



The Regulation and
Quality Improvement
Authority

Killadeas Day Centre

RQIA ID: 11959

Unit 1

Lisnaskea Business Complex

Lisnaskea

BT92 0LZ

Inspector: Dermott Knox
Inspection ID: IN023785

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**Unannounced Care Inspection
of
Killadeas Day Centre (11959)**

07 March 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced care inspection took place on 07 March 2016 from 10.45 to 16.00. 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
Total number of requirements and recommendations made at this inspection	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

Registered Organisation/Registered Person: Elaine Way CBE Western Health and Social Care Trust	Registered Manager: Patricia Griffith
Person in Charge of the Day Care Setting at the Time of Inspection: Patricia Griffith	Date Manager Registered: 21 June 2013
Number of Service Users Accommodated on Day of Inspection: 14	Number of Registered Places: 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:

- Record of notifications of events,
- Record of complaints
- Quality Improvement Plan from the previous inspection on 23 March 2015
- The statement of purpose

During the inspection the inspector met with:

- Six service users in their small group settings
- Three service users individually
- A parent of one service user
- The senior day care worker in charge of the centre in the manager's absence
- One day care worker and two support workers for individual discussions
- A transport driver
- The registered manager

The following records were examined during the inspection:

- File records for four service users, including care plans and review reports
- Progress notes for four service users
- Three of the bi-monthly monitoring reports for 2015
- Three Health Checks (Monthly)
- Record of notifications of events,
- Record of complaints
- Minutes of three Members' Council meetings
- Minutes of two staff meetings
- Training records for two staff
- Supervision records for two staff
- Five Service User Evaluations from the latest survey.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of service was an announced care inspection dated 23 March 2015. The completed QIP was returned and approved by the specialist inspector. There were no matters to be followed up, other than the one requirement and one recommendation arising from that inspection.

5.2 Review of Requirements and Recommendations from the last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 19 (2) Schedule 5. 7	<u>Duty Roster</u> The registered manager must ensure that a staff duty roster is established showing all staff, including the registered manager, on duty within the centre and hours worked. (Following the inspection the manager confirmed that the duty roster had been developed as required.) Action taken as confirmed during the inspection: The duty roster was available for inspection and was in compliance with the specified regulation.	Met
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 18.5	<u>Policy review</u> It is recommended that review / revision of the "Restrictive Interventions" policy is undertaken and reference made to the requirement to notify RQIA on any occasion when a service user is subject to restraint. Action taken as confirmed during the inspection: An addendum had been written for the Restrictive interventions policy and this had been approved by RQIA in March 2015.	Met

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

Is Care Safe?

Killadeas group of day centre have guidelines, written in June 2015, for staff providing continence care for service users. A copy of the WHSCT Guidelines for the Selection of Continence Supplies/Products was also available for inspection, along with the Trust's policy on the provision of Intimate Care. Staff members confirmed that they were appropriately trained for personal care work and were familiar with the relevant policies and procedures.

Discussions with staff and observations of staff's practice throughout the inspection showed that there was a high level of calm, confident and good quality personal care being provided. Staff demonstrated caring and professional respect for each service user's privacy, dignity and choice. Records for service users provided evidence of personal care needs, including continence care, having been identified for a number of those who attend the centre. Accidents and incidents had been managed, recorded and reported appropriately. Review records for four service users showed that care matters had been addressed to the satisfaction of the service user, relative/s and relevant professionals who attended the review meetings.

The toilets and personal care facilities were satisfactory for current service users, many of whom have complex care needs. Several service users have care and support provided on a one to one basis, due to the complexity of their needs. The inspector discussed levels of satisfaction with three of the people receiving care in the centre, each of whom expressed feelings of excitement and enjoyment regarding their attendance. They said that they liked the staff who worked with them and felt that the activities in the centre were good fun. The evidence available during this inspection indicates that safe care has been provided.

Is Care Effective? (Quality of Management)

Most of the service users had assessed needs with regard to continence promotion and care and the objectives and working methods related to these needs were clearly set out in each of the care plans inspected. Assessed needs had been accurately translated into care plan objectives resulting in clarity of objectives and related actions that day centre staff should work toward with each person. In discussions, staff members expressed the view that effective care was provided to meet personal care needs. Staff had been provided with appropriate training for this aspect of their work. Progress notes were found to be relevant, well detailed and up to date. Each of the review reports examined provided evidence to indicate that the needs of the service user were being well met.

