

Unannounced Care Inspection Report 06 October 2017



Orchard Centre

Type of Service: Day Care Setting
Address: Dromalane Road, Newry, BT35 8AP
Tel No: 02830266374
Inspector: Suzanne Cunningham

www.rgia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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

1.0 What we look for



2.0 Profile of service

This is a Day Care Setting with 70 places and is open Monday to Friday. The day care setting provides care and day time activities for adults living with memory loss, mental ill health and service users who are over 65 years of age.

3.0 Service details

Organisation/Registered Provider: Southern HSC Trust	Registered Manager: Maureen Smith
Responsible Individual(s): Mr Francis Rice	
Person in charge at the time of inspection: Maureen Smith	Date manager registered: 18 October 2010
Number of registered places: 70 - DCS-DE, DCS-MP, DCS-MP(E)	

4.0 Inspection summary

An unannounced inspection took place on 06 October 2017 from 09.30 to 14.00.

This inspection was underpinned by 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 and to determine if the establishment was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to staffing and management arrangements; staff competency; training and staff support; safeguarding; risk management; the day care setting environment; care records; audits and reviews; communication between service users and staff; the ethos of the day care setting; listening to and valuing service users; taking account of the views of service users; governance arrangements; management of complaints; quality improvement and maintaining good working relationships.

No areas requiring improvement were identified during this inspection.

Service users when asked for their views about the day care setting responded positively, examples of what they said were: "It's safe here because we are with other people", "I come to the day centre to do activities"; "I like coming here"; "This is a safe place and I am more confident since coming here"; "We can tell staff if we or someone needs help"; "Staff are compassionate, they are watching what is going on"; "This is somewhere to see others and it lifts your spirits"; "I like staff they are lovely, very caring".

The findings of this report will provide the establishment 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	0	0

Details of the Quality Improvement Plan (QIP) were discussed with Maureen Smith, 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.

4.2 Action/enforcement taken following the most recent care inspection dated 8 September 2016

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 08 September 2016.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- The registration details of the day centre
- Information and correspondence received from the registered manager and Southern Health and Social Care Trust
- Incident notifications which revealed ten incidents had been notified to RQIA since the last care inspection in September 2016
- Unannounced care inspection report 08 September 2016.

During the inspection the inspector met with:

- The registered manager
- Fourteen service users
- One support worker and two day care workers.

Questionnaires were given to the staff on duty to distribute between service users, representatives and staff. Three were returned by service users, five were returned by staff and two by relatives.

The following records were examined during the inspection:

- One individual staff record
- Four service users care files
- A sample of service users' daily records
- The complaints/issue of dissatisfaction record from April 2016 to October 2017
- A sample of incidents and accidents records from September 2016 to October 2017
- The staff rota arrangements during September and October 2017

- The minutes of service user meetings held in January, April, August and October 2017
- Staff meetings held in May, August and October 2017
- Staff supervision dates for 2017
- Monthly monitoring reports for July and September 2017
- The staff training information for 2016 & 2017
- The settings statement of purpose.

Five 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 person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 8 September 2016

The most recent inspection of the establishment was an unannounced care inspection.

The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 08 September 2016

Areas for improvement from the last care inspection		Validation of compliance
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		
Area for improvement 1 Ref: Standard 11.3 Stated: First time	The registered person should improve the financial arrangements for collecting service user’s monies. Collecting monies and providing receipts should be completed by two staff that witness the hand-over and sign and date the record in front of the service user when a service user is unable to sign the receipt. This should also be in place for service users whose assessment identifies cognitive impairment for example if a service user has memory loss.	Met
	Action taken as confirmed during the inspection: The records for financial arrangements were cross referenced with the policy and procedure, discussion with staff and service	

	users which revealed improvements had been put in place and were part of staff routine procedure when collecting monies.	
Area for improvement 2 Ref: Standard 22.2 Stated: First time	The registered person should improve staff supervision arrangements. Care staff should receive one individual supervision session no less than once every three months. A record should be kept to evidence compliance in this regard.	Met
	Action taken as confirmed during the inspection: Two staff supervision records were sampled during this inspection and this provided evidence the supervision arrangements had been improved at the time of inspection.	
Area for improvement 3 Ref: Standard 8.2 Stated: First time	The registered person should improve consultation with service users through the service user meeting. The timing, days, frequency and accessibility of the minutes should be improved to enable all service users to attend and ensure all service users have the opportunity to be fully involved in decisions affecting their treatment, care and support.	Met
	Action taken as confirmed during the inspection: The service user meeting records, service user annual survey records were inspected and this improvement was discussed with staff and service users. This revealed the frequency and types of consultation had improved which included a regional initiative in the older people and primary care part of the trust named 10,000 voices. This initiative aimed to use service user feedback to produce a more person centred focused approach to providing services. Overall service users reported their views and comments were being used to shape the care provided individually and for the group activities.	

