



The Regulation and
Quality Improvement
Authority

Prospects Beacon Centre
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5-7 Parkview Road
Castleberg
BT81 7AH

Inspector: Dermott Knox
Inspection ID: IN023788

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**Unannounced Care Inspection
of
Prospects Beacon Centre**

01 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 01 March 2016 from 11.00 to 15.00. 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, below.

2. Service Details

Registered Organisation/Registered Person: NI Association for Mental Health Miss Rose Anne Reynolds	Registered Manager: Susan Foster
Person in Charge of the Day Care Setting at the Time of Inspection: Susan Foster	Date Manager Registered: Acting
Number of Service Users Accommodated on Day of Inspection: 3 (Member-led session)	Number of Registered Places: 26

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 16 March 2015

During the inspection the inspector met with:

- Three service users
- The acting manager

The following records were examined during the inspection:

- Computer file records for four service users, including care plans and review reports
- Progress notes for four service users (on computer)
- Monthly monitoring reports for four months in 2015
- The statement of purpose
- Minutes of two service user meetings
- Minutes of five staff meetings
- Training records for two staff
- Supervision and appraisal records for two staff
- A sample of two written policy and procedures documents

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the service was an unannounced care inspection dated 16 March 2015. The completed QIP was returned and approved by the specialist inspector. Areas to follow up were those from the previous QIP, as set out below.

5.2 Review of Requirements and Recommendations from the last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 19 (1)(a) (See Schedule 4)	Service users' records should include a recent photograph of the person. If a service user objects to the inclusion of a photograph, this objection should be recorded and signed by them, or, if necessary, a representative.	Met
	Action taken as confirmed during the inspection: While members' records are now kept electronically, photographs of members are kept in their paper file, unless they do not agree, in which case a signed record of their objection is kept instead.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 14.10	While the pro-forma for complaints records was satisfactory, some records had not been fully completed and the registered manager should ensure that this standard is met.	Met
	Action taken as confirmed during the inspection: Records of complaints, including low level concerns, were completed satisfactorily.	
Recommendation 2 Ref: Standard 23.8	Records of staff meetings should include the names of all those attending, in keeping with this standard.	Met
	Action taken as confirmed during the inspection: Records of the five staff meetings examined, included the names of all those who attended.	
Recommendation 3 Ref: Standard 9.6	The record of activities should include information on the qualifications of any activity leader who is contracted in to fulfil this function.	Met
	Action taken as confirmed during the inspection: South West College had provided this information and agreed to update it annually.	

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

Is Care Safe?

Prospects Beacon Centre has service users/members who have a wide range of assessed needs, principally arising from mental illness, although on Fridays the service is provided to a group of people who have learning difficulties. A small number of members had continence promotion and care needs.

Members' care plans addressed these needs clearly and, overall, care planning information was directly relevant to the areas of need for which each person had been referred. Goals were stated and outcomes recorded in the computer based system that has recently been introduced. It was noted that progress notes for each member were of a good standard and were being kept up to date.

In discussions, three members conveyed their feelings of value for the centre and the service provided and spoke of their confidence in the support staff and in the relationships between members who attend. The members confirmed that they had ready access to the facilities they needed and that staff were competent in providing support in all aspects of the day care service. Facilities for service users were found to be clean and well maintained. The acting manager confirmed that appropriate training for the work was provided, including regular refresher training in Safeguarding Vulnerable Adults. The care provided was judged to be safe.

Is Care Effective?

The needs of members were clearly identified in written assessments and the care/support planning information provided clarity on the necessary actions by staff. Members reported that care needs were met effectively within the centre and this was verified in the review reports and monthly monitoring reports that were examined. Monitoring visits were carried out regularly and the well-presented reports showed that the quality of the centre's operations was examined in detail. Appropriate staff training had been provided during 2015, including, Safeguarding Vulnerable Adults, First Aid, Mental Health Awareness and Report Writing. Members who met with the inspector expressed very positive views on the help and support that they gained from the service. Overall, there was satisfactory evidence of the effectiveness of care in response to the needs identified.

Is Care Compassionate?

Throughout the morning of the inspection members discussed with the inspector the many ways in which the service is supportive and compassionate. The three members were unanimous in their view that the service was of great value to them and they confirmed that their attendance at the centre, their relationships with other members and the support that staff provided was largely what helped to keep them well. Records of support plans, care reviews and the regular progress notes were all written in a caring and professional manner, providing evidence of compassionate care being delivered in the setting, including the attention to privacy and dignity of each person.

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?

Discussions during the inspection confirmed that members generally felt safe and secure in the setting. Systems were in place to ensure that risks to members were assessed continually and managed appropriately. Members gave positive reports of very recent input to their group by the PSNI, whose officer provided detailed information and advice on how to keep safe in your own home, particularly with regard to people being distracted by one caller and robbed by an accomplice.

There was written and oral evidence to show that formal opportunities were being provided consistently for members to discuss a variety of matters with staff. Members' meetings were held each month and the minutes of these were good. It was evident that safe care was being provided for members, while appropriate risks were approved in order to promote confidence and independence.

Is Care Effective?

Service users spoke positively about the staff and the manager in the centre, typical comments being:

- "Having this centre gives you a reason to get up and out in the morning"
- "The staff are helpful and there's always someone to talk to if you're feeling unwell"
- "I don't know what I'd do without this place. There's always people who understand what you're going through"

The acting manager presented as knowledgeable of the needs of all the members and she spoke positively of the staff team. There were clear and relevant links between assessments of needs and the support plans that were designed to guide the work with each member. Objectives in support plans were generally written from the perspective of the individual member, giving the whole plan a strong sense of belonging to the member, while also facilitating the recognition of achievement when an objective is reached.

Members' reviews were being held at least annually and there was written evidence of good involvement of members in preparation for these meetings. Records of the reviews examined indicated that the members and the referring agents were satisfied with the service provided.

Monthly monitoring visits were carried out by the service manager whose reports of these visits were well detailed and addressed all of the matters required. It was evident that the service manager had spent considerable periods of time in the centre and was involved in extensive discussions with members and with staff. Overall there was good evidence of effective care being provided.

Is Care Compassionate?

Throughout the morning of the inspection the three members provided good evidence of caring and supportive relationships in operation in the Prospects Beacon Centre. All three members engaged in discussions with the inspector and provided verification of compassionate and effective care being delivered within the day care setting. It was also clear from discussions

that the management and staff responded very positively to suggestions from the members on ways in which the service could be most useful to them. One example of this is the current practice of having member-led sessions every Tuesday. The person who first suggested this was facilitated to take charge of opening and closing the premises so that specified members could meet together socially, in comfortable and familiar surroundings. The centre was judged to be providing compassionate care.

5.5 Additional Areas Examined

The Premises

The premises, consisting of a large general-use room, an office and two toilets, were found to be clean and well organised and the standards of maintenance and décor were good. Members, who contributed to the inspection, reported that the centre was comfortable and well suited to the needs of the group.

Number of Requirements:	0	Number of Recommendations:	0
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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	Susan Foster	Date Completed	08.04.16
Registered Person	Billy Murphy	Date Approved	25/07/2016
RQIA Inspector Assessing Response	Dermott Knox	Date Approved	25/07/16

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