

Unannounced Care Inspection Report

10 January 2020



Beragh Day Centre

Type of Service: Day Care Service

Address: Corner Stone Centre, Beragh, BT79 7XE

Tel No: 02880757058

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 provider 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 25 service users over the age of 65, who may be frail, or living with a physical disability. The day care setting is open Tuesday and Friday and is managed by the Western Health and Social Care Trust (WHSCT).

3.0 Service details

Organisation/Registered Provider: Western Health and Social Care Trust Responsible Individual: Dr Anne Kilgallen	Registered Manager: Sabrina Conwell, Manager (Acting)
Person in charge at the time of inspection: Pamela Hackett, Senior Care Assistant	Date manager registered: Awaiting registration
Number of registered places: 25	

4.0 Inspection summary

An unannounced inspection took place on 10 January 2020 from 11.50 to 15.20.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, 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 day care setting was delivering safe, effective and compassionate care and if the service was well led.

One area requiring improvement was identified regarding the environment.

Evidence of good practice was found in relation to staff members' registrations with the Northern Ireland Social Care Council (NISCC) and staff training.

Service users were asked to provide their views regarding the day care setting. Examples of some of the comments made by service users are "I am very happy coming here and staff are lovely"; "fine place, you'll not get better" and "the staff couldn't do enough for you".

The findings of this report will provide the day care setting 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

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Pamela Hackett, senior care assistant, 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 dated 11 January 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 11 January 2019.

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
- information and correspondence received by RQIA since the last inspection
- incident notifications which highlighted that no incidents had been reported to RQIA since the care inspection on 11 January 2019
- unannounced care inspection report and QIP dated 11 January 2019.

During the inspection, the inspector met with the senior care assistant and two care assistants. Introductions were made to all service users while walking around the setting with individual interaction with seven service users.

Ten service user and/or relatives' questionnaires were provided for distribution; six service user/relative questionnaires were returned to RQIA within the timeframe for inclusion in this report. The respondent indicated that they were very satisfied that care provided to service users was safe, effective and compassionate and that the day care setting was well led.

At the request of the inspector, the senior care assistant was asked to display a poster within the day centre. The poster invited staff to provide their views electronically to RQIA regarding the quality of service provision; no responses were received.

The inspector requested that the senior care assistant place a 'Have we missed you' card in a prominent position in the day centre to allow service users, relatives and staff who were not available on the day of the inspection to give feedback to RQIA regarding the quality of service provision. No responses were received.

An RQIA information leaflet 'How can I raise a concern about an independent health and social care service' was also provided to be displayed in the day care setting.

The following records were examined during the inspection:

- Complaints and compliments records
- Staff roster
- RQIA registration certificate
- Elements of three service users' care records
- Supervision records
- Appraisal records
- Records confirming registration of care staff with the Northern Ireland Social Care Council (NISCC).

Three areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

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

The findings of the inspection were provided to the senior care assistant at the conclusion of the inspection.

6.0 The inspection

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Day Care Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 19(1)(a) Schedule 4 Stated: First time	The registered person shall maintain in respect of each service user a record which includes the information, documents and other records specified in Schedule 4 relating to the service user including a recent photograph of the service user.	Met
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. Review of three care records evidenced that this area for improvement had been satisfactorily addressed.	
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
Area for improvement 1 Ref: Standard 22.2 Stated: First time	The registered person should ensure that staff have recorded individual, formal supervision sessions according to the day care setting's procedures and no less than every three months.	Met
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. Review of two staff files evidenced that this area for improvement had been satisfactorily addressed.	

Area for improvement 2 Ref: Standard 22.5 Stated: First time	The registered person should ensure that staff have a recorded annual appraisal with their line manager to review their performance against their job description, and to agree personal development plans.	Met
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the senior care assistant confirmed that this area for improvement had been addressed. Review of two staff files evidenced that this area for improvement had been satisfactorily addressed.	

6.1 Inspection findings

The senior care assistant described the staffing levels which have been assessed as necessary to provide a safe service in the setting. Assurances were provided to the inspector that sufficiently qualified, competent and experienced persons are working at all times to meet the assessed needs of the service users, taking into account the size and layout of the premises, the number of service users accommodated, fire safety requirements and the statement of purpose. A review of the staffing roster for weeks commencing 17 December 2019 until 10 January 2020 evidenced that the planned staffing levels were adhered to.

