

Unannounced Care Inspection Report 24 June 2016



Strule-Erne Day Care Centre

Type of Service: Day Care Setting

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

Tel No: 028 6862 2403 Inspector: Angela Graham

1.0 Summary

An unannounced inspection of Strule-Erne Day Care Centre took place on 24 June 2016 from 10.00 to 16.10 hours.

The inspection sought to assess progress with any issues raised during and since the previous 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 Strule-Erne Day Care Centre was found to be delivering safe care. There was very positive feedback from all service users, spoken with, 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. No areas for quality improvement relating to safe care were identified during this inspection.

Is care effective?

On the day of the inspection it was assessed that the care in Strule-Erne Day Care Centre was effective. Observations of staff interactions with service users and discussions with a total of 11 service users evidenced this. There were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users. No areas for quality improvement relating to effective care were identified during this inspection.

Is care compassionate?

On the day of the inspection Strule-Erne Day Care Centre was found to be delivering compassionate care. Observations of care delivery evidenced that service users were treated with dignity and respect. Staff were observed responding to service users' needs and requests promptly and professionally. Discussions with service users provided evidence they were listened to, valued and communicated with in an appropriate manner. No areas for quality improvement were identified.

Is the service well led?

On the day of the inspection there was evidence of effective leadership and management in Strule-Erne Day Care 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.

This inspection was underpinned by The Day Care Setting Regulations (Northern Ireland) 2007, the Day Care Settings Minimum Standards 2012 and previous inspection outcomes and any information we have received about the service since the previous inspection.

1.1 Inspection outcome

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

This inspection resulted in no requirements or recommendations being made. Findings of the inspection were discussed with Mrs Mary Sharkey, Responsible Person and Mrs Laura Kelly, Registered Manager as part of the inspection process and can be found in the main body of the report.

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

1.2 Actions/enforcement taken following the most recent type e.g. care inspection

There were no further actions required to be taken following the most recent inspection.

2.0 Service details

| Registered organisation / registered provider: Mrs Mary Sharkey | Registered manager: Mrs Laura Kelly |
|--|--|
| Person in charge of the day care setting at the time of inspection: Mrs Mary Sharkey, Responsible Person Mrs Laura Kelly, Registered Manager | Date manager registered: 04 August 2008 |

3.0 Methods/processes

Prior to inspection the following records were analysed:

- The registration status of the service
- Written and verbal communication received since the previous care inspection
- The previous care inspection report.

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

- Discussion with the responsible person
- Discussion with the registered manager
- Discussion with two care staff
- Discussion with 11 service users
- Discussion with one service user's representative
- Discussion with a college representative

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- Examination of records
- File audits
- Evaluation and feedback.

The registered manager was provided with five questionnaires to distribute to service users; five staff members and five service users' representatives for their completion. The questionnaires asked for service user, staff and service users' representatives' views regarding the service, and requesting their return to RQIA. Four service users, one service user's representative and two staff questionnaires were returned to RQIA. The content of the questionnaire is discussed in the main body of the report.

The following records were examined during the inspection:

- Complaints record
- Accident / untoward incident record
- Staff supervision and appraisal records
- Elements of three service users' care files
- Sample of policies and procedures
- Sample of quality assurance audits
- Staff training information
- Minutes of staff meetings
- Minutes of service user meetings
- Three monthly monitoring reports.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 07/12/15

The most recent inspection of the day care setting was an unannounced care inspection. There were no requirements or recommendations made as a result of this inspection.

4.2 Review of requirements and recommendations from the last care inspection dated 07/12/15

There were no requirements or recommendations made as a result of the last care inspection.

4.3 Is care safe?

The registered manager 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 rota for week commencing 23 May until 24 June 2016 evidenced that the planned staffing levels were adhered to.

Staff consulted confirmed that staffing levels met the assessed needs of the service users. Observation of the delivery of care evidenced that service users' needs were met by the

numbers of staff on duty. No concerns were raised regarding staffing levels during discussion with service users, service user's representative and staff.

