



The **Regulation and
Quality Improvement
Authority**

**Mourne Project
RQIA ID: 10987
Knockbracken Healthcare Park
Saintfield Road
Belfast**

**Inspector: Suzanne Cunningham
Inspection ID: IN23104**

**Tel: 02890 638860
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**Unannounced Care Inspection
of
Mourne Project**

14 September 2015

**The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of Inspection

An unannounced care inspection took place on 14 September 2015 from 10.00 to 15.00. Overall on the day of the inspection the Day Care Service 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	1	0

The details of the QIP within this report were discussed with the Gerry McKeaveney, Senior Day Care Worker, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Mr Martin Dillon	Registered Manager: Patricia Kirk
Person in Charge of the Day Care Setting at the Time of Inspection: Gerry McKeaveney (SDCW)	Date Manager Registered: 19 June 2009
Number of Service Users Accommodated on Day of Inspection: 4 morning, 3 afternoon	Number of Registered Places: 4

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: the registration status of the service; incidents notification which revealed five incidents had been reported to RQIA; and written and verbal communication received since the previous care inspection which did not reveal any concerns. The returned quality improvement plans (QIP) from the care inspection undertaken in the previous inspection year and the estates inspection completed in this inspection year were also reviewed; this did not reveal any areas for follow up.

During the inspection, care delivery/care practices were observed by the inspector and a tour of the general environment took place. During the inspection the inspector met with three service users in the morning and three service users in the afternoon and four staff on duty. There were no visiting professionals or representatives/family members present during the inspection. Three staff and five service users completed RQIA inspection questionnaires during and after this inspection. The results are included in this report.

The following records were examined during the inspection: The settings statement of purpose and service user's guide; two service users individual care records including care plans, assessments and review documentation; two complaints / issue of dissatisfaction; a sample of the settings incidents and accident records from June 2014 to September 2015; the settings annual quality assurance report; and policies and procedures regarding standards 5 and 8.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an announced estates inspection dated 23 June 2015. The completed QIP was returned and approved by the specialist inspector. There were no areas identified for further follow up.

5.2 Review of Requirements and Recommendations from the last Care Inspection

No requirements or recommendations resulted from the primary announced inspection of Mourne Project which was undertaken on 3 June 2014.

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

Is Care Safe?

The trust has a continence promotion policy and procedure in place and this was available for staff reference.

The inspector reviewed three service users individual needs assessments, risk assessments and care plans which had been kept under continual review and amended as changes occurred. The information recorded showed evidence of records being kept up to date to accurately reflect the needs and preferences of the service user. The needs assessment and care plans had been appropriately signed. The needs assessments and care plans did include (where appropriate) continence promotion information, this included service user's preferences, how service users communicate they need assistance, if they need prompting and the most discrete way; and if they have any preferences regarding who should assist them. Moving and handling information was informed by professional assessment, signed by professionals involved and had been kept under review.

Staff discussion revealed they were aware of continence products and Personal Protection Equipment (PPE). Staff had received training from a Tena representative and from the continence promotion team regarding products and continence promotion. Discussions with two staff working in the day centre and a tour of the environment provided evidence they have knowledge regarding meeting continence promotion needs in the setting, they understand how to protect and promote service users dignity and they described care practices including the use of PPE.

Observations of the environment, including odour, location / storage of PPE and continence products were in keeping with infection control guidance.

Three staff returned inspection questionnaires that reported staff were satisfied to very satisfied with the training they had received; they were very satisfied with support from the multidisciplinary team; access to equipment; and very satisfied the environment is appropriate to meet service user's needs.

Five service user inspection questionnaires were returned and reported service users felt very satisfied to satisfied regarding the setting provides a safe and secure care environment and staffing levels are appropriate at all times. One service user commented "I know where the bathroom is, staff are always pleased to help and will take me if I need help, I'm very happy".

Overall the inspection concluded staff have a proactive approach to ensuring continence needs are met in a safe and caring way in this day care setting.

Is Care Effective?

The setting had an appropriate stock of continence products which were supplied by the service user in bulk and stored by the service. Some service users choose to bring in their supply daily. Staff discussion showed they are aware of how to meet assessed needs and staff confirmed they have unrestricted access to products and PPE.

Staff had received appropriate education and training in continence products and promotion in July and September 2015.

Four service users spoke to the inspector during this inspection and they confirmed they felt they are listened to, respected, valued. They also described their independence is promoted and they are supported by staff when they need or request care or assistance.

Five service users completed RQIA inspection questionnaires. They reported they felt satisfied to very satisfied that staff know how to care for them and respond to their needs. One service user commented "I always ask staff if they will come to the bathroom to help me".

