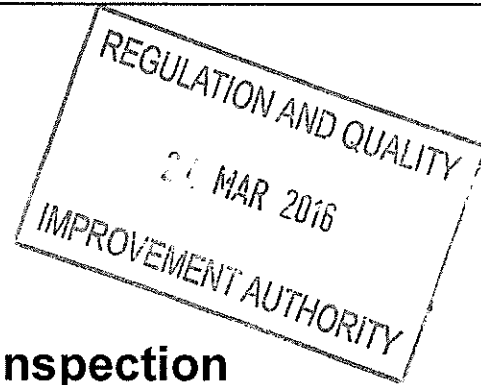


The Regulation and
Quality Improvement
Authority

Drumhaw Day Centre
RQIA ID: 11257
Drumhaw Park
Lisnaskea
BT92 0FT

Inspector: Dermott Knox
Inspection ID: IN023781

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**Unannounced Care Inspection
of
Drumhaw Day Centre**

18 January 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 18 January 2016 from 10.45 to 16.15. 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	3

The details of the QIP within this report were discussed with Mrs Amanda Robinson, Registered Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Western HSC Trust / Mrs Elaine Way, CBE	Registered Manager: Mrs Amanda Robinson
Person in Charge of the Day Care Setting at the Time of Inspection: Mrs Amanda Robinson	Date Manager Registered: 11 November 2011
Number of Service Users Accommodated on Day of Inspection: 14	Number of Registered Places: 16

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
- RQIA log of communications to and from the centre
- Quality Improvement Plan from the previous inspection on 26 March 2015

During the inspection the inspector met with:

- Three service users individually and with five others in group settings
- The registered manager
- One care staff for individual discussion
- In the course of the inspection most of the rooms and communal areas of the centre were visited and inspected for cleanliness, décor, warmth, freshness and suitability for purpose

The following records were examined during the inspection:

- File records for five service users, including care plans and review reports
- Progress notes for five service users
- Monthly monitoring reports for four months in 2015
- Record of complaints, containing no entries
- The statement of purpose
- Service user guide
- Minutes of three service user meetings held in 2015
- Minutes of three staff meetings which are held quarterly
- Staff training records for three staff
- A sample of four 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 26 March 2015. The completed QIP was returned and approved by the specialist inspector.

One issue to follow up was:

The procedures and practice regarding requests for access by service users to their individual records.

5.2 Review of Requirements and Recommendations from the last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
	No requirements were made following the previous inspection.	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 7.3	The registered manager must ensure that a record of requests for individual records is maintained and that a template to record access and outcomes is developed and maintained for each service user, to evidence requests.	Met
	Action taken as confirmed during the inspection: The manager had developed a satisfactory template to meet this recommendation and each service user's file contained a copy of this. At the time of this inspection, no requests for access to records had been received.	

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

Is Care Safe?

The centre's training records showed that training on continence promotion and care was provided on the 29 May 2015. Staff members confirmed that they had significant experience in this area of work and confirmed their confidence in following procedures for personal care provision. One staff member, who met individually with the inspector, confirmed that all staff were appropriately trained for personal care work and were consistent in respecting each service user's privacy and dignity. She also confirmed that continence care products and PPE supplies were satisfactory.

One service user's records provided evidence of objectives related to personal care needs and there was an individual personal care plan, providing sufficiently detailed guidance on the support required for that person. All of the service users, who spoke individually with the inspector, confirmed that they were very happy with the day care and that they enjoyed coming to the day centre. The manager endeavoured to ensure that staff were deployed in sufficient numbers to meet service users' needs and to provide safe care, although there had been challenges in meeting this requirement. Staff are commended for their attention to service users' safety, as evidenced by the absence of accidents or injuries during the period since the previous inspection.

Is Care Effective?

A number of service users had assessed needs with regard to continence care and there was evidence in care plans and from discussions with staff members to confirm that effective care was provided to meet these needs. Review records verified that service users' needs have been identified appropriately and have been regularly reviewed to ensure that care plan objectives remain relevant and accurate. Progress notes were found to be person centred and to reflect the good practice that was observed throughout this inspection.

The manager and staff confirmed that adequate supplies of continence care products were available and that good communications with carers ensure that suitable products were provided for each person.

The evidence from staff and from written records confirmed that effective care was being provided in respect of this standard.

Is Care Compassionate?

Very positive views were expressed by service users on their attendance at the centre and on the quality of the service provided. Service users spoke in praise of the staffs' caring and encouraging attitudes and positive relationships were evident, both from observations and from the various records that were examined.

Staff members presented as being knowledgeable and caring about each service user's needs and compassionate care practice was observed throughout the day. There was also evidence of caring attitudes in the progress records and review reports in each service user's file and overall it was evident that compassionate care is the basis of Drumhaw's service.

Areas for Improvement

Number of Requirements:	0	Number of Recommendations:	0
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5.3 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?

Written records provided evidence of constructive consultation with members and their representatives regarding care plans and the programmes in which they participate. Agreements had been signed by both service user/representative and the provider. There was evidence of regular contacts between some carers and staff members, who felt that this contributed positively to the understanding of service users' needs and wishes. A number of service users require assistance with mobility and staff were observed working attentively with people who were unsteady when walking.

There was written evidence to show that staff members in the centre were appropriately qualified and experienced in their designated roles and that Drumhaw Day Centre provides good staff development through training, supervision and appraisal. The manager and the day care staff have significant experience in social care work and demonstrated good skills in relating to service users. Staff who were observed during the inspection, presented as being calm and confident in their practice. There were systems in place to ensure that risks to service users were assessed regularly and managed appropriately.