Discussion with the responsible person confirmed that staff were recruited in line with Regulation 21, Schedule 2 of The Day Care Setting Regulations (Northern Ireland) 2007 and that records were retained at the organisation's main office.

Discussion with the registered manager 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 and staff appraisals were completed annually. Discussion with staff confirmed that they had received supervision and appraisal accordingly.

The registered manager 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 registered manager; records of competency and capability assessments were retained.

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 inspection.

Review of records pertaining to accidents, incidents and notifications forwarded to RQIA confirmed that these were appropriately managed.

Discussion with the registered manager and review of records evidenced that care staff were registered with Northern Ireland Social Care Council (NISCC).

The registered manager and staff spoken with clearly demonstrated knowledge of their specific roles and responsibilities in relation to adult safeguarding. The registered manager advised that there were no current ongoing safeguarding concerns. On the day of the inspection no restrictive practices were observed.

A review of the service users' environment was undertaken. The day centre was found to be warm, fresh smelling and clean throughout. 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.

Inspection of the internal environment identified that the day care setting were kept tidy, suitable for and accessible to service users, staff and visitors.

Areas for improvement

No areas for improvement were identified during the inspection.

| Number of requirements | 0 | Number of recommendations: | 0 |
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4.4 Is care effective?

Discussion with the registered manager and two staff established the day care setting responded appropriately to and met the assessed needs of the service users. Discussions with 11 service users also concluded their needs are being met in the day service.

The inspector reviewed elements of three service user care files. The care records reflected multi-professional input into the service users' health and social care needs. Care recording for every five attendances was being maintained.

Care records reviewed accurately reflected the assessed needs of service users, and where appropriate, adhered to recommendations prescribed by other healthcare professionals such as speech and language therapist (SALT).

Discussion took place with the responsible person and registered manager in regard to the format of the needs assessment and care plans. The inspector will review this area in detail during the next inspection to the service.

Service users and / or their representatives were encouraged and enabled to be involved in the assessment and care planning and review process.

Review of three service user's 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 registered manager 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.

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 registered manager 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; each staff member knew their role, function and responsibilities. Staff also confirmed that if they had any concerns, they could raise these with the registered manager. All grades of staff consulted clearly demonstrated the ability to communicate effectively with their colleagues and other healthcare professionals.

Discussion with the registered manager confirmed that staff meetings were held on a quarterly basis and records verified this. The last meeting was held on 10 June 2016 and the registered manager confirmed that the minutes of the meeting were made available for staff to consult.

Discussion with the registered manager and review of records evidenced that service user meetings were held at least quarterly. The last meeting was held on 09 May 2016 and minutes were available.

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

Service users spoken with and observation of practices evidenced that staff were able to communicate effectively with service users.

Areas for improvement

No areas for improvement were identified during the inspection.

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

4.5 Is care compassionate?

Service users confirmed management and staff listen to them, offer them choices and involve them in decision making during their time in the day care setting.

Staff interactions with service users were observed to be compassionate, caring and timely. Service users were afforded choice, privacy, dignity and respect. For example, one care staff member was overheard offering a service user a choice of activity.

Staff demonstrated a detailed knowledge of service users' wishes, preferences and assessed needs as identified within the service users' care plan. Relationships between all staff and service users were observed to be relaxed and friendly.

An observation of the lunch time meal confirmed that service users were given a choice in regards to where they preferred to dine, food and fluid choices and the level of help and support requested. Staff treated service users with dignity and respect affording adequate time for service users to make decisions and choices and offered reassurance and assistance appropriately. Staff interactions with service users were observed to be compassionate, caring and timely.

Service users spoken with commented positively in regards to the care they received in the day centre. Those service users who could not verbalise their feelings in respect of their care were observed to be relaxed and comfortable in their surroundings and in their interactions with staff.

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, music session and reminiscence therapy.

