

Unannounced Care Inspection Report 4 May 2017











Gortin Outreach Centre

Type of service: Day Care Service

Address: 63 Main Street, Gortin, Omagh, BT79 8NH

Tel no: 028 8164 8867 Inspector: Angela Graham

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of Gortin Outreach Centre took place on 4 May 2017 from 09.20 hours to 15.15 hours.

The inspection sought to assess progress with any issues raised during and since the last care inspection and to determine if the day care setting was delivering safe, effective and compassionate care and if the service was well led.

Is care safe?

On the day of the inspection Gortin Outreach Centre was found to be delivering safe care. There was positive feedback from four service users about the delivery of safe care in the day centre. Observations of care practices showed there was a culture of ensuring service users were safe and protected from harm. Staff were knowledgeable of their specific roles and responsibilities in relation to adult safeguarding.

The staff in Gortin Outreach Centre were observed caring for a range of service users' needs. The staffing levels were responsive to service user's needs, welfare and safety.

A requirement has been made in regard to the environment.

Relatives and a staff member who completed and returned questionnaires to RQIA following the inspection indicated satisfaction and that the care provided was safe. No issues or concerns were raised or indicated.

Is care effective?

On the day of the inspection it was established that the care in Gortin Outreach Centre was effective. Observations of staff interactions with service users and discussion with four service users evidenced this. There were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users.

The inspection of elements of three service users care records, incident recording, discussion with four service users and staff concluded care was being delivered at the right time, in the right place, and with the best outcome. Staff demonstrated a high level of commitment to ensure service users received the right care at the right time. Staff spoken with understood their role, function and responsibilities. Staff also confirmed that if they had any concerns, they could raise these with the manager.

Relatives and a staff member who completed and returned questionnaires to RQIA following the inspection indicated satisfaction and that the care provided was effective. No issues or concerns were raised or indicated.

Is care compassionate?

On the day of the inspection Gortin Outreach Centre was found to be delivering compassionate care. The inspection of records, observations of practice and discussions with staff and four service users confirmed that service users were being treated with compassion, dignity and respect. Furthermore they were encouraged by staff to be involved in decisions affecting their care and support.

Staff were observed responding to service users' needs and requests promptly and professionally. Discussion with four service users and observation provided evidence that service users were listened to, valued and communicated with in an appropriate manner.

Relatives and a staff member who completed and returned questionnaires to RQIA following the inspection indicated satisfaction and that the care provided was compassionate. No issues or concerns were raised or indicated.

Is the service well led?

On the day of the inspection there was evidence of effective leadership and management in Gortin Outreach Centre and a culture focused on the needs of service users. Staff confirmed that they were well supported in their roles and that good training is provided.

The discussion with staff and service users regarding the management arrangements confirmed they were informed regarding the management arrangements and the staffs role and responsibilities.

A restated recommendation in the report of the previous care inspection in regard to the provision of an internet connection within the day care setting has not been addressed and is stated for the third time in this report.

Relatives and a staff member who completed and returned questionnaires to RQIA following the inspection indicated satisfaction and that the service was well led. No issues or concerns were raised or indicated.

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

1.1 Inspection outcome

| | Requirements | Recommendations |
|---|--------------|-----------------|
| Total number of requirements and | 1 | 1 |
| recommendations made at this inspection | Į | I |

Details of the Quality Improvement Plan (QIP) within this report were discussed with Geraldine McKenna, senior 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.

1.2 Actions/enforcement taken following the most recent care inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent inspection on 07/07/16.

2.0 Service details

| Registered organisation/registered person: Western Health and Social Care Trust, Elaine Way, CBE | Registered manager: Niall Campbell (registration pending) |
|--|--|
| Person in charge of the service at the time of inspection: Niall Campbell, manager Geraldine McKenna, senior day care worker | Date manager registered: Niall Campbell, application received - registration pending |

3.0 Methods/processes

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)

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

- Discussion with the manager
- Discussion with the senior day care worker
- Discussion with two care staff
- Discussion with four service users
- Examination of records
- File audits
- Evaluation and feedback

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. One staff member and three relatives' 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 record
- Staff roster
- 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

4.0 The inspection

4.1 Review of requirements and recommendations from the last care inspection dated 7 July 2016.

| Last care inspection recommendations | | Validation of compliance |
|--|--|--------------------------|
| Recommendation 1 Ref: Standard 9.5 Stated: Second time | It is recommended that an internet connection should be provided for the centre, to enhance communications and to provide service users with learning opportunities in the aspect of daily living. | |
| | Action taken as confirmed during the inspection: The manager 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 recommendation has not been addressed and has been stated for a third time in this report. | Not Met |

4.2 Is care safe?

The senior 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 13 April 2017 until 4 May 2017 evidenced that the planned staffing levels were adhered to.

