

Unannounced Care Inspection Report

27 July 2017



Killadeas Day Centre

Type of Service: Day Care Setting

Address: 46 Drumwhinney Road, Roscublan, Kesh, BT93 1NT

Tel No: 02868 632364

Inspector: Angela Graham

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 that provides care and day time activities for up to thirty service users with a learning disability. The day care setting is open Monday to Friday.

3.0 Service details

Organisation/Registered Provider: Western Health and Social Care Trust Responsible Individual(s): Elaine Way CBE	Registered Manager: Patricia Griffith
Person in charge at the time of inspection: Alison McLaughlin, Day Care Worker (Acting) Patricia Griffith, Registered Manager	Date manager registered: 21 June 2013
Number of registered places: 30 – DCS-LD	

4.0 Inspection summary

An unannounced inspection took place on 27 July 2017 from 09.35 to 16.30 hours.

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

The inspection sought to assess 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 staff training, supervision and appraisal, knowledge regarding adult safeguarding, infection prevention and control, risk management and the day care setting's environment that promoted safe care. Regarding effective practice, examples of good practice were found in relation to care records, care reviews, audits and communication between service users, staff and other key stakeholders. Good practice was found regarding compassionate care in relation to the culture and ethos of the day care setting, dignity and privacy, listening to and valuing service users and taking account of the views of service users. Finally, good practice was found in relation to governance arrangements, management of incidents, quality improvement and maintaining good working relationships supporting well led care in the setting.

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 like coming here", "my dinner was nice", "I enjoy all the activities but colouring is my favourite" and "staff are good".

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	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Patricia Griffith, Registered Manager and Alison McLaughlin, Day Care Worker (Acting) 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.

4.2 Action/enforcement taken following the most recent care inspection dated 18 August 2016

No further actions were required to be taken following the most recent inspection on 18 August 2016.

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
- Notifiable events since the previous care inspection
- The previous care inspection report.

During the inspection, the inspector met with the registered manager, four care staff, a visiting professional and thirteen service users. The day care worker was provided with five questionnaires to distribute to service users; five staff members and five relatives for their completion. The questionnaires asked for service user, staff and relatives views regarding the service, and requesting their return to RQIA. Three staff, one relative and three service users' questionnaires were returned to RQIA. The content of the questionnaires is discussed in the main body of the report.

The following records were examined during the inspection:

- Complaints and compliments records
- Accident/untoward incident records
- Staff roster
- RQIA registration certificate
- Staff supervision and appraisal 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.

No areas for improvement were identified at the last care inspection.

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 18 August 2016

The most recent inspection of the establishment was an unannounced care inspection.

6.2 Review of areas for improvement from the last care inspection dated 18 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 care worker confirmed the planned daily staffing levels for the day care centre, and that these levels were subject to regular review to ensure the assessed needs of the service users were met. A review of the staffing roster for weeks commencing 03 July 2017 until 27 July 2017 evidenced that the planned staffing levels were adhered to. Staff who were consulted confirmed that staffing levels met the assessed needs of the service users. Discussion with service users evidenced that there were no concerns regarding staffing levels.

Discussion with the day care worker and review of records evidenced that a newly appointed staff member completed a structured orientation and induction programme at the commencement of their employment. The induction programme included a written record of the areas completed and the signature of the person supporting the new employee. On completion of the induction programme, the employee and the inductor signed the record to confirm completion and to declare understanding and competence.

A competency and capability assessment had been completed for the staff member who was in charge of the centre in the absence of the registered manager. This revealed the staff member had received training and was assessed as competent to undertake their role and responsibilities.

Discussion with staff and review of returned staff questionnaires confirmed that mandatory training and other professional development training was provided. 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 infection prevention and control, dementia awareness, first aid and adult safeguarding training.

The setting's accident and incident records were inspected. Review confirmed incidents were appropriately reported to RQIA. Discussion with staff confirmed the importance of keeping members safe in the setting and staff were aware of potential risks for each individual. Staff asserted that they had the right knowledge and information to prevent harm to the members attending the setting.