Several service users talked happily about their activities and enjoyment at the centre. The available evidence indicated that safe care was being provided by the centre's staff.

Is Care Effective? (Quality of Management)

The centre has quality assurance systems in place, through which policies and procedures are reviewed and updated, the centre's operations are monitored and staff's practice and performance is evaluated. Two of the four policies examined at this inspection need to be reviewed and revised to improve the accuracy and meaning of parts of the content.

Annual reviews evaluate the suitability of each service user's placement, involving the service user and his or her representative/s where possible and appropriate. Staff presented as being knowledgeable about the needs of each person who attends the centre and this was consistent with the written assessments of need and the review reports that were examined.

Monthly monitoring visits and reports were being completed regularly, by the Day Care Services Manager. Four monitoring reports from 2015 were examined and were found to address the required range of issues in sufficient detail. Monitoring visits included meetings with a number of service users and with staff to ascertain their satisfaction with service outcomes and with the operation of the centre. An examination of a sample of the centre's records was carried out on each monitoring visit and findings were reported.

Evidence from discussions and from written records confirmed that service users enjoyed the organised activities for which each person had an activity plan in his or her records. Within the centre there was a range of arts, music and exercise activities and games led by the centre's

staff, who were seen to support service users' involvement. Overall, there was evidence to indicate that the care provided is effective in terms of promoting each service user's involvement and wellbeing.

Five service users' files were examined and were found to be well organised and to contain all of the required information. Good quality records were kept of each service user's involvement and records were regularly audited by the manager and sampled by the monitoring officer during monthly visits. Good quality, effective care was evident throughout this inspection.

Is Care Compassionate?

Service users welcomed the inspector to the centre and engaged readily in discussions about their experiences in attending day care and their relationships both with staff and with each other. Two service user's birthdays were celebrated after lunch on the day of the inspection and one service user commented that everyone's birthday was remembered, even if it had occurred on a day that the centre was closed. It was evident, both from the tone and content of written records and from observations of interactions throughout the day that good quality, compassionate care was being delivered in Drumhew Day Centre. The manager and staff are commended for their commitment to these positive outcomes.

Thanks are due to service users and staff for their open and helpful approach throughout the inspection process.

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

5.5.1 The Trust's review of day care services

The suitability of the facilities for people with complex needs, particularly those who use large wheelchairs, should be assessed, taking account of the available space and the staffing requirements.

5.5.2 Policies and Procedures

Two of the four policy documents examined, "Responding to complex behaviours----" and, "Staff supervision policy", were found to contain, in the former, inaccurate use of language, and in the latter, a contradictory statement regarding supervision not being a management tool. The registered person should review and revise these policies to address the matters discussed with the registered manager in feedback at the end of the inspection.

5.5.3 Staffing

Staff meetings minutes recognised staffing difficulties during the past year, where it has been necessary at times to draw on staffing resources of other facilities. This matter was also raised in discussions with two staff members. The registered person should ensure that staffing in the centre is sufficient to enable staff to meet the assessed needs of service users while also complying with staff's terms and conditions of employment and the NISCC Codes of Practice.

6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Amanda Robinson, registered manager, 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 home/agency/service. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained in this report do not absolve the registered provider/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 provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

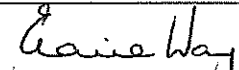
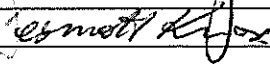
Quality Improvement Plan

Statutory Requirements

There were no requirements arising from this inspection.

Recommendations

<p>Recommendation 1</p> <p>Ref: Standard 18.1</p> <p>Stated: First time</p> <p>To be Completed by: 31 March 2016</p>	<p>The registered person should review and revise the identified policies to address the matters discussed with the registered manager in feedback at the end of the inspection. (Ref; Section 5.5.2)</p>
	<p>Response by Registered Person(s) Detailing the Actions Taken: Both policies identified during the inspection are being reviewed and will be in place by the end of March 2016. The continence Policy has been approved and is currently being uploaded on to the trust intranet.</p>
<p>Recommendation 2</p> <p>Ref: Standards E1-E39</p> <p>Stated: First time</p> <p>To be Completed by: The relevant date</p>	<p>The suitability of the facilities for people with complex needs, particularly those who use large wheelchairs, should be assessed, taking account of the available space and the staffing requirements. (Ref; 5.5.1)</p>
	<p>Response by Registered Person(s) Detailing the Actions Taken: An assessment of the premises and facilities has been undertaken by RQIAs estaes inspector and the Trust back care advisor and no issues or concerns were raised.</p>
<p>Recommendation 3</p> <p>Ref: Standard 23.1</p> <p>Stated: First time</p> <p>To be Completed by: 31 March 2016</p>	<p>The registered person should ensure that staffing in the centre is sufficient to enable staff to meet the assessed needs of service users while also complying with staffs' terms and conditions of employment.</p>
	<p>Response by Registered Person(s) Detailing the Actions Taken: The day centre is currently staffed by three permanent members of staff. An intention to recruit has been submitted for a part time care assistant. In the interim, annual leave and other absences is covered by experienced staff form other day care facilities. This is working well.</p>

Registered Manager Completing QIP	Amanda Robinson	Date Completed	11/03/2016
Registered Person Approving QIP		Date Approved	21.03.2016
RQIA Inspector Assessing Response		Date	20.04.16.

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