Staff consulted confirmed that staffing levels met the assessed needs of the service users. The senior day care worker confirmed that staffing levels were subject to regular review to ensure the assessed needs of the service users were met. Observation of the delivery of care evidenced that service users' needs were met by the numbers of staff on duty.

The senior day care worker and staff confirmed that competency and capability assessments were undertaken for any person who is given the responsibility of being in charge of the centre for any period in the absence of the manager. Records of competency and capability assessments were retained and examined during the inspection.

Discussion with staff and review of a returned staff questionnaire 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 fire safety, first aid, autism awareness and safeguarding vulnerable adults training.

The senior day care worker confirmed that the registration status of staff was monitored to ensure all staff were registered with the Northern Ireland Health and Social Care Council (NISCC).

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 senior day care worker and staff spoken with clearly demonstrated knowledge of their specific roles and responsibilities in relation to adult safeguarding. The senior day care worker stated that there were no current or ongoing safeguarding concerns.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout. A number of areas within the day centre required repainting as the paintwork was marked and chipped. Also the floor covering on the ground floor presented with evidence of wear and areas were torn. A requirement has been made to address these issues.

There was evidence that hand hygiene was promoted through notices, handwashing 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.

Three relatives returned questionnaires to RQIA post inspection. The relatives identified that they were satisfied with the safe care in Gortin 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.

A staff member returned a questionnaire to RQIA post inspection. The staff member confirmed that the care was safe, they had received training in safeguarding vulnerable adults, 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 for improvement

One area of improvement was identified this related to improving the environment.

| | Number of requirements | 1 | Number of recommendations | 0 | |
|--|------------------------|---|---------------------------|---|--|
|--|------------------------|---|---------------------------|---|--|

4.3 Is care effective?

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 day care worker informed the inspector since the previous inspection she had continued to develop opportunities engaging with community groups and ensuring service users'

outcomes are improved. The inspector reviewed elements of three service users' care records and viewed evidence in the assessment, care planning and attendance recording that staff had worked proactively with service users to improve outcomes for them.

Review of elements of three service users' care records reflected there are risk assessments and care plans in place. There was evidence that risk and other assessments informed the care planning process. There was also recorded evidence of multi-professional collaboration. Service users and/or their representatives were encouraged and enabled to be involved in the assessment and care planning and review process. Care recording for every five attendances was being maintained.

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.

Discussion with service users and observation of care evidenced service users were encouraged to be independent in the setting in terms of their choices and preference. Service users were observed seeking and accepting assistance from staff as necessary. Staff responded in a subtle way that protected service users' dignity and privacy, they were observed to be caring and responsive to need.

Staff discussed the arrangements in place to ensure care was effective, for example training, good communication and knowing service users' including their needs and care plan.

The senior 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, appraisal, accidents/incidents 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 senior 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 senior day care worker and review of records evidenced that service user meetings were generally held monthly. The last meeting was held on 27 April 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 relatives returned questionnaires to RQIA post inspection. The relatives confirmed that they were satisfied with the effective care. They stated that their relative gets the right care, at the right time, in the right place. They also confirmed that they are satisfied with communication with staff, their awareness of their relative's needs, preferences and choices and that these are incorporated into the care they receive and that they are involved in their relative's annual review.

A staff member returned a questionnaire to RQIA post inspection. The staff member 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 for improvement

No areas for improvement were identified during the inspection.

| Number of requirements | 0 | Number of recommendations | 0 |
|------------------------|---|---------------------------|---|
| | - | | - |

4.4 Is care compassionate?

The senior 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.

