

Care Inspection Report

31 January 2017



Strule-Erne Day Care Centre

Type of service: Day Care Service

Address: DunUladh Centre, Ballinamullen Road, Omagh, BT79 0GZ

Tel No: 028 8225 2162

Inspector: Dermott Knox

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of Strule-erne Day Care Centre took place on 31 January 2017 from 11.30 to 15.30.

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

Is care safe?

The Strule-erne Day Care Centre premises were in good condition with no obvious hazards for service users or staff. There is adequate space available for group activities and for individual work with service users, when necessary. Staff rotas, daily records and discussions with staff and service users confirmed that staffing levels met the assessed needs of the service users. Safeguarding procedures were understood by all staff who were interviewed. Risk assessments were carried out routinely in an effort to minimize risks and to manage them consistently. One identified safeguarding matter had been managed appropriately, in accordance with the provider's procedures. Observation of the delivery of care, throughout the period of the inspection, provided evidence that service users' needs were being met safely by the staff on duty. No areas for improvement were identified at this inspection with regard to the provision of safe care.

Is care effective?

Clear assessment information supported the delivery of effective care for the four service users whose records were examined at this inspection. Progress and outcomes for service users should be developed and clarified using a revised care planning format. The positive value of the day care service was confirmed by all of the service users and staff members who met with the inspector. There was written evidence in review reports of service users, their representatives and a range of community based health and social care workers being satisfied with the outcomes of the day care service in terms of benefits for service users. Staff were deployed in a manner that made good use of their skills and experience. Staff members spoke of supportive and positive working relationships within the team. The evidence indicates that Strule-erne Day Care Centre is providing a satisfactory level of effective care that may be improved by the development of more specifically goal oriented care plans for service users.

Is care compassionate?

Interactions between staff members and service users were seen and heard to be good humoured, respectful and caring. Personal care and confidential matters were dealt with in a respectful manner, in all of the practices that were observed. Staff members confirmed their trust in the caring qualities of their colleagues and were confident that poor practice would not be tolerated. Seven service users contributed positive comments on their enjoyment of attending the centre and on its value to them in terms of their experiences and happiness. Questionnaire responses from five service users, two relatives and one staff member were positive regarding compassionate care and the other three domains. Service user meetings provided regular opportunities for views to be aired. The evidence indicated that compassionate care is provided consistently by Strule-erne Day Care Centre.

Is the service well led?

The Strule-Erne Day Care Centre has systems in place to ensure that staff are well-informed on the responsibilities of their various roles and the expected standards of practice. There is a well-planned programme of training and staff are supervised and well supported within the team. Evidence from discussions with staff indicates that the manager has positive working relationships with members of the staff team and that they have the confidence and support of their colleagues. Service users in the centre stated that the service was well organised and well suited to their needs. Records of service users' meetings and staff meetings were available for inspection. Monthly monitoring reports were clear and comprehensive. There was evidence of good leadership in the key aspects of the service that were examined at this inspection.

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 recommendations made at this inspection	0	1

Details of the Quality Improvement Plan (QIP) within this report were discussed with Laura Kelly, Registered 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.

1.2 Actions/enforcement taken following the most recent care inspection

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

2.0 Service details

Registered organisation/registered person: Strule-Erne Day Care/Mrs Mary Sharkey	Registered manager: Mrs Laura Kelly
Person in charge of the home at the time of inspection: Mrs Laura Kelly	Date manager registered: 01 April 2011
Categories of care: DCS-LD	Number of registered places: 25

3.0 Methods/processes

Prior to inspection we analysed the following records:

- Record of notifications of events
- Record of complaints
- The report of the previous inspection on 24 March 2016
- The log of contacts relating to the service, since the previous care inspection.

During the inspection the inspector met with:

- Ten service users within the main group setting
- Two care staff, in individual discussions
- The registered manager at the beginning and the conclusion of the inspection.

Questionnaires were left with the manager to be distributed to service users, staff and a number of relatives or carers of service users. Six completed questionnaires were returned to the inspector on the day of the inspection, five from service users and one from a staff member.