Three staff returned RQIA inspection questionnaires and they reported they were very satisfied they have access to supplies which support service users and access to PPE. Finally staff reported they have sufficient knowledge, skills and experience to support service users who attend the day centre.

The inspection concluded care provided by staff was effective in promoting and supporting continence needs.

Is Care Compassionate?

Staff discussion confirmed the staff were knowledgeable regarding service user needs and they reflected a person centred approach when discussing the care and support required to meet individual continence needs. The review of three service user care plans confirmed staff record specific information and methods; which should be used to support service users in a compassionate and competent way, as well as providing needs led continence care and support.

The observation of staff interaction with service users showed staff take time to understand service users when communicating and give service users encouragement and opportunity to express their opinions and preferences.

Three staff reported in the inspection questionnaires that they were very satisfied service users are afforded privacy, dignity and respect at all times; they are encouraged to retain their independence and make choices; they are satisfied they have time to talk to and listen to service users; and the care provided is based on service users' needs and wishes.

Five service users reported in the inspection questionnaire's they were very satisfied to satisfied with the care and support they had received and staffing levels. One service user commented "I'm very happy".

The inspection concluded staff approached meeting service users' needs with compassion and ensured service users were given time to talk openly or privately.

Areas for Improvement

No areas of improvement were identified regarding the service users care plan - Where appropriate service users receive individual continence promotion and support:

Number of Requirements	0	Number 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?

On the day of the inspection the staff were facilitating a service users' meeting and staff were observed actively seeking service users' views. Minutes of previous meetings, discussion with service users, the complaints record, the outcome report of a service user survey and service user individual records provided evidence service user's views were gathered in a variety of ways, from day to day discussions to specific consultation about focussed activities. The information is recorded and incorporated into practice to ensure that service user choices, issues of concern, complaints or risks are recorded and acted on.

Discussion with the service users and staff revealed the service users views, opinions and preferences are actively being used in planning and setting up activity programmes. There was a strong focus on enabling service users to make decisions and promote independence in all areas.

Discussions with staff and observation of practice confirmed they listen and respond to service users, they use their knowledge of service user's' individual modes of communication to ensure service users can openly and freely express their views and preferences.

The inspection of three service users' needs assessment, risk assessments and care plans showed the documents are kept under continual review, had been amended as changes occurred and were kept up to date to reflect at all times the needs and preferences of the service user. The needs assessment and care plan had been appropriately signed. The care plan and assessment incorporated information regarding communication with the individual and in the group.

There are policies regarding:

- service users' meetings and forums
- listening and responding to service users' views
- service users' involvement in activities and events
- communications with carers and representatives

- general communication arrangements
- safe and healthy working practices

The inspection confirmed staff communicated effectively with service users and had used this information to ensure care was safe and responsive to need.

Is Care Effective

This inspection reviewed a range of methods and processes where service users' and their representatives' views are sought and recorded which include details of the action taken. Examples were the service user meetings, reviews, annual consultation, monthly monitoring and day to day discussion. This inspection did not reveal any concerns or areas for improvement. The inspection showed service users were enabled to be involved in and given opportunities to influence the running of the day care setting, they are enabled to exercise choice and control over their lifestyle; while not infringing on the rights of others.

Observations of interactions between staff and service users and discussions with staff showed they recognise service users' dignity and privacy must be respected and encourage service users to make choices. Staff and service users described the use of the suggestions table and how it had developed into what it is. This was following discussion with service users which aimed to encourage them to be involved which led to the suggestions area / table. The decoration of words to encourage participation and views with a brightly coloured suggestions box was visually appealing and encouraging. Service users talked about the use of the box and said they would use it if they have any concerns or ideas.

During the inspection staff informed service users that the inspection was taking place and staff encouraged service users to give their views about the standard of care delivered and the conduct of the Day Care Setting to the inspector.

There are policies regarding:

- inspections of the day care setting
- consent
- listening and responding to service users' views
- management control and monitoring of the setting
- quality improvement
- complaints

The inspection confirmed the care in this setting effectively seeks service user's views, opinions and preferences and this information has been used to inform delivery of day care.

Is Care Compassionate?

This inspection provided evidence service users were listened and responded to by staff that are knowledgeable about individual service users' communication needs. Staff had used a variety of methods such as day to day discussions, the suggestions table, service user meetings, care planning and review processes, annual consultation and monthly monitoring.

Discussion with staff and review of documentation concluded staff were consistently demonstrating the integration of the values that underpin the day care settings standards into their practice. Staff communication with service users was focused on keeping service users informed about issues affecting them and their approach was respectful and empowering.

