



The Regulation and  
Quality Improvement  
Authority

Age NI  
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Portaferry Resource Centre, Ann Street  
Portaferry  
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**Unannounced Care Inspection  
of  
Age NI,  
Portaferry Resource Centre**

**21 August 2015**

The Regulation and Quality Improvement Authority  
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## 1. Summary of Inspection

An unannounced care inspection took place on 21 August 2015 from 10.30 to 13.00. 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
<b>Total number of requirements and recommendations made at this inspection</b>	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

<b>Registered Organisation/Registered Person:</b> Age NI/Miss Linda Robinson	<b>Registered Manager:</b> Mrs Claire Braniff
<b>Person in Charge of the Day Care Setting at the Time of Inspection:</b> Mrs Claire Braniff	<b>Date Manager Registered:</b> Registration pending
<b>Number of Service Users Accommodated on Day of Inspection:</b> 10	<b>Number of Registered Places:</b> 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 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:

Prior to inspection the following records were analysed: incidents notification which revealed no incidents had been reported and RQIA; notes regarding this day care setting which not did reveal any concerns; the last inspection report; and QIP which revealed two requirements and five recommendations had been made.

During the inspection the inspector met with the ten service users, the registered manager and two staff. There was no visiting professionals or representatives/family members available during the inspection. Four service users and three staff completed questionnaires.

The following records were examined during the inspection: two service users individual care records including care plans, assessments and review documentation; the complaints / issue of dissatisfaction record which revealed no complaints had been made since the last inspection; and a sample of the settings incidents and accident records.

#### 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 2 April 2014. The completed QIP was returned and approved by the care inspector.

##### 5.2 Review of Requirements and Recommendations from the last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 10, 21 & schedule 2:5	The registered person must take immediate action to ensure the acting manager of this day care setting has current and valid registration with the appropriate professional regulatory body for example NISCC and submit confirmation of registration to RQIA on the returned QIP.	Met
	<b>Action taken as confirmed during the inspection:</b> Inspector confirmed Claire Braniff is registered with NISCC.	

<p><b>Requirement 2</b></p> <p>Ref: Regulation 19 (1) (a) and schedule 4.2</p>	<p>The acting manager must make appropriate arrangements for service users' individual records to contain a photo as required in regulation. If a service user does not want this to be in their individual record, this must be stated in the file and signed by the service user.</p> <p><b>Action taken as confirmed during the inspection:</b> Inspector confirmed photos were available on individual files at the time of inspection.</p>	<p><b>Met</b></p>
<p><b>Previous Inspection Recommendations</b></p>		<p><b>Validation of Compliance</b></p>
<p><b>Recommendation 1</b></p> <p>Ref: Standard 7.1; 7.2; 7.3</p>	<p>The acting manager should make appropriate arrangements to improve service users' knowledge and awareness of the information kept about them in the day care setting. For example what is kept; how this is kept confidentially and the recording practices in the day care setting. Consent to information should also be recorded; the service could use the service user's guide/service user agreement to achieve this.</p> <p><b>Action taken as confirmed during the inspection:</b> Service users are advised regarding records kept in the service user's guide, in discussions at the induction stage and there is a notice detailing this in the day centre which is accessible to service users.</p>	<p><b>Met</b></p>
<p><b>Recommendation 2</b></p> <p>Ref: Standard 7.4</p>	<p>The acting manager must put in place arrangements to progress service user reviews for this year, evidence of contact with social workers and care managers should be improved.</p> <p><b>Action taken as confirmed during the inspection:</b> The manager explained she had continued to contact care managers and progress reviews.</p>	<p><b>Met</b></p>

<p><b>Recommendation 3</b></p> <p>Ref: Standard 7.4 &amp; 7.5</p>	<p>The acting manager must put in place arrangements to improve recording in the individual records so it is more analytical. This will record what each service user enjoys about their day in the setting, what it is about an activity that makes it enjoyable and how the day care setting is improving outcomes for service users.</p> <p><b>Action taken as confirmed during the inspection:</b> Recording for each individual service user was available and up to date at the time of inspection.</p>	<p><b>Met</b></p>
<p><b>Recommendation 4</b></p> <p>Ref: Standard 17.1</p>	<p>The acting manager should complete with staff that cover her post, in her absence a competency assessment to ensure they can competently and confidently undertake their role and responsibility in the manager's absence. Any gaps identified should be addressed through training, supervision, appraisal etc.</p> <p>There should also be evidence of any delegation of tasks which must clearly identify the monitoring of arrangements in place and evidence effectiveness of arrangements.</p> <p><b>Action taken as confirmed during the inspection:</b> A competency assessment was in place at the time of the inspection.</p>	<p><b>Met</b></p>
<p><b>Recommendation 5</b></p> <p>Ref: Standard 17.1</p>	<p>The registered person should make suitable arrangements for the regulation 28 reports to analyse the staffing arrangements in place for the month being inspected and the monitoring officer's view regarding: the effectiveness of staffing arrangements; and compliance with regulations and standards regarding the same.</p> <p><b>Action taken as confirmed during the inspection:</b> Monitoring reports were available and up to date at the time of inspection.</p>	<p><b>Met</b></p>

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

#### **Is Care Safe?**

Age NI Portaferry provides day care to service users who are independent. If a service user's needs change while they are attending this centre the manager will contact the referrer for a re assessment to ensure this setting can still meet their needs. Continence or intimate care is not provided by staff at this setting. Staff in the setting discuss continence needs with service users during the assessment, care plan and review processes and if they observe any changes. This is to identify need and ensure staff can support the service user in this setting. Staff said they are aware service users like to keep their intimate care needs private therefore as a minimum they assure them they can request products if needed and they can be referred to the continence team if they have any concerns.