The registered manager confirmed that service users were listened to, valued and communicated with in an appropriate manner. Discussions with service users and observation of practice confirmed that service users' needs were recognised and responded to in a prompt, courteous and supportive manner by staff.

There were systems in place to ensure that the views and opinions of service users were sought and taken into account in all matters affecting them. The comments within the satisfaction questionnaires returned to RQIA evidenced that compassionate care was delivered within the day care setting.

The views of service users were sought during the monthly quality monitoring visits and these comments were included in the monthly reports for March, April and May 2016 which were reviewed.

Service users are consulted in an informal daily basis via discussions with staff and the registered manager. Service users are consulted on a formal basis via service users' meetings; the annual review of their day care placement and they receive an annual quality assurance survey about the quality of the day service in Strule-Erne Day Care Centre. The findings from the annual survey had been collated into an evaluation / summary report.

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 coming here. The girls are very kind."
- "We have music this afternoon and I enjoy the singing and dancing."
- "You can talk to the staff about anything."
- "The food is nice."
- "I am happy here."
- "I come here three days a week. If it was open I would come here every day."
- "We do lots of things here. I have made a book all about what I have done and the trips I have been on."
- "Staff are very good to me. They listen to me and if I need any help staff give me help."
- "Staff treat me good."

The inspector met with one service user's representative. The service user's representative spoke positively of the service, care delivered and the staff team. Examples of some of the comments made by the service user's representative are listed below:

- "Staff keep me fully informed of any changes in regard to my relative."
- "This is a great service."
- "Staff are very kind and respectful to all the people that come here."

The inspector met with a visiting college representative. The college representative also spoke positively of the service, care delivered and the staff team. Examples of some of the comments made by the service user's representative are listed below:

- "I have been providing music in the service for a long time."
- "I feel staff are compassionate and extremely caring towards the ladies and gentlemen that come to the day centre."
- "It is my opinion that staff are totally committed to the service users."

As part of the inspection process, questionnaires were issued to the registered manager for distribution to a selected sample of staff (five), service users (five) and service users' representatives (five). At the time of writing this report, questionnaires have been returned to include; two staff, four service users and one service user representative.

Review of the completed RQIA questionnaires asking for opinions on how safe, effective and compassionate the care is and how well led the service is; concluded all of the responses to the questions were positive.

The following qualitative comments were recorded in the returned service user representative questionnaire:

• "Service in Strule-Erne is fantastic. Friendly staff, always kept well informed. No problems."

Areas for improvement

No areas for improvement were identified during the inspection.

| Number of requirements | 0 | Number of recommendations: | 0 |
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4.6 Is the service well led?

Discussion with the registered manager and staff evidenced that there was a clear organisational structure within the day care setting. An organisational chart was displayed within the day care setting. Staff were able to describe their roles and responsibilities. The registered manager confirmed that the responsible person was kept informed regarding the day to day running of the centre.

In discussion service users were aware of the roles of the staff in the day care setting and whom they should speak to if they had a concern. Service users confirmed that they were confident that staff / management would manage any concern raised by them appropriately.

The certificate of registration issued by RQIA was displayed in a prominent position in the day care setting.

The registered manager 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. 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.

An audit of accidents and incidents was undertaken and this was available for inspection and is used to identify trends and to enhance service provision. The registered manager confirmed that learning from accidents and incidents was disseminated to all relevant parties and, where appropriate, action plans were developed to improve practice.

Monthly monitoring visits were undertaken as required under Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007; reports were produced and made available for service users, their representatives and RQIA.

Discussion with staff confirmed they were familiar with organisational and management structure and with their lines of professional accountability. Staff were aware of their individual responsibility in relation to raising concerns.

Discussions with staff also confirmed that there were good working relationships and that management were responsive to any suggestions or concerns raised.

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Areas for improvement

No areas for improvement were identified during the inspection.

| Number of requirements | 0 | Number of recommendations: | 0 |
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5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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.





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