The following records were examined during the inspection:

- File records for four service users, including assessments and review reports
- Progress records for four service users
- Monitoring reports for the months of September and November 2016 and January 2017
- Record of complaints
- Records of three staff meetings
- Plan for staff training in the next three month period
- Records of three service users' committee meetings
- Records of a safeguarding investigation and outcome
- Fire safety records.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 20 September 2016

The most recent inspection of the establishment was an announced estates inspection. The completed QIP was returned and approved by the estates inspector. This QIP will be validated by the estates inspector at the next estates inspection.

4.2 Review of requirements and recommendations from the last care inspection dated 24 March 2016

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

4.3 Is care safe?

The day centre premises were in good condition with no obvious hazards for service users or staff. There is adequate space available for group activities and for individual work with service users, when necessary. The manager and two staff members, who met with the inspector, confirmed that they have confidence in the practice of all members of the staff team in their work with service users. Both staff members had worked in residential care settings prior to their employment in day care and expressed strong commitment to their work with service users, which, they said, is enjoyable and satisfying. The manager shared an advertisement for the recruitment of a new relief staff member and indicated that staff selection methods were standardised and professional. New staff undertake a detailed induction programme.

Safeguarding procedures were understood by staff who were interviewed. There were systems in place to ensure that risks to service users were assessed regularly and managed appropriately and this included inputs by community based professionals, service users and, where appropriate, a carer. Risk assessments with regard to transport and moving and handling, were present where relevant and each one had been signed as agreed, either by the service user or a representative. Observation of the delivery of care, throughout the period of the inspection, provided evidence that service users' needs were being met safely and carefully by the staff on duty.

Staff members were observed being attentive to each person's needs throughout their time in the centre. Fire alarm systems checks were carried out and recorded on a weekly basis and fire exits were seen to be unobstructed. An evacuation drill had been completed on 27 September 2016, with everyone evacuated to the agreed area. The daily register of service users and staff provides an accurate checklist for fire safety purposes.

During the inspection visit, seven service users spoke very positively of the quality of care provided at the centre and confirmed that they felt safe in the centre, in the transport bus and in organised activities. Staff presented as being well informed of the needs of service users and of methods of helping to meet these needs safely. Service users' rights and feelings, and the methods available to them of raising a concern or making a complaint were set out in the service user's guide.

One safeguarding matter had been identified and reported to RQIA since the previous care inspection and this had been investigated and managed appropriately. Suitable action had been taken within the centre in order to minimize the risk of any recurrence. No complaints had been recorded since the previous care inspection. The evidence presented supports the conclusion that safe care is provided consistently in Strule Erne Day Centre.

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?

Strule Erne Day Centre has quality assurance systems in place, through which operations are monitored and staffs' practice is evaluated. There was evidence from discussions with staff to confirm that team members were supportive of one another and motivated to provide effective care. Staff confirmed that they have good working relationships with community based professionals who also provide services to those who attend the centre. Evidence from discussions, observations and in written records indicated that staff regularly seek the views of service users and/or their relatives regarding their care preferences and the activity programmes in which they participate.

Four service users' files were examined and each was found to contain detailed referral and assessment information on the individual and on his or her functioning. An agreement form, signed by the service user, or a representative and the registered manager, was present in each file. Care plans were closely tied to assessment information, but three of those that were examined would be improved by having a different structure that included statements of clear, achievable goals, the actions required to achieve these and the measured outcomes. The manager was advised on the development of more measureable outcome statements and a recommendation is made in the Quality Improvement Plan to address these matters. Well-detailed review reports provided evidence that an evaluation of the overall suitability of each placement had been discussed in detail and agreed. There was evidence of support being provided for service users in preparation for their review meetings.

Progress notes, recording each service user's involvement and activity at the centre were completed at least weekly to a good standard, providing a clear description of the service user's involvement in the centre's programmes. Seven service users discussed their experiences of participation in the centre's activities and presented positive views of the support and care that staff provided. On the afternoon of this inspection, service users were engaged in making decorative items and gifts for Valentine's Day. Two service users spoke enthusiastically of the drama production they are involved in and of their enjoyment of activities such as boccea.

The annual survey of service users and their carers/relatives is followed up with a report to them, setting out the findings and any actions that are being taken as a result of these. The quality survey report was available but was not examined on this occasion.