The day care worker confirmed that no restrictive practices were undertaken within the day care setting and on the day of the inspection none were observed.

The staff on duty on the day of inspection discussed the needs of the service users they were looking after. They gave a clear description of their needs and how those needs will be met. The staff stated their aim was for service users to enjoy their time in the day service by undertaking stimulating activities and for service users to feel comfortable and safe in the group environment. The staff confirmed that if they had any concerns regarding safe practice they would discuss this with their colleagues and/or the management team who they described as accessible and supportive. Staff confirmed service users are encouraged to give their views, opinions and preferences. In summary, the discussion with staff confirmed they were proactively promoting safe care for service users in this setting.

The registered manager and staff spoken with clearly demonstrated knowledge of their specific roles and responsibilities in relation to adult safeguarding. The registered manager reported there were no suspected, alleged or actual incidents of abuse identified and reported since the last inspection. The staff confirmed that a safeguarding champion was established within the Western Health and Social Care Trust.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling, clean throughout and well decorated. The environment was observed during the inspection and there was evidence of infection prevention and control measures in place such as personal protection equipment which was available for staff, there was evidence that hand hygiene was promoted through notices, hand washing supplies and facilities. There were no obvious hazards to the health and safety of service users, visitors or staff. Fire exits and corridors were observed to be clear of clutter and obstruction. The review of fire drill records confirmed that a fire drill had been undertaken on 20 June 2017. Discussion with staff confirmed they were aware of the evacuation procedure.

Discussion with staff confirmed they were aware of the service users risk assessments and care plans which they needed to be familiar with to ensure the right care was given at the right time, in the right place. Staff described service users safety was paramount and ensured care plans were up to date.

A visiting professional described staff in the setting as vigilant. The visiting professional confirmed staff work well between encouraging independence and caring, and was satisfied risk assessments were being used to avoid unnecessary risks and manage risk.

Three service users completed questionnaires for this inspection. These service users confirmed that they felt safe in the setting. These service users also confirmed that they could talk to staff if they were unhappy or had any issues or concerns and they could tell someone if they were worried about someone being treated badly. The service users reported the setting was comfortable and they knew what to do if the fire alarm sounded.

One relative returned a questionnaire to RQIA post-inspection. The relative identified that they were very satisfied with the safe care in Killadeas Day Care. They stated that their relative is safe and protected from harm, they could talk to staff, the environment is suitable to meet their relative's needs and that they would report concerns to the manager.

Three staff members returned questionnaires to RQIA post-inspection. The staff members confirmed that the care was safe, they had received training in adult safeguarding, there are risk assessments and care plans in place for service users, they would report poor practice and they receive support to fulfil their roles and responsibilities.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff training, supervision and appraisal, knowledge regarding adult safeguarding, infection prevention and control, risk management and the day care setting'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.

Discussion with the day care worker established that staff in the day care setting responded appropriately to and met the assessed needs of the service users.

The inspector reviewed elements of three service users' care files. Care records examined contained an up to date assessment of needs, risk assessments and associated care plans. Care records also reflected the multi-professional input into the service users' health and social care needs and were found to be updated regularly to reflect the changing needs of the service user. 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. Care records evidenced that service users were consulted with choice, views and preference reflected within person centred care plans.

Discussion with staff regarding implementation of the care plans provided assurance they knew each individual's needs. Discussion with service users about what they were doing in the

centre provided assurances they knew what activity they were going to take part in, who would help them and they were happy that their choices and needs were being met in Killadeas Day Centre.

Review of elements of three service users' care records confirmed annual reviews of the individual's day care placement had taken place in the previous year.

It was observed during this inspection that records were stored safely and securely in line with data protection.

Evidence was provided to verify systems were in place to ensure effective communication with service users, their representatives and other key stakeholders. These included information gathering at the referral stage, multi-professional collaboration, reviews, service users' and staff meetings.

The day care worker confirmed that there were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users at appropriate intervals. Records were made available for inspection concerning audits of the environment, staff training, supervision and appraisal and care records and evidenced that actions identified for improvement had been completed.