Area for improvement 4 Ref: Standard 8.5 Stated: First time	The registered person should forward to RQIA with the QIP the outcome report from the annual survey undertaken with service users, relatives and representatives for the period of April 2015 to March 2016.	Met
	Action taken as confirmed during the inspection: This document was sent to RQIA post inspection and was available and up to date at the time of inspection.	
Area for improvement 5 Ref: Standard 18 Stated: First time	The registered person should make appropriate arrangements for the day care setting policies and procedures that direct the quality of care and services to be reviewed. The review should ensure the content of the policies is current and relevant to the care and services provided. All policies and procedures should be dated when issued, reviewed or revised and subject to a systematic three yearly review.	Met
	Action taken as confirmed during the inspection: The day care settings policies and procedures were sampled and improvement was evidenced in this regard at the time of inspection.	

6.3 Inspection findings

6.4 Is care safe?

Avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.

The settings daily staff arrangements and records were inspected for September and October which provided evidence that sufficiently qualified, competent and experienced persons were working in the centre to meet the assessed needs of the service users, taking into account the size and layout of the two premises, the number of service users, safety needs and the statement of purpose. The records of staff working each day showed the capacity in which they worked including who was in charge of the centre in the manager's absence; therefore staff had a clear point of contact from whom they could seek management support in the absence of the manager.

One competency and capability assessment for a staff member who acts up in the manager's absence was inspected, this showed the day care worker who may be in charge can and will undertake management tasks, they understood and had the knowledge to fulfil their role and responsibility in the absence of the manager.

The settings training record recorded staff had received mandatory training and training relevant to their roles and responsibilities. Examples of training staff received in 2016 and 2017 were infection prevention and control; fire training; safeguarding vulnerable adults; manual handling; and food hygiene. Discussion with staff during inspection revealed staff were using the training they received to improve practice and ensure they were providing the best care as driven by standards, guidance and legislation. One staff member described they had completed an art therapy course which they were using to audit activity plans for groups and individuals. They described the audit should find ways to improve the overall outcomes for service users taking part in activities. Overall the inspection found staff were using their knowledge and skills learnt in training to provide safe and effective care in the day care setting.

The examination of the settings incidents, accidents and notifications forwarded to RQIA found safety issues and risks had been identified and managed. Assessments and care plans had been reviewed and updated as necessary to ensure practice was safe and effective. The sample of records inspected indicated the relevant incidents/notifiable events were reported to RQIA and other relevant organisations in accordance with the legislation and procedures.

Discussion with the manager and inspection of records revealed there were no restrictive practices in place confirmed for individual service users and there had not been any safeguarding concerns identified since the last inspection. The front entrance to the setting was managed by staff who answered the door when the bell was rung and if they saw a service user looking to exit they supported them to find out what they needed. One service user communicated they wanted to go home during this inspection which was prior to their normal leaving time. A staff member was observed talking to the service user to see if they wanted to go out or if they were restless, they redirected the service user to take part in an activity and gave them a prompt to help them measure the time that was left before their lift home arrived. The staff member's response to the service user's confusion was observed as compassionate and person centred, the staff member used gentle and comforting gestures to redirect the service user's attention to avoid their behaviour escalating, their response also assured the service users safety in the setting.

During the inspection observations of the environment and inspection of records revealed the environment presented as clean tidy, furniture, aids and appliances presented as fit for purpose. Fire safety precautions were inspected; fire exits were unobstructed, and the fire drill & fire risk assessment had been updated in the last 12 months.

Five staff returned questionnaires to RQIA post inspection, they identified they were "Very Satisfied" to "Satisfied" regarding questions on "is care safe" in this setting. They identified service users were safe and protected from harm in the setting; they had received safeguarding training and other training essential for their role and have working knowledge of safeguarding policies and procedures; they would report poor care to their manager; risk assessments and care plans were in place for service users and they received supervision and appraisal.