Discussions with staff and service users confirmed that they felt there were sufficient staff to ensure the safety of service users in the day centre. Observation of the delivery of care at the time of inspection evidenced that service users' needs were effectively met by the number of staff on duty.

There were arrangements in place to ensure that staff are registered with the Northern Ireland Social Care Council (NISCC). Information regarding registration details and renewal dates were maintained and available to the inspector. The senior care assistant confirmed that all staff are currently registered with NISCC.

The senior care assistant advised that no staff had been recruited since the previous care inspection and the most recent staff member appointed was approximately six years ago. The senior care assistant confirmed that staff employment records were held within the WHSCT human resources department and that all appointments were made in compliance with relevant legislative requirements and trust policy and procedures.

The setting's training record demonstrated that there was an ongoing programme of mandatory training for staff, relevant to their roles and responsibilities, which will assure staff know how to keep service users safe. There was evidence that compliance with completing mandatory training was routinely monitored by the manager and any training now due for update was being followed up with the staff member by the manager. Review of a sample of staff training records concluded staff had received mandatory and other training relevant to their roles and responsibilities such as infection prevention and control, adult safeguarding, basic food hygiene, moving and handling and first aid.

A complaints and compliments record was maintained in the day centre. There had been no complaints recorded since the previous care inspection. The complaints procedure was displayed in areas throughout the day centre. Discussion with staff confirmed that they knew how to receive and deal with complaints and ensure that the manager was made aware of any complaints. Samples of compliments were available for review and evidenced a high level of satisfaction with the service provided.

A review of the day centre's environment was undertaken and the day centre was found to be warm, had suitable lighting and no mal odour was noted. The review identified that the décor and cleanliness in several areas of the day care setting required address. The following deficits were noted:

- high level cobwebs present in the kitchen
- damaged ceiling tiles in the identified toilet
- stains and dust present in ventilation vent in the identified toilet
- stained floor tiles at the main entrance
- clutter present in the main entrance to the centre
- small tear noted in kitchen floor covering.

These areas have been identified for an area for improvement.

Discussion with the senior care assistant and observation of the environment confirmed that furniture, aids and appliances were fit for purpose for the needs of the service users. Infection prevention and control measures were in place, which included the availability of supplies of liquid soap and hand towels mounted on the walls, foot pedal operated bins and seven step hand hygiene notices which were positioned at wash hand basins. Staff also had effective access to gloves and aprons as required.

Service users' comments:

- "We are all safe in the centre."
- "First class service; if it was open every day I would come every day."
- "I can't see very well. Staff promote my independence in the centre and they encourage me to do all that I can for myself."
- "Staff treat you with such kindness and great respect."
- "All my needs are met here and I look forward to coming."
- "Great service and well run."

Staff comments:

- "I feel we provide safe care to the service users and we know all their needs."
- "We work well as a team and ensure everyone is well cared for."
- "Service users' human rights are always respected and choice is offered at all times."
- "Care is excellent here and very much about the person."
- "Staff are very supportive of one and other and good communication."
- "The acting manager is always available for advice and support."
- "I have done all my mandatory training and can do other training if I feel it is relevant to the service."

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff members' registrations with the Northern Ireland Social Care Council (NISCC) and staff training.

Areas for improvement

One area requiring improvement was identified regarding the environment.

	Regulations	Standards
Total 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 Pamela Hackett, senior care assistant, 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

<p>Area for improvement 1</p> <p>Ref: Regulation 26 (2) (b)</p> <p>Stated: First time</p> <p>To be completed by: 30 April 2020</p>	<p>The registered person shall, having regard to the number and needs of the service users, ensure that the premises to be used as the day care setting are of sound construction and kept in a good state of repair internally and externally. The following deficits must be addressed:</p> <ul style="list-style-type: none"> • high level cobwebs present in the kitchen • damaged ceiling tiles in the identified toilet • stains and dust present in ventilation vent in the identified toilet • stained floor tiles at the main entrance • clutter present in the main entrance to the centre • small tear noted in kitchen floor covering. <p>Ref: 6.1</p> <p>Response by registered person detailing the actions taken: Job request logged with Estate Services. Meeting held with Beragh Care and Development Committee, the highlighted issues were discussed and reassurance given by the Committee that these would be addressed. A full time cleaner is now in place. All highlighted areas have been addressed. Environment will be kept under review and any further issues to be addressed.</p>
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