Discussion with the registered manager and staff confirmed that management operated an open door policy in regard to communication within the day care setting. Staff stated that there was effective teamwork and each staff member knew their role, function and responsibilities.

Staff also confirmed that if they had any concerns, they could raise these with the registered manager. All grades of staff consulted clearly demonstrated the ability to communicate effectively with their colleagues and other health care professionals.

Discussion with the day care worker and review of records evidenced that service user meetings were generally held monthly. The last meeting was held on 21 June 2017 and minutes were made available.

There was information available to staff, service users and representatives in relation to advocacy arrangements.

Observation of practices evidenced that staff were able to communicate effectively with service users.

Three service users' completed questionnaires. These service users confirmed that they were getting the right care at the right time and staff were communicating well with them. They also confirmed that their choices are listened to and they choose the activities they take part in. The service users reported that they had been involved in the annual review of their day centre placement.

One relative returned a questionnaire to RQIA post-inspection. The relative confirmed that they were very satisfied with the effective care. They stated that their relative receives the right care, at the right time, in the right place.

Three staff members returned questionnaires to RQIA post-inspection. The staff members confirmed that service users are involved in their care plan, care plans inform the care provided, monitoring of quality is in place and that staff respond to service users in a timely manner.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to care records, care reviews, audits and communication between service users, staff and other key stakeholders.

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.

The registered manager confirmed that staff in the day care setting promoted a culture and ethos that supported the values of dignity and respect, independence, rights, equality and diversity, choice and consent of the service users.

Discussions with staff regarding the activities they were delivering confirmed the activities were tailored to meet the needs of the service users, as well as promoting their strengths and providing choice.

Observation of care found staff were enabling and supporting service users to engage and participate in meaningful activities of their choice, their hobbies and interests. The service users were observed as accepting of the support and enjoyed friendly conversation and interaction between themselves and staff throughout the inspection. Activities on offer for service users during the inspection were art and craft, puzzles, computer sessions and bowling.

Staff gave examples of activities they had facilitated for service users of all abilities such as mindful colouring, pottery course, reminiscence storytelling and “knitting natters” club.

When staff discussed restrictions that service users might experience they described how important using the least restrictive measure was for each individual and ensuring responses to behaviour were focussed on de-escalation of behaviour or risk and protecting service users’ personal safety. Staff also described they are working to develop positive behaviours and opportunities for service users as they get to know them to help service users develop their independence and positive experiences in day care.

An observation of the lunch time meal confirmed that service users were given a choice in regards to where they preferred to dine, food and fluid choices and the level of help and support requested. Staff treated service users with dignity and respect affording adequate time for service users to make decisions and choices and offered reassurance and assistance appropriately. The food appeared nutritious and appetising. Staff wore appropriate aprons

when serving the lunch time meal. Staff interactions with service users were observed to be compassionate, caring and timely. During discussion staff presented as knowledgeable and informed regarding each service user's dietary needs and preferences. All service users spoken with confirmed that they were satisfied with the choice of meals served and that individual preferences were catered for if requested.

During the observation and discussions staff were observed checking service users were comfortable, that their needs and preferences were being met. If the staff identified someone needed additional support they sensitively and discretely got their attention and accompanied the service user to where they could get more individualised care and privacy. Overall staff were observed supporting service users in a compassionate way, encouraging service users to be involved in their care and promoting their independence.

Staff were aware of each service user's individual needs and were observed to respond positively and warmly. During discussion, staff presented as knowledgeable and informed regarding each service user's needs.

Service users' confirmed their views and opinions were taken into account in matters affecting them. They identified that attending the setting gives them structure to their week and is a place where they are encouraged to be independent.

The staff described they consult with service users informally when they are in the day care setting regarding their needs, preferences and choices.

Service users are consulted on a formal basis via service users' meetings and the annual review of their day care placement.

Service users spoken with during the inspection commented positively in regard to the care they received. Examples of some of the comments made by service users are listed below:

- "I helped plant the flower boxes at the front of the centre."
- "We had sports day yesterday and I won a medal."
- "Staff help me when I need help."
- "I like coming here and I see my friends. The staff are also my friends."
- "This is a good place."