Monthly monitoring visits and reports were being completed regularly by a Trust appointed manager and on each visit the monitoring officer met with a number of service users and with staff to ascertain their satisfaction with service outcomes and with the operation of the centre. A sample of the centre's records was examined on each monitoring visit and any requirements arising from the overall visit were set out in an action plan to be reviewed at the following visit. The management and staff are commended for the thoroughness of their quality assurance processes and for the good evidence of continuous improvement in the centre's operations.

Is Care Compassionate?

This Killadeas Day Centre, in Lisnaskea, operates principally in one very large room which is thoughtfully divided by the furniture into several functional spaces. There is also a sensory area. Although free to move around and between these spaces, service users were engaged and guided by staff to participate in one or other of the several activities taking place at the same time. Each person's timetable and programme was carefully planned and staff were allocated, in a written, daily work schedule, to particular activities with specified individuals or groups. Modelling by staff of appropriate communications and interactions was impressive and their gentle guidance resulted in purposeful activities taking place in a calm and generally good humoured atmosphere. Observations of the activities and staff's practice throughout the day led to the conclusion that the evident success of the centre's operations can be attributed to good management and skilful, caring and compassionate teamwork. The manager and staff are commended for the development of this high quality service.

Number of Requirements:	0	Number of Recommendations:	0
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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?

Staff, who met with the inspector, confirmed that they were confident in the practice of all members of the staff team in their work with service users. There were systems in place to ensure that risks to service users were assessed continually and managed appropriately and this included inputs by community based professionals.

A survey of the views of service users and their representatives was carried out this year by the Trust's Day Care Review Project Manager and there were evaluation forms completed by service users, indicating a high level of satisfaction with the service.

Evidence from discussions, observations and in written records indicated that staff actively seek the views of service users, their representatives and community based professionals, regarding the support programmes in which they participate. Staff presented as knowledgeable of the needs of service users and of methods of working with them. There was a range of evidence to support the view that safe care is provided in this day centre.

Is Care Effective? (Quality of Management)

Four service users' files were examined and each was found to contain detailed information on the individual and on his or her functioning and assessed needs. Care plans accurately addressed the identified needs in excellent detail. A record was kept of each service user's involvement and progress, with individual activity timetables produced in a clear pictorial format. Two service users showed their "Life Story" books to the inspector and these used mainly photographs of the individual and others to tell the story of various activities and work placements. The books were clearly valued by their owners.

Records of annual reviews for each person demonstrated that an evaluation of the overall suitability of the placement had been discussed and agreed. Records of reviews were available in each of the files examined. Killadeas Day Centres and the WHSCT have quality assurance systems in place, through which operations are monitored and staffs' practice is evaluated. Staff members' files contained records of formal supervision and annual appraisals, which were taking place regularly. Records of staffs' training were comprehensive and up to date. One support worker stated that QCF 3 was the expected level of qualification for staff in the centre.

Good records of staff meetings provided evidence of a wide range of topics having been discussed. The senior day care worker, in day to day charge of the centre, completes a detailed monthly health check which is then scrutinised within the bi-monthly monitoring visits. Monitoring reports showed that all of the required aspects of the centre's operations were rigorously checked, with action plans introduced to ensure that any shortcomings would be addressed within a specified timescale. This well-organised quality assurance practice is commendable.

Evidence from observations of service users' involvement and from written records confirmed that service users enjoyed activities, including music and movement, armchair exercises, ball games, puzzles, basic numeracy and literacy exercises, compiling life-books, painting and a range of crafts within the centre and social and educational outings. The manager and staff worked creatively to involve service users in a variety of experiences, making full use of the available space and the sensory equipment in the centre.

Overall, there was evidence to indicate that the care provided is effective in terms of promoting each service user's involvement, enjoyment and wellbeing.

Is Care Compassionate? (Quality of Care)

The centre was clean, well decorated and in good repair and service users appeared to be relatively at ease within the environment. Service users responded well and interacted well with staff who demonstrated skilful and caring approaches to their work. There was evidence of positive and purposeful relationships having been nurtured between service users and staff members. In all of the interactions observed, service users were engaged with respect and encouragement. Overall there was evidence to confirm that the centre provides a constructive, creative and compassionate care service to those who attend.

Thanks are due to service users and staff who welcomed the inspector to the centre and to the staff for their open and constructive approach throughout the inspection process.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	<i>P. Griffin</i>	Date Completed	<i>21/3/16</i>
Registered Person	<i>Aine Way</i>	Date Approved	<i>24/03/16</i>
RQIA Inspector Assessing Response	<i>Desmond Kelly</i>	Date Approved	<i>11/04/16</i>

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

Please complete this document in full and return to day.care@rqia.org.uk from the authorised email address