

Unannounced Care Inspection Report 14 February 2020



Strule-Erne Day Care Centre

Type of Service: Day Care Service

**Address: c/o Tennis Pavillion, Bawnacre Centre,
Irvinestown, BT94 1EE**

Tel No: 02868622403

Inspector: Angela Graham

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

Strule-Erne Day Care Centre is a day care setting with up to 24 places that provides care and day time activities to service users with a learning disability. The centre is open for service users Monday, Wednesday and Friday and is operated by Strule-Erne Day Care.

3.0 Service details

Organisation/Registered Provider: Strule-Erne Day Care Responsible Individual: Mary Sharkey	Registered Manager: Laura Kelly
Person in charge at the time of inspection: Laura Kelly	Date manager registered: Laura Kelly – 1 April 2011
Number of registered places: 24	

4.0 Inspection summary

An unannounced inspection took place on 14 February 2020 from 10.50 to 14.15.

This inspection was underpinned by The Health and Personal Social Services (Quality Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the establishment was delivering safe, effective and compassionate care and if the service was well led.

As a public-sector body, RQIA have a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care settings, we are committed to ensuring that the rights of people who receive services are protected. This means we will seek assurances from providers that they take all reasonable steps to promote people's rights. Users of day care settings have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted. All day care settings should safeguard and promote service user choices and freedoms as they relate to the range of services being provided.

Evidence of good practice was found in relation to AccessNI and staff members' registrations with the Northern Ireland Social Care Council (NISCC). There was also evidence of good practice in regard to providing meaningful activities to service users and maintaining good working relationships.

One area for improvement was identified in regard to the staff duty roster.

Service users' comments are included throughout the report.

The findings of this report will provide the day care setting with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

The inspector would like to thank the manager, service users, visiting professional and staff for their support and co-operation throughout the inspection process.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	1

Details of the Quality Improvement Plan (QIP) were discussed with Laura Kelly, manager, 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 19 November 2018

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 19 November 2018.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- the registration details of the day centre
- information and correspondence received by RQIA since the last inspection
- incident notifications which highlighted that no incidents had been reported to RQIA since the care inspection on 19 November 2018
- unannounced care inspection report and QIP dated 19 November 2018.

During the inspection, the inspector met with the manager, three support workers and a visiting professional. Introductions were made to all service users while walking around the setting with individual interaction with seven service users.

Ten service user and/or relatives' questionnaires were provided for distribution; three service user/relatives questionnaires were returned to RQIA within the timeframe for inclusion in this report.

All respondents indicated that they were either very satisfied or satisfied that the care being provided to service users was safe, effective, compassionate and well led. Respondents made the following comments:

- "Excellent service in all aspects."
- "All staff very caring and considerate and we are always well informed."

At the request of the inspector, the manager was asked to display a poster within the day centre. The poster invited staff to provide their views electronically to RQIA regarding the quality of service provision; one response was received. The respondent indicated that they were very satisfied that the care being provided to service users was safe, compassionate and well led and satisfied that the care being provided to service users was effective.

The inspector requested that the manager place a 'Have we missed you' card in a prominent position in the day centre to allow service users, relatives and staff who were not available on the day of the inspection to give feedback to RQIA regarding the quality of service provision. No responses were received.

An RQIA information leaflet 'How can I raise a concern about an independent health and social care service' was also provided to be displayed in the day care setting.

A range of documents relating to the service were reviewed during the inspection and are referred to within the body of the report.

One area for improvement identified at the last care inspection was reviewed and assessment of compliance recorded as met.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 19 November 2018

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

The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 19 November 2018

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
Area for improvement 1 Ref: Regulation 16 (1) Stated: First time To be completed by:	The registered person, where appropriate, shall ensure that a written care plan is prepared in consultation with the service user or the service user's representative as to how the service user's needs in respect of day care are to be met.	Met

31 March 2019	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. The inspector reviewed three service users' care plans and these records provided comprehensive information regarding the care and support needs of the service users.	
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6.3 Inspection findings

The manager described the staffing levels which have been assessed as necessary to provide a safe service in the setting. Assurances were provided to the inspector that sufficiently qualified, competent and experienced persons are working at all times to meet the assessed needs of the service users, taking into account the size and layout of the premises, the number of service users accommodated, fire safety requirements and the statement of purpose. A review of the staffing roster for weeks commencing 30 December 2019 until 14 February 2020 evidenced that the planned staffing levels were adhered to.