Three service users returned questionnaires to RQIA post inspection. They identified they were “Very Satisfied” regarding the questions “is care safe” in this setting. They identified they felt safe in the setting, the setting was comfortable; and they could talk to staff.

Two relatives returned questionnaires to RQIA post inspection. They identified they were “Very Satisfied” regarding the questions “is care safe” in this setting. The questionnaires identified their relatives were safe and protected from harm, they can talk to staff about a range of matters and the environment was suitable.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staffing and management arrangements; staff competency; training and staff support, safeguarding, risk management and the day care setting environment.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 Is care effective?

The right care, at the right time in the right place with the best outcome.

The centre’s statement of purpose and service users guide contained information required by Regulations and Standards and the content was consistent with the settings registration with RQIA.

Four service user’s care files were inspected; they contained the service user’s individual assessments and care plans which reflected their physical, social and emotional needs. Each service user had an individual written plan/agreement which was communicated in an easy read format.

The inspection of the care records found they were maintained in line with the legislation, the assessments of need, risk assessments, care plans and records of health and well-being of the service users were current and had been reviewed. Records were stored safely and securely in line with data protection. Staff discussion and observation of the team meeting confirmed the staff were using the service user records to guide their practice and they were discussing changes to ensure records and staff knowledge was current and relevant.

The service user risk and other assessments were in place, the sample inspected detailed each service users individual needs had been assessed, reviewed and updated. The care planning documentation inspected detailed how each individuals need should be met by staff and this included responding to risks safely, sensitively and effectively. Care plans had been reviewed in a timely manner, referrals to other professionals had been made if needs changed or the plan was not working and advice or recommendations that were given by other professionals were incorporated in an easy read care plan format. The settings management

of service user's records enabled staff to recognise service users' needs and respond to them effectively.

Service user/representative involvement was documented for each review meeting. Systems were in place to review each service user's placement within the centre and ensure that it was appropriate to meet their health and social care needs.

Service users told the inspector they knew the staff in the setting and if they had a concern or worry about their care they could talk to staff who would help them to resolve their concern. One service user detailed how staff had helped them with establishing their routine which kept them well. Another service user gave an example of staff talking to them which had lifted their mood and they said this helped them.

Discussion with staff confirmed they were knowledgeable regarding safeguarding service users in their care, they also confirmed if they had to escalate concerns they would speak to the manager or day care worker in charge. Staff detailed the communication methods that support their work and professional development such as team meetings, supervision, training and informal team discussions. Overall staff were able to confidently express their views and knowledge regarding safe and effective care to support the service users in the most person centred way that was safe effective and met their needs.

Five staff returned questionnaires to RQIA post inspection, they identified they were "Very Satisfied" regarding questions on "is care effective" in this setting. They identified service users got the right care, at the right time, with the best outcome for them; service users are involved in their plan, staff have the right skills, knowledge and experience to care for the service users; there were systems to monitor quality and safety; staff were informed regarding activities; and staff responded to service users in a timely manner.

Three service users returned questionnaires to RQIA post inspection. They identified they were "Very Satisfied" regarding questions on "is care effective" in this setting. They identified they get the right care, at the right time with the best outcome, staff communicated with them, they know their needs and choices, staff helped and encouraged them, they can choose activities and were involved in their day care review.

Two relatives returned questionnaires to RQIA post inspection. They identified they were "Very Satisfied" regarding questions on "is care effective" in this setting. They identified their relative gets the right care, at the right time with the best outcome, staff communicate with their relative, they knew their needs and choices, staff encouraged them to be independent, they can choose activities and were involved in their relatives day care review

Areas of good practice

There were examples of good practice found throughout the inspection in relation to care records, audits and reviews, and communication between service users and staff.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

Discussion with service users, staff and observation of activities and communication found examples of service users being treated with dignity and respect while promoting and maintaining their independence. During discussion with service users they confirmed they were asked their opinion regarding what they like to do in day care and their ideas and preferences were sought for their care plan and activity plan. They said they were happy in the day centre, the food was good, they were helped by staff and staff check with them that they are doing the "right thing". One service user said before they came to this day centre they were quiet and didn't feel confident, they explained since going to the day centre staff had brought them out of their shell, staff always checked with them they were doing right and they now felt a lot more confident generally as a result.