Five service users completed RQIA inspection questionnaires which stated service users were satisfied to very satisfied that their views and opinions were sought regarding the service. One relative commented on the service user's questionnaire: "We really don't know how (service user's name) would cope without the Mourne Project where her needs for understanding and stimulation are more than met. It is situated in quiet and pleasant surroundings which is important for her wellbeing. (Service user's name) has made good relationships with the staff and the other clients and looks forward to her sessions at Mourne. The regular reviews are both supportive and informative which we greatly appreciate".

Three staff questionnaire's stated they were very satisfied regarding the following questions: service users are involved in and are given opportunities to influence the running of the centre; systems are in place to seek service user's views; management action service user's suggestions, issues or complaints; and service users are kept informed regarding any changes.

In conclusion this inspection confirmed staff had used a compassionate approach to gather service user's views, opinions and preferences.

Areas for Improvement

No areas of improvement were identified regarding service users' involvement - Service users' views and comments shape the quality of services and facilities provided by the Day Care setting:

Number of Requirements	0	Number Recommendations:	0
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5.5 Additional Areas Examined

5.5.1. Service user files:

The inspector reviewed two service user individual records which were kept in individual files. They contained evidence of assessment; care planning documentation; activity recording; risk assessment; review documentation and minutes. The review of these files did not identify any improvements were required and the inspection identified the information recorded was person centred and focussed on meeting the service user's needs.

5.5.2. Members (Service Users) meeting and minutes:

On the day of the inspection the service users were meeting with staff. The service users discussed activities and told the inspector the staff value and encourage their input, suggestions; and preferences. They also explained staff had encouraged them to express any concerns they have. Review of the minutes of previous meetings held in March, May, July and September 2015 showed meetings happen about once every two months. The minutes described service users know about the suggestions box and have said in meetings they would be happy to raise any concerns they have with staff.

5.5.3. Annual survey:

The last survey was completed in 2014. The “outcome” report detailed there was high satisfaction in areas of courtesy and respect, feeling involved and family’s needs. Ongoing improvement measures implemented as a result of the survey were: service user meetings, suggestion box and service user reviews. These changes were viewed as improving outcomes as part of this inspection.

5.5.4. Mandatory Training:

The record had been maintained and included a record of continence care / assessment training delivered on 10 September 2015. Staff discussed this training was very good and had also received training regarding continence products in July 2015. The future training focus for the staff in this setting will be the introduction of recording using the goal attainment approach and ensuring staff are ready to use this new approach when working with service users, which aims to improve outcomes for service users.

5.5.5. Staff meeting minutes:

The minutes of four staff meetings for June, July, August and September 2015 were reviewed. These provided evidence that staff are discussing training needs and opportunities, inspection work and changes in the way they are practicing. The minutes showed staff are using these meetings to keep up to date with practice issues; identifying areas for improvement and exchanging relevant information with each other.

5.5.6. Monthly monitoring visits:

The content of nine monthly monitoring reports was sampled for the visits from December 2014 until August 2015. These identified the ratio of unannounced visits compared with announced visits had been infrequent. The last one was completed in December 2014 and the other eight reports referred to announced visits. The content of the reports was also minimal and did not focus on the conduct of the day care setting. A requirement is made to improve arrangements in this regard.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Gerry McKeaveney, Senior day care worker as part of the inspection process. The timescales commence from the date of inspection.

The registered person/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 person/manager 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 your premises. 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.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Day Care Settings Regulations (Northern Ireland) 2007.

6.2 Recommendations

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

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/ registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to day.care@rqia.org.uk and assessed by the inspector.

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. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the service.

Quality Improvement Plan

Statutory Requirements

Requirement 1

Ref: Regulation 28 (3) & (4)

Stated: First time

To be Completed by:
from October 2015

The responsible person must make arrangements to improve the monthly monitoring visits and reports in the following areas:

- The ratio of **unannounced** monthly monitoring visits versus announced visits to this setting must be improved.
- The monthly monitoring report must include analysis of the conduct of the day care setting i.e. compliance with the day care setting regulations and standards.

Response by Registered Person(s) Detailing the Actions Taken:

The procedural arrangements have been amended to reflect detail as above and shared with other three managers within our programme, who will ensure compliance with same.

Registered Manager Completing QIP	Patricia Kirk	Date Completed	21.10.15
Registered Person Approving QIP	Martin Dillon	Date Approved	26.10.15
RQIA Inspector Assessing Response	Suzanne Cunningham	Date Approved	27/10/15

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