

Unannounced Care Inspection Report 6 February 2020



Willowbank Day Centre

Type of Service: Day Care Service
**Address: The Junction, 12 Beechvalley Way,
Dungannon, BT70 1BS**
Tel No: 02887448438
Inspector: Angela Graham

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 15 service users. The service meets the needs of adults who may have a range of needs associated with physical disability, brain injury, sensory impairment and/or a learning disability. The day care setting is open Monday to Friday.

3.0 Service details

Organisation/Registered Provider: Willowbank Ltd Responsible Individual: Marion McKenna – Awaiting registration	Registered Manager: Kathleen Lappin
Person in charge at the time of inspection: Kathleen Lappin	Date manager registered: Kathleen Lappin – 22 May 2019
Number of registered places: 15	

4.0 Inspection summary

An unannounced inspection took place on 6 February 2020 from 10.20 to 13.15.

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

One area for improvement is stated for a second time in relation staff appraisal.

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	0	1

Details of the Quality Improvement Plan (QIP) were discussed with Kathleen Lappin, 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 21 February 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 21 February 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 21 February 2019
- unannounced care inspection report and QIP dated 21 February 2019.

During the inspection, the inspector met with the manager and one support worker. Introductions were made to all service users while walking around the setting with individual interaction with three 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 either very satisfied or satisfied that the care being provided to service users was safe, effective, compassionate and well led. Respondents made the following comments:

- "100% great care."
- "Good carers."

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.

Three areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met for two and partially 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 21 February 2019

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 21 February 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 28 Stated: First time	The registered person must ensure that the monthly monitoring visits are in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.	Met

<p>To be completed by: Immediate and ongoing</p>	<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 three monthly monitoring reports. The review confirmed that these reports were in line with Regulation 28.</p>	
<p>Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012</p>		<p>Validation of compliance</p>
<p>Area for improvement 1 Ref: Standard 22.2 Stated: First time To be completed by: 31 March 2019</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> <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 three staff files and evidence was available in these files that supervision had been undertaken in line with Standard 22.2.</p>	<p>Met</p>
<p>Area for improvement 2 Ref: Standard 22.5 Stated: First time To be completed by: 31 March 2019</p>	<p>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.</p> <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 three staff files and evidence was available in two of the three files that appraisal had been undertaken annually. This area for improvement will be stated for a second time.</p>	<p>Partially met</p>

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 6 January 2020 until 6 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.

On the morning of the inspection no service users were available in the day centre. Discussion with the manager confirmed that on Thursday and Friday, each week, the service users attend the organisation's day opportunities centre to undertake activities. A discussion took place with the manager that the delivery of day care must be undertaken in the day care setting in line with legalisation. The manager provided an assurance, post inspection, that this would be the case.

With consent from the manager of the day opportunities service and the service users the inspector visited the day opportunities service to engage with the service users and obtain their views regarding the day care experience.

Discussion with the manager and a review of one recruitment record confirmed there was a system in place to ensure that relevant pre-employment check with AccessNI had been undertaken prior to employment.

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.

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 supervision records for three staff verified that staff had individual three monthly supervision sessions. The inspector reviewed three staff files and evidence was available in two of the three files that appraisal had been undertaken annually. This matter was raised in the previous inspection report and is stated for a second time in this report.

The inspector discussed the monitoring arrangements in compliance with Regulation 28 of The Day Care Settings Regulations (Northern Ireland) 2007. The Regulation 28 monthly quality monitoring visits had been undertaken monthly.

A sample of reports viewed for November 2019 to January 2020 provided evidence that the visits included engagement with service users and staff; a review on the conduct of the day care setting and development of action points and review of previous action points.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout. There were no obvious hazards to the health and safety of service users, visitors or staff.

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:

- "Staff look after me well and keep me safe when I am here and when I am out and about."
- "Staff let me choose what I want to do."
- "I like playing the kettle drums and gardening. I get to choose what I do here."
- "Staff are nice, I know them all."
- "You'll not get better staff than here. I am treated very well."
- "Change is not needed here."

Staff comments:

- "Current staffing levels meet the service users' needs. Staffing levels are always under review."
- "All service users are treated with dignity and respect."
- "We warmly welcome the service users every day and ensure they enjoy their time here."
- "I am well supported by the manager. The centre runs smoothly, no problems."
- "The service users' needs are met here. They are offered a wide variety of activities depending on their interests."
- "Care is effective. Care and support is continually reviewed to ensure it meets the service users' needs."

Areas of good practice

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

Areas for improvement

One area for improvement is stated for a second time in relation staff appraisal.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

An area for improvement identified during this inspection is detailed in the QIP. Details of the QIP were discussed with Kathleen Lappin, 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

One area for improvement has 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 Settings Minimum Standards, 2012

<p>Area for improvement 1</p> <p>Ref: Standard 22.5</p> <p>Stated: Second time</p> <p>To be completed by: 29 February 2020</p>	<p>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.</p> <p>Ref: 6.3</p>
	<p>Response by registered person detailing the actions taken:</p> <p>In compliance with Standard 22.5 all staff will have a recorded, annual appraisal in which their line manager will review their performance against their job description.</p>



The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9536 1111

Email info@rqia.org.uk

Web www.rqia.org.uk

Twitter @RQIANews