (c) (i)	the size of the day care setting, the statement of purpose and the number and needs of service users:	
Stated: First time	(c) ensure that the persons employed to work in the day care setting (i) receive mandatory training and other training appropriate to the work they are to perform.	
	Ref: 6.4	8.6.4
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. Review of staff training records confirmed that the following training was undertaken; infection prevention and control on 16 October 2017, adult safeguarding on 1 November 2017, fire safety training on 12 October 2017 and basic food hygiene on 18 and 19 October 2017.	Met
Area for improvement 3	The registered person shall give notice to the	
Ref: Regulation 29 (1) (c)	Regulation and Improvement Authority without delay of the occurrence of	
Stated: First time	(c) any serious injury to a service user in the day care setting;	
	Ref: 6.7	
	Action taken as confirmed during the inspection:	
	Discussion with the manager and review of	Met
	accident/incident records confirmed no accidents or incidents had occurred since the	
	previous care inspection. The responsible	
	person and the manager confirmed that they	
	were familiar with the reporting arrangements in line with Regulation 29 of the Day Care	
	Setting Regulations (Northern Ireland) 2007.	
	A policy and procedure was in place regarding accident/incident management. Reporting	
	arrangements were included.	

Area for improvement 4  Ref: Regulation 11 (1)	The registered provider and the registered manager shall, having regard to the size of the day care setting, the statement of purpose,	
Stated: First time	and the number and needs of the service users, carry on or (as the case may be) manage the day care setting with sufficient care, competence and skill.	
	Ref: 6.7  Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the responsible person and the manager confirmed that this area for improvement had been addressed. Significant improvements were noted regarding the governance of the day care setting including robust monthly monitoring and the introduction of Evide, an online data monitoring	Met
Avec for improvement F	application.	
Area for improvement 5  Ref: Regulation 16 (1)	The registered person, where appropriate, shall ensure that a written care plan is prepared in consultation with the service user or the service user's representative as to how	
Stated: First time	the service user's needs in respect of his day care are to be met.	
	Ref: 6.5  Action taken as confirmed during the inspection: Review of three care records identified significant work had been undertaken regarding the review of care plans however further work is required to meet this area of improvement. This area for improvement has not been fully addressed and has been stated for a second time in this report.	Partially Met

Area for improvement 6 Ref: Regulation 14 (1) (c) Stated: First time	The registered person shall ensure as far as reasonably practicable that— (c) unnecessary risks to the health or safety of service users are identified and so far as possible eliminated.  Ref: 6.5  Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. The review of three care records evidenced that this area for improvement had been addressed.	Met
Action required to ensure Minimum Standards, 2012	e compliance with the Day Care Settings	Validation of compliance
Area for improvement 1 Ref: Standard 23 Stated: First time	<ul> <li>The registered provider should ensure staff meetings are held at least quarterly. The minutes should include:</li> <li>the dates of meetings;</li> <li>the names of those attending;</li> <li>minutes of discussions;</li> <li>any actions agreed with responsibility for completion assigned and time frame/s for completion.</li> <li>Ref. 6.7</li> <li>Action taken as confirmed during the inspection:</li> <li>The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. Review of minutes of staff meetings undertaken on 1 February and 11 January 2018 confirmed that that this area for improvement had been addressed.</li> </ul>	Met

Area for improvement 2	The registered provider chauld maintain a staff	
Area for improvement 2	The registered provider should maintain a staff training record that clearly details the training	
Ref: Standard 21.8	provided to staff. The record should specify:	
Stated: First time	<ul> <li>The names and signatures of those attending the training event;</li> <li>The date of the training;</li> <li>The name and qualification of the trainer or the training agency;</li> <li>Summary of the content of the training programme.</li> </ul>	Met
	Ref: 6.4	
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. A review of a sample of training records confirmed that this area for improvement had been addressed.	
Area for improvement 3	The registered provider should ensure that the	
Ref: Standard 18.1	following policies and procedures, as detailed in Appendix 2 of the DHSSPS Day Care Settings Minimum Standards (2012) are	
Stated: First time	reviewed and updated to include all legislation:	
	<ul><li>Adult Safeguarding</li><li>Recruitment and Selection</li></ul>	
	Ref: 6.7	Met
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. The adult safeguarding and the recruitment and selection policies and procedures had been reviewed and updated in line with legalisation.	
Area for improvement 4	The registered provider should ensure each service user is provided with an individual	
Ref: Standard 3.1	written agreement, which, having regard to the assessment of need, confirms the day service	
Stated: Second time	is suitable and appropriate to his or her needs, and sets out any fees or charges payable, and the arrangements for payment of these and includes all matters listed in standard 3.1.	Met
	Ref: 6.5	

	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. The individual agreement had been reviewed following the previous care inspection.	
Area for improvement 5 Ref: Standard 18.1 Stated: Second time	The registered provider should ensure that the following policies and procedures, as detailed in Appendix 2 of the DHSSPS Day Care Settings Minimum Standards (2012) are developed and made available in the day centre in respect of:  • Menu planning • Safeguarding and protecting service user's money and valuables • Service user agreement  Ref: 6.7  Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. The identified policies and procedures had been reviewed and were available in the day care setting on the day of inspection.	Met
Area for improvement 6 Ref: Standard 1.2 Stated: Second time	The registered provider should ensure The Resource Centre's Service Users Guide is reviewed to include all matters listed in standard 1.2.  Ref: 6.5  Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. A review of the Service Users Guide had been undertaken.	Met

#### 6.3 Inspection findings

A policy and procedure for staff recruitment was available in the day care setting on the day of the inspection. The policy and procedure detailed the recruitment process and complied with legislative requirements and DHSSPS guidance.

Discussion with the responsible person, manager and the administrator confirmed that they understood what was required to be obtained prior to any new staff commencing employment at the day care setting. Review of documentation evidenced that employee checklists have been developed since the previous inspection.

The responsible person confirmed that the responsibility for the recruitment of staff had been delegated to him and that he was supported by the manager and the day care setting's administrator.

The inspector reviewed elements of three service users' care files. Care records examined contained an up to date assessment of needs and risk assessments. Review of three care records identified significant work had been undertaken regarding the review of care plans. However further work is required to include sufficient information to direct and guide staff in regard to the care and support each service user requires and the recording of specific objectives. This had been identified as an area for improvement at the last care inspection and has been stated for a second time.

Care recording for every five attendances was being maintained in the three care records inspected. The review confirmed that service users and/or their representatives were encouraged and enabled to be involved in the review process, where appropriate. Discussion with staff confirmed that a person centred approach underpinned practice.

There was evidence that staff meetings were held on a monthly basis and records were maintained. The records included the date of the meeting, names of those in attendance, a record of discussion and any agreed actions. It was positive to note that a set agenda item was reading and discussing relevant day care standards.

#### **Areas for improvement**

One area for improvement under the regulations identified at the last care inspection has been stated for a second time. This area relates to care plans.

	Regulations	Standards
Number of areas for improvement	1	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 Paddy McCarron, Responsible Person and Ellen Doherty, Manager 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 Setting Regulations (Northern		
Ireland) 2007		
Area for improvement 1	The registered person, where appropriate, shall ensure that a written care plan is prepared in consultation with the service user or the	
Ref: Regulation 16 (1)	service user's representative as to how the service user's needs in respect of his day care are to be met.	
Stated: Second time		
	Ref: 6.5	
To be completed by:		
30 June 2018	Response by registered person detailing the actions taken: New care plan has been reviewed, and updated as requested on the day of our inspection. Copy of new care plan has been emailed to the inspector for approval.	





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