During the inspection the inspector met with four care staff. Some comments received are listed below:

- "I received a very good induction when I started in the centre."
- "The service users are my priority."
- "We offer the service users choice at all times and promote their independence."
- "I am well supported by management. We are offered very good training and my mandatory is up to date."

Discussion with staff found they were aware of their role to promote and maintain service users' independence in the setting. Staff stated every service user was an individual and they adapted their care to the needs of service users, their choices and preferences. Staff identified a key task in their caring role was giving service users time to talk and time to receive quality care, this was observed during the inspection. Staff described respectful, appropriate, timely practices that promoted service users right to privacy and dignity.

Consultation with service users regarding compassionate care and service users' questionnaires identified they were treated with respect and are involved in decisions affecting them, the staff are kind and caring, their privacy is respected, they have choices and are involved in decisions.

One relative returned a questionnaire to RQIA post-inspection. The relative confirmed that they were very satisfied their relative was treated with dignity and respect and involved in decisions affecting their care.

Three staff questionnaires confirmed service users are treated with dignity and respect, encouraged to be independent and their views are sought and acted upon.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the culture and ethos of the day care setting, dignity and privacy, listening to and valuing service users and taking account of the views of service users.

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.

The certificate of registration issued by RQIA was displayed in a prominent position in the day care setting.

The registered manager confirmed that there were management and governance systems in place to meet the needs of service users.

A range of policies and procedures were in place to guide and inform staff. Policies were centrally indexed and retained in a manner which was easily accessible by staff. Staff confirmed that they had access to the day centre's policies and procedures.

Discussion with staff confirmed that they knew how to respond to a range of situations such as responding to issues of dissatisfaction or an adult safeguarding concern. The staff confirmed that there is good communication across the team and clear working together practices. They described the management team as supportive and they knew they could speak to them for guidance or advice. All grades of staff were clear who they report to and what to do if they had a concern about a staff member or service user. Discussions with staff also confirmed that management were responsive to any suggestions or concerns raised.

The staff and management team described they reflect on the service user experience to ensure the service is responsive and innovative in the care they provide. Examples given were from meeting the needs of the service users, to organising courses such as road safety awareness and activities which had provided new experiences and improved outcomes for all service users, regardless of their ability.

Discussion with the registered manager and staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. A review of supervision records confirmed that supervisions were completed for staff on a quarterly basis, or more frequently, and staff appraisals were completed annually. Discussion with staff confirmed that they had received supervision and appraisal accordingly.

Discussion with the day care worker confirmed that staff meetings were held generally quarterly, and records verified this. The last meeting was held on 19 June 2017 and minutes were available. The previous staff meeting had been undertaken on 31 March 2017. The day care worker confirmed that the minutes of staff meetings were made available for staff to consult.

Discussion with staff confirmed they felt well supported by their manager and that they are all asked to contribute to developing and improving practice.

One complaint had been recorded since the previous care inspection which was fully resolved. The complaints record was maintained and made available for inspection. Compliments records were recorded and maintained by staff.

The inspector discussed the monitoring arrangements under Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. A monitoring visit had been undertaken on 28 June 2017. Three monitoring reports were reviewed from March to June 2017. The monitoring officer reported on the conduct of the day care setting.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

Discussion with a visiting professional revealed they knew who the management team were in the setting and in their opinion the centre is well-managed.

Three service users' questionnaires confirmed that the service was managed well. The service users also confirmed that staff had responded well to them and they are asked what they would like to do in the setting. The service users stated that they knew the manager and could talk to the manager if they had any concerns.

The returned relative's questionnaire confirmed that they were very satisfied that the service was managed well and the staff and the manager are approachable, professional and caring.

Three staff questionnaires confirmed that the service is managed well, the service is monitored, and communication between the staff and management is effective.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance arrangements, management of incidents, quality improvement and maintaining good working relationships.

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.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please visit www.rqia.org.uk/webportal or contact the web portal team in RQIA on 028 9051 7500.



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