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. 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 go to work a day a week doing gardening."
- · "Good place."
- "I like it here."
- "Staff are very good and kind."
- "I like working in the poly tunnel here and growing vegetables."

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.

A staff member's returned questionnaire confirmed service users are treated with dignity and respect, encouraged to be independent and their views are sought and acted upon.

Areas for improvement

No areas for improvement were identified during the inspection.

| Number of requirements | 0 | Number of recommendations | 0 |
|------------------------|---|---------------------------|---|
| | • | 1141114 | |

4.5 Is the service well led?

The senior day care worker provided examples of management and governance systems that were in place which ensured the setting was safe, well managed and service users' needs are met in compliance with The Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards. Examples included the annual quality reporting, bimonthly monitoring visits, supervision arrangements, the management of training and audit arrangements.

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.

A restated recommendation in the report of the previous care inspection in regard to the provision of an internet connection within the day care setting has not been addressed and is stated for the third time in this report.

Discussion with staff confirmed that they knew how to respond to a range of situations such as responding to issues of dissatisfaction or a vulnerable adult 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 senior day care worker and staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. A schedule for annual staff appraisals and staff supervision was maintained and was available for inspection.

A review of the schedule 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 senior day care worker confirmed that staff meetings were held generally monthly, and records verified this. The last meeting was held on 25 April 2017 and minutes were available. The previous staff meeting had been undertaken on 28 March 2017. The senior day care worker confirmed that the minutes of staff meetings were made available for staff to consult.

The senior day care worker confirmed that no complaints were received since the previous care inspection on 07 July 2016. Compliments records were also 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 25 March 2017. Three monitoring reports were reviewed from November 2016 to March 2017. The monitoring officer reported on the conduct of the day care setting and any improvements required were put into an action plan.

The certificate of registration issued by RQIA was displayed in a prominent position in 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.

Based on the findings of this care inspection RQIA concluded that the day care service was well led. There was evidence of good leadership, robust and effective management and governance systems in Gortin Outreach Centre which were focused on the needs of service users.

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. They were informed about the complaints process and they have a copy of the service user's guide.

A staff member's returned questionnaire confirmed that the service is managed well, the service is monitored, and communication between the staff and management is effective.

Areas for improvement

A recommendation has been stated for the third time in regard to the provision of an internet connection within the day care setting.

| Number of requirements | 0 | Number of recommendations | 1 |
|------------------------------|---|---------------------------|---|
| | | | |
| 5.0 Quality improvement plan | | | |

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Geraldine McKenna, senior day care worker, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences.

It is the responsibility of the registered provider to ensure that all requirements and recommendations contained 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 service. 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.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on The Day Care Setting Regulations (Northern Ireland) 2007.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Day Care Settings Minimum Standards 2012. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions to be taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to day.care@rqia.org.uk for assessment by the inspector.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Statutory requirements

Requirement 1

Ref: Regulation 26 (2) (d)

Stated: First time

To be completed by: 31 October 2017

The registered person shall, having regard to the number and needs of the service users, ensure that all parts of the day care setting are kept clean and reasonably decorated. The following maintenance issues must be addressed:

- Repaint the identified areas within the day centre (paintwork marked /chipped).
- Replace the torn/damaged floor covering on the ground floor of the day centre.

Response by registered provider detailing the actions taken:

A request for repainting of marked/chipped paint was submitted to estates services on the 31/5/17 request number 1092409. A request for the replacement of torn/damaged floor covering has been submitted to estates service on 31/5/17 request number 1092411.

Recommendations

Recommendation 1

Ref: Standard 9.5

Stated: Third time

To be completed by: 30 September 2017

It is recommended that an internet connection should be provided for the centre, to enhance communications and to provide service users with learning opportunities in the aspect of daily living.

Response by registered provider detailing the actions taken:

A minor capital works proforma had been forwarded to Mrs Rosaleen Harkin assistant director of the learning disability programme on the 1/9/15, Mrs Harkin had approved the Minor capital works form on the 4/9/15 the service in Gortin is still awaiting a date from the estates department as for this work to be completed. A further request was submitted to estates service on the 12/8/16 requesting this work. A further request was submitted to estates services on 31/5/17.





The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower 5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email info@rqia.org.uk

Web www.rqia.org.uk

@RQIANews