Three staff returned inspection questionnaires that reported staff are very satisfied with the training they had received; they are very satisfied with support from the multidisciplinary team; access to equipment; and very satisfied the environment is appropriate to meet service user's needs.

Overall the inspection concluded staff have a proactive approach to ensuring continence needs are met in a safe way in this day care setting.

#### **Is Care Effective?**

Review of two service users' files and reading a sample of the policy and procedures in the settings file provided assurance information and guidance is available to staff regarding meeting continence needs and promotion of the same. Discussion concluded staff know how to effectively identify need and the know how to seek guidance if required from procedures, professional literature or other professionals. Training for staff to date had included infection control, manual handling and vulnerable adult training which had ensured staff care for service users safely and effectively.

Four service users responded in questionnaires they feel very satisfied that staff know how to care for them. Three staff responded in inspection questionnaires they are very satisfied they have access to supplies which support service users and access to PPE. Finally staff reported they have sufficient knowledge, skills and experience to support service users who attend the day centre.

The inspection concluded care provided by staff is effective in promoting and supporting continence needs.

#### **Is Care Compassionate?**

Observation of the care in this day care setting revealed staff engage with service users regarding activities, outings and day to day news. Observation revealed staff took time to listen to service user's preferences, wishes and feelings which should ensure care is responsive to need.

Three staff reported in the questionnaires that they are very satisfied service users are afforded privacy, dignity and respect at all times; they are encouraged to retain their independence and make choices; they are satisfied they have time to talk to and listen to service users; and the care provided is based on service users' needs and wishes.

Four service users reported in the questionnaire's they are very satisfied their views and opinions are sought regarding the day centre.

The inspection concluded staff approached meeting service users' needs with compassion and ensured service users were given time to talk openly or privately.

### Areas for Improvement

No areas of improvement were identified regarding the service users care plan - Where appropriate service users receive individual continence promotion and support.

<b>Number of Requirements:</b>	<b>0</b>	<b>Number of Recommendations:</b>	<b>0</b>
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## 5.4 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?

The inspector observed the staff actively seeking service users' views during their time in day care and incorporating their views and indications of how they feel into practice. This will ensure that choices, issues of concern, complaints are acted on. Records of service user meetings and service user's individual records also indicate personal choice and preferences are encouraged and are recorded.

Four service users completed inspection questionnaires which stated they are very satisfied that they feel safe and secure in the day centre; and the staffing levels are appropriate. One service user commented "I look forward to coming".

Three staff responded in the inspection questionnaires that they were very satisfied with the training they had received which included mandatory training and training relevant to their role with this service user group.

The inspection confirmed staff communicate effectively with service users and use this information to ensure care is safe and responsive to need.

### Is Care Effective

The inspector was satisfied there was a range of methods and processes where service users' and their representatives' views are sought and recorded; and the recording includes details of the action taken. Examples of record viewed were day to day communication in day care; meetings with service users; informal and planned discussions with service user representatives and relatives; annual questionnaires.

The inspector observed service user's views being sought which enabled service users to be involved in decisions in the day centre and given opportunities to influence the running of the

day care setting on an informal basis. Four inspection questionnaires' returned by service users reported service users feel very satisfied that staff respond to their needs.

The inspection confirmed the care in this setting effectively seeks service user's views, opinions and preferences and this information is used to inform day care delivery.

### **Is Care Compassionate?**

Discussion with the manager; staff and review of records evidenced the service users are listened and responded to by staff, who are knowledgeable about individual service users' communication needs. Observation showed staff speaking to each service user as an individual, giving them time and encouraging communication. This was a person centred approach to communication with service users. Service users said they feel at ease speaking to staff and they feel staff welcome their comments, suggestions and preferences.

Four service users completed questionnaires for this inspection and they stated service users are very satisfied with the care and support they receive; and that their views and opinions are sought regarding the service. One service user stated "staff are very good".

Three staff questionnaire's stated they were very satisfied regarding the following questions: service users are involved in and are given opportunities to influence the running of the centre; systems are in place to seek service users views; management action service users suggestions, issues or complaints; and service users are kept informed regarding any changes. One staff member wrote "I am very happy in my role at Age NI Portaferry. I feel clients receive all the help they need and I feel clients are happy in this resource centre".

In conclusion this inspection confirmed the staff uses a compassionate approach to gather service users views, opinions and preferences.

### **Areas for Improvement**

No areas of improvement were identified regarding service users' involvement - Service users' views and comments shape the quality of services and facilities provided by the Day Care setting.

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

### **5.5.1. Service users files**

The inspector reviewed two service user individual records. They contained evidence of file audit; about me assessment; general assessment; care planning documentation; activity records; risk assessment; review documentation and minutes. The review of these files did not identify any improvements in this regard.

### **5.5.2. Complaints**

The complaints record was reviewed by the inspector and this revealed no complaints had been made in 2014 or in 2015.



## i.5.3. Incidents

The inspector sampled entries made in this record from the date of the last inspection to the day of the inspection and this did not reveal any improvements or concerns that require further discussion.

i.0 No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	<i>claire braniff</i>	Date Completed	18/11/15
Registered Person	<i>L. B. Vere</i>	Date Approved	<i>20/10/15</i>
RQIA Inspector Assessing Response	<i>Seamus</i>	Date Approved	<i>24/11/15</i>

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

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