Staff gave examples of activities they had facilitated for service users of all abilities which was informed by service users saying what they wanted to do, examples were art therapy, music, creative activities and people visiting from the community that the service users have suggested. On the day of the inspection a religious service was being facilitated in the main hall and the service users who did not want to take part were doing an activity in another room. Service users were encouraged to choose what they wanted to take part in and were also given the option to spend quiet time away from the activities. Staff were observed using a person centred approach to delivering care, they were encouraging service users to be involved, informing service users of their choices, seeking their preferences and engaging service users in the care and support they were receiving in the setting.

Staff discussed their views about what the day care setting gives service users, they said this setting has a clear role in the community because they help to keep people well and support them and their families to help service users maintain and in some cases improve their independence. The observations of the staff meeting service users' needs provided evidence staff were moving around the groups gently and discretely, most notably there was a very discrete and gentle approach to meeting service users intimate care needs and personal care needs which promoted service users dignity and confidentiality.

Discussion with service users confirmed they were consulted, they gave examples such as in service user meetings which had occurred regularly, the annual survey; as well as being consulted informally by staff throughout the day.

The inspection of this domain confirmed there were robust systems in place to promote effective communication between service users, staff and other professionals. Service users had been enabled them to make informed decisions regarding their life, care and treatment.

Five staff returned questionnaires to RQIA post inspection, they identified they were "Very Satisfied" regarding questions on "is care compassionate" in this setting. They identified service users were treated with dignity and respect, involved in decisions, encouraged to be independent and make informed choices, involved in improvements and informed regarding the service they receive.

Three service users returned questionnaires to RQIA post inspection. They identified they were “Very Satisfied” regarding questions on “is care compassionate” in this setting. They identified they were treated with dignity and respect, staff were kind and caring, their privacy was respected, they could choose activities and they were included in decisions and support they received in the setting.

Two relatives returned questionnaires to RQIA post inspection. They identified they were “Very Satisfied” regarding questions on “is care compassionate” in this setting. They identified their relative was treated with dignity and respect, staff treated their relative well, they had no concerns, they had been consulted and involved in their relatives care and staff advocated for their relative.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the ethos of the day care setting, listening to and valuing service users and taking account of the views of service users.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.7 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

The registration certificate was up to date and displayed appropriately. Staff confirmed they had access to a range of policies and procedures in place that they use to guide and inform their practice. The inspection of a sample of policies and procedures verified they were centrally indexed in an accessible file, they had been reviewed in the last three years and there was a current whistleblowing policy in place for staff reference.

Two supervision records detailed the staff had received recorded individual, formal supervision at least every three months. Inspection of staff meeting minutes revealed they were held at least quarterly and the content recorded detailed discussions of staff being informed regarding changes to service users’ needs, best practice examples, policy and procedure changes, training opportunities and potential to improve practice. The records and observation of the staff meeting on the day of the inspection provided evidence staff discussions were focussed on service users’ needs and improvement.

The complaints record was inspected and this showed no complaints had been recorded since the last inspection.

The manager provided audit records of supervision, care records, infection prevention and control, medications, and the environment. The records showed measures were in place for staff of all grades to monitor the effectiveness and quality of care delivered to service users in this setting, and the measures were consistent with the day care settings regulations and standards. The Regulation 28 monthly quality monitoring visits had been undertaken monthly by the independent monitoring officer. The reports showed the visits were unannounced, included outcomes/action plans, qualitatively reflected service users and staff views and opinions and generally had a quality assurance/ improvement focus.

Five staff returned questionnaires to RQIA post inspection, they identified they were “Very Satisfied” regarding questions on “is care well led” in this setting. They identified staff felt the service was managed well; quality monitoring was undertaken regularly; management responded to and acted regarding any complaints, issues or suggestions; they could approach the manager regarding concerns; staff meetings were held and communication was effective.

Three service users returned questionnaires to RQIA post inspection. They identified they were “Very Satisfied” to “Satisfied” regarding questions on “is care well led” in this setting. They identified they felt the setting was managed well; they knew who the manager was; the staff respond well to concerns, issues or suggestions and they were asked about what they want to do.

Two relatives returned questionnaires to RQIA post inspection. They identified they were “Very Satisfied” regarding questions on “is care well led” in this setting. They identified they felt the setting was managed well; they knew who the manager was; the staff responded well to communication, concerns, issues or suggestions and they had received information about the complaints process and the setting.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance arrangements, management of complaints, quality improvement and maintaining good working relationships.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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

Tel 028 9051 7500
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)

Assurance, Challenge and Improvement in Health and Social Care