Overall, there was a wide range of evidence to support the conclusion that effective care is provided in Strule Erne Day Centre.

Areas for improvement

Care plans should be improved by having a structure that allows for the statement of clear, achievable and measureable goals, the actions required to achieve these and the measured outcomes.

Number of requirements	0	Number of recommendations	1
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4.5 Is care compassionate?

Observations of activities throughout the day centre provided evidence of service users relating positively to staff and to one another. A number of service users presented as having low levels of interest or ability in socialising with others in the centre and staff were seen to attend to them with skill and warmth. Staff members presented as being committed to providing service users with a supportive and enjoyable experience at the centre and in all of the interactions observed, service users were engaged with warmth, respect and encouragement. Staff demonstrated an understanding of each service user's assessed needs as identified in the individual's care plan.

Seven service users confirmed that staff involve them regularly in deciding what they want to do during their time in the day centre and that they are treated with respect and kindness at all times. Staff were observed working calmly and at a suitable pace for individual service users throughout the day of the inspection. Observation of events confirmed that service users were afforded choice and were encouraged in constructive activities by staff. On the afternoon of the inspection several service users were engaged with staff in making Valentine's Day gifts.

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. Responses in five questionnaires, returned to RQIA by service users, affirmed that compassionate care was delivered to a satisfactory (2), or very satisfactory (3) standard within the day care setting. Responses in these questionnaires rated all aspects of the service as either satisfactory or very satisfactory. Questionnaires were also returned by two relatives and two staff members who indicated that they were very satisfied that the service was safe, effective, compassionate and well led.

The evidence presented supports the conclusion that compassionate care is provided in Strule Erne Day Care Centre.

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?

Strule Erne Day Centre has clear management information set out in the statement of purpose, clarifying the leadership and decision making structure regarding day care services. There was written evidence in the staffing records to show that staff members were appropriately qualified for their designated roles. There was a comprehensive Induction Programme in place and the manager confirmed that this was followed by any newly appointed staff member in Strule Erne.

A system is in place for the identification of staffs' training needs and for meeting these. Mandatory training is planned and recorded centrally by the Strule-Erne service providers and other specific training needs are identified throughout the year on an individual basis. Staff were scheduled to attend training on the Management of Challenging Behaviours on the day following this inspection.

During each monthly monitoring visit, the views of a sample of service users and a carer/relative were sought and their comments were included in all three of the monthly reports examined; for

September and November 2016 and for January 2017. Monitoring visits and reports were completed every month. Examination of three monitoring reports showed that all of the required aspects of the centre's operations were checked rigorously, with action plans completed to ensure that identified, necessary improvements would be addressed within a specified timescale. The attention to detail in monitoring visits is good and they and their reports contribute significantly to quality assurance for the service.

The manager and staff members' confirmed that formal supervision and annual appraisals were taking place regularly. The manager presented as enthusiastic in support of the team and in seeking continuous service improvement. Individual staff members confirmed their commitment to providing a high quality service and felt they were well supported by their line manager, their colleagues and the organisation.

Evidence from discussions with staff indicates that the manager has positive working relationships with members of the staff team and that they have the confidence and support of their colleagues. Service users confirmed that the service was well run and well suited to their needs. The evidence presented at this inspection supports the conclusion that Strule Erne Day Care service is well led.

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

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Laura Kelly, Registered Manager, 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 the 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 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

<p>Recommendation 1</p> <p>Ref: Standard 5.2</p> <p>Stated: First time</p> <p>To be completed by: 30 June 2017</p>	<p>The registered provider should review and revise the format and content of care plans so that, where possible, clear, achievable and measureable goals are established with and for the service user, along with the actions to be implemented in order to achieve each goal, and a record of the outcome of this work within specified periods of time.</p>
	<p>Response by registered provider detailing the actions taken:</p> <p>Care plans are in place at present that are detailed and include all relevant information. We have been commended by other Professionals for there format and ease of use. However this recommendation has been noted and care plans are presently being reviewed and updated to include requested information.</p>

Please ensure this document is completed in full and returned to day.care@rqia.org.uk from the authorised email address



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