

Unannounced Care Inspection Report 5 March 2020



Donard Day Centre

Type of Service: Day care
Address: Slieve Roe House, Kilkeel, BT34 4BN
Tel No: 02841764096
Inspector: Maire Marley

www.rqia.org.uk

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 service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

3.0 Service details

<p>Organisation/Registered Provider: Southern Health and Social Care Trust</p> <p>Responsible Individual(s): Mr Shane Devlin</p>	<p>Registered Manager: Ms Maureen Smith</p>
<p>Person in charge at the time of inspection: Senior Day Care Worker</p>	<p>Date manager registered: 12 March 2014</p>

4.0 Inspection summary

An unannounced inspection took place on 5 March 2020 from 10.00 to 12.00 hours.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection. This was a short focused inspection to look at recruitment practices and service users experiences in the day centre.

On the day of the inspection, the centre was warm, well maintained and in good decorative order, with no obvious hazards for service users or staff noted.

Service users said:

- “No issues here I wouldn’t change a thing.”
- “Lovely centre, brilliant staff and great food.”
- “Any problems tell the staff they know what to do.”
- “We are well looked after.”

Evidence of good practice was found in relation to staff knowledge of service user’s needs, activities provided, communication with healthcare professionals and families and the cleanliness of the general environment.

One area for improvement was identified during the inspection and related to the further development of information in regard to Enhanced Disclosure information.

The findings of this report will provide the day care setting with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users’ experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with the senior day care worker, as part of the inspection process. The timescales for completion commence from the date of inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 31 May 2018

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 31 May 2020.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this day care service. This included the previous inspection report, the returned QIP, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on communicating with service users and staff to find out their views on the service.

We ensured that the appropriate staff checks were in place before staff work with service users. We examined recruitment records relating to Access NI and NISCC registration.

Questionnaires and “Have we missed you?” cards were provided to give service users and those who visit them the opportunity to contact us after the inspection with their views. A poster was provided for staff detailing how they could complete an electronic questionnaire.

Ten questionnaires were also provided for distribution to the service users and their representatives to give feedback to RQIA regarding the quality of service provision; three responses were returned and the responses within the returned questionnaires indicated satisfaction with all aspects of service provision.

RQIA information leaflets ‘How can I raise a concern about an independent health and social care service’ were also provided to be displayed appropriately in the setting.

During the inspection the inspector met with communicated with twelve service users and three staff.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

The findings of the inspection were provided to the senior day care worker at the conclusion of the inspection.

6.0 The inspection

Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
Area for improvement 1 Ref: Standard 23.3 Stated: First time	The registered person shall ensure there is a competent and capable person in charge of the day care setting, in the absence of the registered manager, at all times. Governance records which evidence that such staff are willing and competent to act up in the manager’s absence should be maintained and regularly reviewed to ensure that these governance processes remain effective and appropriate.	Met
	Action taken as confirmed during the inspection: On the day of inspection there was an	

	experienced senior day care worker in charge of the centre. Competency and capability assessments were in place both for the senior day care worker and a named day care worker who was willing to take charge of the centre in the absence of the manager.	
Area for improvement 2 Ref: Standard 18.5 Stated: First time	The registered person shall ensure that the settings policies and procedures are subject to a systematic three yearly review, and the registered person ratifies any revision to/introduction of new policies and procedures.	Met
	Action taken as confirmed during the inspection: Information in the returned Quality Improvement Plan and a review of a random selection of policies confirmed that the policies had been reviewed and were up to date.	

6.1 Inspection findings

On the day of the inspection, the centre was well maintained and in good decorative order, with no obvious hazards for service users or staff noted. Furniture and fittings were found to be fit for purpose.

During the inspection staff interactions with service users were observed to be compassionate, caring and timely. Staff were noted to stimulate and encourage service users to participate in a range of therapeutic activities that promoted positive outcomes for their health and well-being and encouraged meaningful social engagement. Service users approached staff freely, communicating their needs and making requests and staff responses throughout were noted to be cheerful, warm and appropriate.

Those service users who engaged with the inspector spoke positively about the service and the ongoing benefits of attending the centre.

Service Users' comments:

- "This is a top of the range service, the girls (staff) here are fantastic, you never have to tell them what you want they just know what you like but they always check if you still like it."
- "Staff are excellent no complaints about them."
- "I would like if it was more like the old days, more outings and meals out but I have no complaints about the care or staff."
- "I enjoy the chat, we do our knitting, it's good to meet other people."
- "We are friends here and we help each other."
- We are definitely safe here; staff know how to keep us safe."

Staff Comments:

- “Management are very good, giving you time to do care plans and reports, communication is excellent. I enjoy my work here; it’s a lovely place to work.”
- “Training is very good and effective, we attend a range of courses and complete E learning, all of the training I have received helps me to deliver safe and effective care.”
- “Manager and Band 5 are very approachable, they are very supportive and they listen to your ideas, I am so lucky that I get to use my music skills here.”
- “We provide a varied range of activities, we have daily briefs to inform us and keep us up to date in regard to service user’s needs. We listen to service users and respond to what they are telling us.”
- “Training has helped me to understand why I am doing something in a certain way.”
- “Staffing levels are good and they are maintained.”

The staffing arrangements which had been assessed as necessary to provide a safe service in the setting were discussed and assurances were provided that sufficiently competent and experienced persons are working in the centre to meet the range of needs accommodated.

A sample of duty records examined for the months of December 2019, January and February 2020 contained details of the number of staff on duty; their role, hours worked and confirmed that staffing levels were generally maintained.

The SHSC Trust has a human resources department (HR) that oversees the recruitment processes including pre- employment checks. The senior day care worker described the procedure for ensuring that staff are not provided for work until all necessary checks are completed and confirmed that the outcomes of these checks are retained in HR department. On completion of satisfactory pre-employment checks and verification of supporting documentation the manager receives an email from the H.R department to confirm the staff member can commence duty.

A review of three staff records employed in the centre relating to the recruitment process found the information in place was consistent with the Trust’s procedures. It was noted there was no documentary proof of the date of the Enhanced Disclosure Access N.I pre-employment check or the reference number. Access N.I enhanced disclosure certificates are only accurate on the date of issue and therefore a record of the date the check was completed along with the reference number should be maintained. This is stated as an area of improvement.

Arrangements are in place to ensure that all staff are registered with The Northern Ireland Social Care Council (NISCC). Information in regard to registration and renewable dates are maintained for all staff employed within the centre and were available for inspection. A review of these records and discussion with the senior day care support worker confirmed that all staff are currently registered with NISCC.

Areas of good practice

There were samples of good practice found throughout the inspection in relation to staff knowledge of service users’ needs, range of activities, risk management and the general environment.

Areas of Improvement

One area for improvement was identified during the inspection and related to the further development of information in regard to Enhanced Disclosure information.

	Regulations	Standards
Total number of areas for improvement	1	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with the senior day care support worker, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 agency. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007

<p>Area for improvement 1</p> <p>Ref: Regulation 21 (3) (d)</p> <p>Stated: First time</p> <p>To be completed by: 30 April 2020</p>	<p>The registered person shall ensure the day centre maintains documentary proof of the date of the Access N.I. Enhanced Disclosure Check and the Access N.I. reference number.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken:</p> <p>Th Registered Manager will ensure the Day Centre will hold documentary evidence in the files of all new employees regarding their Access N.I. Enhanced Disclosure Check and the Access N.I reference number.</p>

Please ensure this document is completed in full and returned via Web Portal



The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)