



The Regulation and  
Quality Improvement  
Authority

Inspector: Dermott Knox  
Inspection ID: IN023784

Killadeas Day Centre  
RQIA ID: 11295  
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**Unannounced Care Inspection  
of  
Killadeas Day Centre**

**09 February 2016**

The Regulation and Quality Improvement Authority  
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)

## 1. Summary of Inspection

An unannounced care inspection took place on 09 February 2016 from 11.15 to 16.15. Overall on the day of the inspection the Day Care Setting was found to be delivering safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Settings Regulations (Northern Ireland) 2007, The Day Care Settings Minimum Standards 2012.

### 1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

### 1.2 Actions/Enforcement Resulting from this Inspection

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

### 1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

## 2. Service Details

Registered Organisation/Registered Person: Western health and Social Care Trust/ Mrs Elaine Way CBE	Registered Manager: Miss Patricia Griffith
Person in Charge of the Day Care Setting at the Time of Inspection: Mrs Claire McKeown, Day Care Worker	Date Manager Registered: 21 June 2013
Number of Service Users Accommodated on Day of Inspection: 11	Number of Registered Places: 20

### 3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards and have been met:

**Standard 5: Care Plan - where appropriate service users receive individual continence promotion and support.**

**Standard 8: Service Users' Involvement - service users' views and comments shape the quality of services and facilities provided by the Day Care Setting**

### 4. Methods/Process

Specific methods/processes used in this inspection include the following:

During the inspection the inspector met with:

- Seven service users in their small group settings
- Two service users on work placements in the centre
- The day care worker in charge of the centre
- The senior day care worker at the conclusion of the inspection
- Two care staff for individual discussions.

The following records were examined during the inspection:

- File records for five service users, including care plans and review reports
- Progress notes for five service users
- Monthly monitoring reports for three months in 2015
- Record of notifications of events,
- Record of complaints
- The statement of purpose
- Minutes of two service user meetings
- Minutes of four staff meetings
- Training records for two staff
- Supervision and appraisal records for two staff
- A sample of two written policy and procedures documents.

### 5. The Inspection

#### 5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an announced care inspection dated 09 March 2015. There were no requirements or recommendations made at that inspection.

## **5.2 Standard 5: Care Plan - Where appropriate service users receive individual continence promotion and support**

### **Is Care Safe?**

Killadeas Day Centre has guidelines, written in June 2015, for staff providing continence care for service users. A copy of the WHSCT Guidelines for the Selection of Continence Supplies/Products was also available. Records for service users provided evidence of personal care needs, including continence care, having been identified for a number of those who attend the centre. Staff members confirmed that they were appropriately trained for personal care work, confident in providing good quality personal care and in respecting each service user's privacy and dignity. Review records for five service users showed that care matters had been addressed to the satisfaction of the service user, a relative and/or a relevant professional.

The toilet and personal care facilities were considered by staff members to be satisfactory for current service user, many of whom have complex care needs. The inspector was unable to ascertain levels of satisfaction, through verbal feedback, from any of the service users receiving care in this centre, but held discussions with two people from another centre who regularly carried out a range of support work in this unit and who each expressed positive feelings about the work they did and the ways in which it was appreciated. They were confident in the staff who worked with them and felt that their involvement was very positive.

The evidence available during this inspection indicates that safe care is provided.

### **Is Care Effective? (Quality of Management)**

Most of the service users had assessed needs with regard to continence promotion and care and the objectives and working methods related to these needs were clearly set out in each of the care/support plans inspected. Assessed needs had been accurately translated into care plan objectives resulting in clarity of objectives and related actions that day centre staff should work toward with each person. In discussions, staff members expressed the view that effective care was provided to meet personal care needs. Progress notes were found to be relevant, well detailed and up to date. The centre is awaiting a WHSCT written policy for continence promotion and care, although the Trust has informed RQIA that the draft policy is at an advanced stage in its approval process. Staff had been provided with appropriate training for this aspect of their work.

Monthly monitoring visits and reports were being completed regularly by a Trust appointed manager and on each visit the monitoring officer met with a number of service users and with staff to ascertain their satisfaction with service outcomes and with the operation of the centre. A sample of the centre's records was examined on each monitoring visit and any requirements arising from the overall visit were set out in an action plan to be reviewed the following month. The management and staff are commended for the thoroughness of their quality assurance processes and for the good evidence of continuous improvement in the centre's operations.

