

Unannounced Care Inspection Report 7 February 2020



Dromore Day Centre

Type of Service: Day Care Service

Address: 34 – 36 St. Dympna's Road, Dromore, BT78 3JQ

Tel No: 028 8289 8914

Inspector: Angela Graham

www.rqia.org.uk

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 is registered to provide care and day time activities for up to 25 service users over the age of 65, who may be frail and /or, have dementia or living with a physical disability. The day care setting is open Tuesday, Thursday 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 (Acting Manager)
Person in charge at the time of inspection: Sabrina Conwell	Date manager registered: Acting Manager – 13 November 2018
Number of registered places: 25	

4.0 Inspection summary

An unannounced inspection took place on 7 February 2020 from 11.15 to 14.10.

This inspection was underpinned by The Health and Personal Social Services (Quality Improvement and Regulation) (Northern Ireland) Order 2003, 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 during and since the last care inspection and to determine if the establishment was delivering safe, effective and compassionate care and if the service was well led.

As a public-sector body, RQIA have a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care settings, we are committed to ensuring that the rights of people who receive services are protected. This means we will seek assurances from providers that they take all reasonable steps to promote people's rights. Users of day care settings have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted. All day care settings should safeguard and promote service user choices and freedoms as they relate to the range of services being provided.

Evidence of good practice was found in relation to staff members' registrations with the Northern Ireland Social Care Council (NISCC), infection prevention and control practices and staff training. In addition, good practice was also observed in regard to staff supervision and appraisal and maintaining good working relationships.

Two areas requiring improvement were identified regarding the environment and risk assessment.

Service users' comments are included throughout the report.

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.

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

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	2	0

Details of the Quality Improvement Plan (QIP) were discussed with Sabrina Conwell, 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 dated 22 March 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 22 March 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 22 March 2019
- unannounced care inspection report and QIP dated 22 March 2019.

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

Ten service user and/or relatives' questionnaires were provided for distribution; six service user/relatives questionnaires were returned to RQIA within the timeframe for inclusion in this report.

All respondents indicated that they were very satisfied that the care being provided to service users was safe, effective, compassionate and well led. Respondents made the following comments:

- "Very happy and satisfied to be here."
- "Lovely staff."
- "Very happy."

At the request of the inspector, the manager 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 manager 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.

A range of documents relating to the service were reviewed during the inspection and are referred to within the body of the report.

Four areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met for three and not met for one.

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 22 March 2019

The most recent inspection of the establishment was an unannounced care type 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 22 March 2019

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 26 (2) (d) Stated: Second time	The registered person shall, having regard to the number and needs of the service users, ensure that all parts of the day care setting are kept clean and reasonably decorated. The following maintenance issue must be addressed: <ul style="list-style-type: none"> • address the uneven floor surface at the entrance to the day care setting 	Not met

	<p>Action taken as confirmed during the inspection: Discussion with the manager and a review of the environment confirmed that this area for improvement had not been addressed. This area for improvement will be stated for a third and final time.</p>	
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
<p>Area for improvement 1 Ref: Standard 27.1 Stated: First time</p>	<p>The registered provider should review and develop an established system to assure compliance with best practice in infection prevention and control within the day care setting. The following issues must be addressed:</p> <ul style="list-style-type: none"> • address the issue of high and low level dusting identified on the day of inspection • ensure the identified doorframe is deep cleaned. 	Met
	<p>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 the environment presented as clean. The matters highlighted at the previous care inspection had been satisfactorily addressed.</p>	
<p>Area for improvement 2 Ref: Standard 22.2 Stated: First time</p>	<p>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.</p>	Met
	<p>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 inspector reviewed two staff files and evidence was available in these files that supervision had been undertaken in line with Standard 22.2.</p>	

Area for improvement 3 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 manager confirmed that this area for improvement had been addressed. The inspector reviewed two staff files and evidence was available in these files that annual appraisal had been undertaken in line with Standard 22.5.	

6.3 Inspection findings

The manager 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 7 January 2020 until 7 February 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 manager confirmed that all staff are currently registered with NISCC.

The manager advised that no staff had been recruited since the previous care inspection. The manager 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 since the previous care inspection such as adult safeguarding, information

governance, fire safety, basic food hygiene and dementia awareness. It was positive to note that the day care setting provided training in regard to equality, diversity and human rights.

Discussions with the manager and staff on the day of inspection described positive working relationships in which issues and concerns could be freely discussed; staff reported they were confident that they would be listened to. In addition, staff confirmed that they felt supported by management. Staff demonstrated that they had knowledge of their role, function and responsibilities and they had no concerns regarding the practice of any of their colleagues.

Discussions with the manager and staff confirmed that there were systems in place to monitor staff performance and ensure that staff received appropriate support and guidance. Staff spoken with during the inspection confirmed the availability of continuous update training alongside supervision and appraisal processes and an open door policy for discussions with the manager. Review of a sample of supervision and appraisal records verified that staff had individual three monthly supervision sessions and an annual appraisal.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout. The uneven floor surface at the entrance to the day care setting had not been addressed. This area for improvement has been stated for a third and final time. Discussion with the manager confirmed that a risk assessment was not in place to address the uneven floor surface at the entrance to the day care setting. This has been identified as an area for improvement.

Discussion with the manager 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:

- "Care is safe here. Staff help me get around the centre safely in my wheelchair."
- "There are enough staff to care for us and they do a great job."
- "I am cared for very well here. Staff are very respectful and helpful."
- "Staff involve us in everything that is happening in the centre."
- "This is a well operated centre."
- "I have a care review here with the staff and my social worker."

Staff comments:

- "The current staffing levels meet the service users' needs."
- "There is no restrictive practice in the centre. The service users move freely around the centre."
- "The ladies and gentlemen are encouraged to make choices everyday they are here."
- "I like my job and I am happy working here. We have regular staff meetings and can raise any issues."
- "I get my supervision every three months."
- "Care is very much person centred and driven by the service user. Choice is respected."

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), infection prevention and control practices and staff training. In addition, good practice was also observed in regard to staff supervision and appraisal and maintaining good working relationships.

Areas for improvement

Two areas requiring improvement were identified regarding the environment and risk assessment.

	Regulations	Standards
Total number of areas for improvement	2	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 Sabrina Conwell, 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	
<p>Area for improvement 1</p> <p>Ref: Regulation 26 (2) (d)</p> <p>Stated: Third and final time</p> <p>To be completed by: 30 June 2020</p>	<p>The registered person shall, having regard to the number and needs of the service users, ensure that all parts of the day care setting are kept clean and reasonably decorated. The following maintenance issue must be addressed:</p> <ul style="list-style-type: none"> • address the uneven floor surface at the entrance to the day care setting <p>Ref: 6.3</p>
	<p>Response by registered person detailing the actions taken: In discussions with the Landlord and Estate Services about funding to repair the floor.</p>
<p>Area for improvement 2</p> <p>Ref: Regulation 14 (1) (a)</p> <p>Stated: First time</p> <p>To be completed by: 29 February 2020</p>	<p>The registered person shall ensure as far as reasonably practicable that all parts of the day care setting to which service users have access are free from hazards to their safety.</p> <p>A detailed risk assessment must be put in place to address the uneven floor surface at the entrance of the day care setting.</p> <p>Ref: 6.3</p>
	<p>Response by registered person detailing the actions taken: Risk assessment in place, alternative door being use until issue has been resolved.</p>

Please ensure this document is completed in full and returned via Web Portal



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