

# Unannounced Care Inspection Report

## 14 September 2017



## Castlederg Outreach Centre

**Type of Service: Day Care Setting**

**Address: Castlederg District Enterprise Centre, Drumquin Road,  
BT81 7PX**

**Tel No: 02881679828**

**Inspector: Angela Graham  
Laura O'Hanlon**

[www.rqia.org.uk](http://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 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 eighteen service users with a learning disability. The day care setting is open Monday to Friday.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Western Health and Social Care Trust  <b>Responsible Individual(s):</b> Anne Kilgallen (registration pending)	<b>Registered manager:</b> Niall Campbell (registration pending)
<b>Person in charge at the time of inspection:</b> Elish McCann, Day Care Worker	<b>Date manager registered:</b> Niall Campbell (registration pending)
<b>Number of registered places:</b> 18 DCS-LD	

### 4.0 Inspection summary

An unannounced inspection took place on 14 September 2017 from 09.20 to 15.25 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 and risk management that promoted safe care. Regarding effective practice, examples of good practice were found in relation to care records, audits and reviews 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, quality improvement and maintaining good working relationships supporting well led care in the setting.

Two areas for improvement were identified in relation to the adult safeguarding policy and to the provision of an internet and intranet connection within the day care 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 "This is a good place to come", "We went to the library on the bus, I like going to the library", "I like drawing when I am in the centre" and "I went to the café for my dinner, the food is nice".

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.

## 4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	2

Details of the Quality Improvement Plan (QIP) were discussed with Elish McCann, Day Care Worker, 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 23 November 2016

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 23 November 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
- the previous care inspection report and quality improvement plan (QIP)

During the inspection, the inspectors met with the day care worker in charge of the service, two care staff, and eleven service users. The day care worker was provided with six 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 members, three relatives and six 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
- fire safety risk assessment
- fire drill records
- staff training information
- minutes of three staff meetings
- minutes of three service user meetings
- three monthly monitoring reports

Four areas for improvement were identified at the last care inspection. These 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 last care inspection dated 23 November 2016

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
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 28  <b>Stated:</b> First time	The registered provider must ensure the monitoring visits are carried out in compliance with the trusts written agreement with RQIA and a report must be written for the visit carried out.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> A review of three monthly monitoring reports confirmed that these visits had been undertaken in line with the trusts written agreement with RQIA.	
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 23.7  <b>Stated:</b> First time	The registered provider should ensure that copies of the staff duty rotas are retained within the day care setting.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> On the day of inspection copies of the staff duty rotas were available in the day care setting.	

<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Standard 8.3</p> <p><b>Stated:</b> First time</p>	<p>The registered provider should ensure that the minutes of service users' meetings include:</p> <ul style="list-style-type: none"> <li>• The names of those attending;</li> <li>• An agenda;</li> <li>• The outcomes of action taken since the previous meeting;</li> <li>• A summary of discussions;</li> <li>• The action to be taken on service users' comments and suggestions and the name/s of the person/s responsible for taking action on any matters arising.</li> </ul> <p><b>Action taken as confirmed during the inspection:</b> A review of a sample of the minutes of service users meetings evidenced that this area for improvement had been addressed.</p>	<p><b>Met</b></p>
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Standard 9.2</p> <p><b>Stated:</b> Second time</p>	<p>It is recommended that Castlederg Outreach Centre should be provided with connections and equipment to enable the use of intranet, internet and email, as this is now a normal, everyday, communication, research and learning requirement and is culturally appropriate in 2015 for service users attending Castlederg Outreach Centre.</p> <p><b>Action taken as confirmed during the inspection:</b> Discussion with the day care worker confirmed that this area for improvement had not been addressed. The day care worker informed the inspector that due to the rural location of the day care setting some difficulties existed with accessing internet connection however consideration was being given to the purchase of a device that should assist with the provision of internet access. This area for improvement will be stated for a third time within this report.</p>	<p><b>Not met</b></p>

## 6.2 Inspection findings

### 6.3 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 14 August 2017 until 14 September 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.

Observation of the delivery of care at the time of inspection evidenced that service users' needs were met by the number of staff on duty.

A competency and capability assessment had been completed for the staff member who was in charge of the centre in the absence of the manager. Review of the competency and capability assessment confirmed that 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, communication awareness, first aid and adult safeguarding training.

Staff clearly demonstrated the knowledge, skill and experience necessary to fulfil their role, function and responsibility.

Review of a sample of records pertaining to accidents and incidents confirmed that these were appropriately managed. Discussion with staff confirmed the importance of keeping service users 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 service users 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 day care worker and staff spoken with clearly demonstrated knowledge of their specific roles and responsibilities in relation to adult safeguarding and their obligation to report concerns. The day care worker reported there were no suspected, alleged or actual incidents of abuse identified and reported since the last inspection.

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 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 14 August 2017. Discussion with staff confirmed they were aware of the evacuation procedure.

Six 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.