**Is Care Compassionate?**

Discussions with staff and service users, supported by the practice observed throughout the day, confirmed that compassionate care is provided consistently in this centre. Staff members, who were interviewed, spoke of the importance of developing a good understanding of each person's assessed needs and methods of communication. Staff confirmed their confidence in the compassionate care practices of their colleagues within the team. Progress notes, written by staff were well detailed and conveyed professional and caring attitudes toward service users. Observations of staffs' interactions with service users, throughout the inspection period, presented evidence of calm, compassionate care being delivered and of service users responding well with staff within the group settings.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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**5.3 Standard 8: Service Users' Involvement - Service users' views and comments shape the quality of services and facilities provided by the Day Care setting**

**Is Care Safe?**

Staff, who met with the inspector, confirmed that they were confident in the practice of all members of the staff team in their work with service users. There were systems in place to ensure that risks to service users were assessed continually and managed appropriately and this included inputs by community based professionals. Two service users on work placements contributed through discussions to the inspection process and spoke of their enjoyment of being at the centre and the value to them of contributing to the work.

Service users and their representatives/carers were regularly informed of their rights and of the methods available to them of raising concerns or making a complaint, should they be unhappy with any aspect of their care. Advocacy information is displayed in the centre and a suggestion box is available for use. A survey of the views of service users and their representatives was carried out this year by the Trust's Day Care Review Project Manager.

Evidence from discussions, observations and in written records indicated that staff actively seek the views of service users, their representatives and community based professionals, regarding the support programmes in which they participate. Staff presented as knowledgeable of the needs of service users and of methods of working with them. There was a range of evidence to support the view that safe care is provided in Killadeas (Unit 47) Day Centre.

**Is Care Effective? (Quality of Management)**

Killadeas Day Centre and the WHSCT have quality assurance systems in place, through which operations are monitored and staffs' practice is evaluated. Staff members files showed that formal supervision and annual appraisals were taking place regularly. Records of staffs' training were comprehensive and up to date.

Five service users' files were examined and each was found to contain detailed information on the individual and on his or her functioning and assessed needs. Care plans accurately addressed the identified needs in excellent detail. A record was kept of each service user's involvement and progress, with individual activity timetables produced in a clear and mainly pictorial format. Records of annual reviews for each person demonstrated that an evaluation of the overall suitability of the placement had been discussed and agreed. Records of reviews were available in each of the files examined.

There was written evidence to show that staff members were appropriately qualified and trained for their designated roles. Good records of staff meetings provided evidence of a wide range of relevant topics having been discussed. The day care worker, in day to day charge of the centre, completes a detailed monthly health check which is then scrutinised within the monthly monitoring visits. Monitoring reports showed that all of the required aspects of the centre's operations were rigorously checked, with action plans introduced to ensure that any shortcomings would be addressed within a specified timescale. This high quality assurance practice is commendable.

Evidence from discussions with service users and from written records confirmed that service users enjoyed activities, both within the centre and on outings. Within the centre there was well supported involvement in a range of activities, including cookery/baking, arts and crafts, table-top gardening, health and beauty and music, some of which were led by qualified tutors from the regional college of education. The manager and staff worked creatively to involve service users in a variety of experiences, making full use of the activity rooms, including the training kitchen and the two sensory rooms in the centre.

Overall, there was evidence to indicate that the care provided is effective in terms of promoting each service user's involvement, enjoyment and wellbeing.

#### **Is Care Compassionate? (Quality of Care)**

Service users showed their affection and respect for staff and appeared to enjoy the overall service provided in Killadeas Day Centre. The centre was clean, well decorated and in good repair and it was evident that service users were provided with a safe environment in which to take part in an interesting range of activities. There was evidence of positive and purposeful relationships between service users and staff members, who presented as being committed to ensuring that service users were fully supported throughout their attendance at the centre. Interactions with a visiting arts and crafts tutor were seen to be very positive, with many service users involved in making Valentine's Day gifts to take home to friends or family members. In all of the interactions observed, service users were engaged with great respect and encouragement.

Thanks are due to service users who welcomed the inspector to the centre and to the staff for their open and constructive approach throughout the inspection process. Overall there was evidence to confirm that the centre provides a constructive, creative and compassionate care service to those who attend.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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#### 5.4 Additional Areas Examined

Comments on all of the matters examined during this inspection are included in the above sections of this report. There are no requirements or recommendations arising from the inspection.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	<i>Patricia Griffiths</i>	Date Completed	<i>8/3/16.</i>
Registered Person	<i>Leanne Hay</i>	Date Approved	<i>24.03.16</i>
RQIA Inspector Assessing Response	<i>Jessie K... K...</i>	Date Approved	<i>11/04/16</i>

Please provide any additional comments or observations you may wish to make below:

*\*Please complete this document in full and return to [day.care@rqia.org.uk](mailto:day.care@rqia.org.uk) from the authorised email address\**