Review of the staff duty roster identified that care staff shifts were recorded as 1 denoting working and a dash, denoting off work. It was difficult for the inspector to ascertain the hours worked by care staff. The staff duty roster should explicitly specify the time each shift commences and concludes. This has been identified for an area for improvement.

Discussions with staff, a visiting professional and service users confirmed that they felt there were sufficient staff to ensure the safety of service users in the day centre. Observation of the delivery of care at the time of inspection evidenced that service users' needs were effectively met by the number of staff on duty.

There were arrangements in place to ensure that staff are registered with the Northern Ireland Social Care Council (NISCC). Information regarding registration details and renewal dates were maintained and available to the inspector. The manager confirmed that all staff are currently registered with NISCC.

The manager advised that one staff member had been recruited since the previous care inspection. The manager confirmed that staff employment records were held within the organisations human resources department and that all appointments were made in compliance with relevant legislative requirements and trust policy and procedures. The inspector received written confirmation from the responsible person, post inspection, also confirming this matter.

A review of activity timetables, photographs and craft work on display in the centre evidenced that service users are enabled and supported to engage and participate in a wide range of meaningful activities such as arts and crafts, cookery, health and beauty, social events, educational opportunities, hobbies and interests. On the day of inspection service users had a visit from a tutor from the local college to assist with wood work. Service users who were spoken with confirmed they enjoyed this activity and were looking forward to taking the end product home.

Discussion with staff evidenced that they were knowledgeable regarding service users' individual needs. Staff also demonstrated awareness of the need for person centred interventions which facilitate engagement with service users and promote effective communication and social engagement. Observations of staff practice on the day of inspection evidenced that they were confident and effective in their communication with service users and adapted their communication methods as necessary, with individual service users depending on their assessed needs. Staff were observed to be vigilant in responding to nonverbal cues as well as verbal communications. The inspector observed interventions that were proactive and timely.

Discussions with the manager and staff described positive working relationships in which issues and concerns could be freely discussed; staff reported they were confident that they would be listened to. In addition, staff confirmed that they felt supported by management. Staff demonstrated that they had knowledge of their role, function and responsibilities and they had no concerns regarding the practice of any of their colleagues.

Discussions with the manager and staff confirmed that there were systems in place to monitor staff performance and ensure that staff received appropriate support and guidance. Staff spoken with during the inspection confirmed the availability of continuous update training alongside supervision and appraisal processes and an open door policy for discussions with the manager.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout. Discussion with the manager and observation of the environment confirmed that furniture, aids and appliances were fit for purpose for the needs of the service users.

Service users' comments:

- "I come three days per week and I like the centre. Staff look after me well."
- "I am new and staff helped me get used to the centre. I am happy coming here."
- "I like doing woodwork and I made a stool in the class."
- "We get to choose what we do when we are here."
- "I can't think of anything in the centre that we haven't got. If I needed anything I would ask Laura."
- "The girls are always around if you need anything. The dinner was good and I always get lots to eat."

Professional's comments:

- "Care and attention excellent."
- "I feel the centre is well managed."
- "Good communication."

Staff comments:

- "I seek the service users' views every day around lunch, drinks, activities and any other relevant decisions."
- "Every service user's care and activity programme is individual to them."
- "Staffing levels meet the service users' assessed needs."

- “We are a small staff team and work very well as a team. Regular staff meetings take place.”
- “Care is effective and individual.”
- “I am fully aware of my responsibility under adult safeguarding. I have had the training”

Areas of good practice

Evidence of good practice was found in relation to AccessNI and staff members’ registrations with the Northern Ireland Social Care Council (NISCC). There was also evidence of good practice in regard to providing meaningful activities to service users and maintaining good working relationships.

Areas for improvement

One area for improvement was identified in regard to the staff duty roster.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

An area for improvement identified during this inspection is detailed in the QIP. Details of the QIP were discussed with Laura Kelly, manager, 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

An area for improvement has 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 via Web Portal for assessment by the inspector.



A completed Quality Improvement Plan from the inspection of this service has not yet been returned.

If you have any further enquiries regarding this report please contact RQIA through the e-mail address info@rqia.org.uk .

Quality Improvement Plan

Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012

Area for improvement 1 Ref: Standard 23.7 Stated: First time	It is recommended that the staff duty roster should clearly indicate the time that each shift commences and concludes. Ref: 6.3
To be completed by: Immediate and ongoing	Response by registered person detailing the actions taken:



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