Three relatives returned questionnaires to RQIA post-inspection. The relatives identified that they were satisfied with the safe care in Castlederg Outreach Centre. 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 and risk management.

### **Areas for improvement**

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0



## 6.4 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 inspectors 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.

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 Castlederg Outreach 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.

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, complaints, fire safety, supervision and appraisal and care records and evidenced that actions identified for improvement had been completed.

Evidence was provided to verify systems were in place to ensure effective communication with service users, their representatives and key stakeholders. These included pre-admission information, care reviews, service users and staff meetings.

Discussion with the day care worker 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 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 17 August 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.

Service users spoken with expressed their confidence in raising concerns with the day centre's staff/management. Service users knew the manager.

Six 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.

Three relatives returned questionnaires to RQIA post-inspection. The relatives confirmed that they were 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, audits and reviews and communication between service users, staff and other key stakeholders.

### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

### 6.5 Is care compassionate?

**Patients and clients are treated with dignity and respect and should be fully involved in**

The day care worker 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. Service users were enabled and supported by staff to engage and participate in meaningful activities. They discussed the range of activities they could take part in such as arts and crafts, woodwork and educational courses and the work opportunities afforded to them. The activity programme was noted as developing social, work and education opportunities for service users as well as their hobbies and interests.

Discussion with service users confirmed that they felt their views and opinions were taken into account in all matters affecting them. Service users described feeling informed and involved regarding activity planning, opportunities for work and outings through service user meetings, informal discussions and their individual review meetings.

Discussions with service users along with observations of practice during this inspection confirmed that service users were enabled and supported to engage and participate in meaningful activities e.g. arts and crafts, library visits and sports at the local leisure centre. Observations of service users taking part in activities showed participation was good.

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.

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 like playing basketball in the leisure centre and going to the shops."
- "I work two days a week in the garden centre."
- "I went to the library this morning and got some books."
- "The staff are very good to me. I like them all."
- "I am happy here. The staff painted my nails a lovely colour of pink. I chose the colour."
- "We go out for our dinner and the dinner is always nice."
- "We have meetings and get a newsletter with lots of photographs of all the fun things we do here."

During the inspection the inspectors met with three care staff. Some comments received are listed below:

- "I have attended all the mandatory training. I am registered with the Northern Ireland Social Care Council."
- "We have regular staff meetings and the minutes are available to all staff to read. We can contribute to the meetings."
- "It is my view that the care and support delivered in the centre is excellent."
- "The service users are our priority. We promote independence at every opportunity."

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.

Three relatives returned questionnaires to RQIA post-inspection. The relatives confirmed that they were 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
<b>Total number of areas for improvement</b>	0	0

#### 6.6 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 day care worker 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. The inspectors reviewed a sample of policies and procedures. The review identified the adult safeguarding policy and procedure in place was dated October 2014. The adult safeguarding policy must be reviewed to ensure it reflects the current regional guidance. This was identified as an area for improvement. 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.

Discussion with the day care worker 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 monthly, and records verified this. The last meeting was held on 18 August 2017 and minutes were available.

Previous staff meetings had been undertaken on 31 July 2017 and 03 May 2017. The day care worker confirmed that the minutes of staff meetings were made available for staff to consult.

Three complaints had been recorded since the previous care inspection on 23 November 2016. Discussion with the manager post inspection confirmed that these complaints were appropriately managed. 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 24 July 2017. Three monitoring reports were reviewed from March to July 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.

An area for improvement highlighted in the previous care inspection report in regard to the provision of an internet and intranet connection within the day care setting has not been addressed and is stated for the third time in this report.

Six 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 relatives' questionnaires confirmed that they were 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, quality improvement and maintaining good working relationships supporting well led care in the setting.

### **Areas for improvement**

Two areas for improvement were identified in relation to the adult safeguarding policy and to the provision of an internet and intranet connection within the day care setting.

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of areas for improvement</b>	0	2

## 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Elish McCann, Day Care Worker, 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 to via Web Portal for assessment by the inspector.

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](http://www.rqia.org.uk/webportal) or contact the web portal team in RQIA on 028 9051 7500.

Quality Improvement Plan	
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 13.1  <b>Stated:</b> First time  <b>To be completed by:</b> 31 December 2017	The registered provider should review the adult safeguarding policy to ensure it reflects the current regional guidance.  Ref: 6.7
	<b>Response by registered person detailing the actions taken:</b> A review of the adult safeguarding policy will be taken forward.
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 9.2  <b>Stated:</b> Third time  <b>To be completed by:</b> 31 December 2017	It is recommended that Castlederg Outreach Centre should be provided with connections and equipment to enable the use of intranet, internet and email, as this is now a normal, everyday, communication, research and learning requirement and is culturally appropriate in 2015 for service users attending Castlederg Outreach Centre.  Ref: 6.7
	<b>Response by registered person detailing the actions taken:</b> The necessary steps are being taken forward to establish the funding required to install IT connections at the centre to enable clients to make use of the internet when attending day care.

***\*Please ensure this document is completed in full and returned to RQIA's Office\****





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