





Part of the Healthwatch Staffordshire remit is to carry out Enter and View Visits. Healthwatch Staffordshire Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand. Healthwatch Staffordshire Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Staffordshire safeguarding policy, the service manager will be informed and the visit will end. The Local Authority Safeguarding Team will also be informed.

## **Provider Details**

Name: The Hub  
Provider: DE Healthcare  
Address: St George's House, 19 Church Street, Uttoxeter. ST14 8AG  
Service Type: Day Centre, Learning Disabilities.  
Date of Visit: 6<sup>th</sup> February 2019

## **Authorised Representatives**

This visit was made by three representatives of Healthwatch Staffordshire.

Barbara Jackson and Lindsey Stockton, Authorised Representatives

Ian Wright, Community Outreach Lead / Authorised Representative

## **Purpose of Visit**

Healthwatch Staffordshire is making a series of visits to Day Services throughout the county in order to report on the range and quality of these services. Each service will have an individual report and an overview report on Day Services in Staffordshire will be compiled once the visits are completed.

A good service should...

1. Have strong, visible management
2. Have staff with time and skills to do their jobs
3. Have good knowledge of each individual client, their needs and how their needs may be changing.
4. Offer a varied programme of activities unless a specific service is offered.
5. Offer quality and choice to their clients around food and mealtimes, where applicable.
6. Accommodate clients personal, cultural and lifestyle needs.
7. Be an open environment where feedback is actively sought and used

The methodology to be used is to;

- Consider the care and services offered and whether this is delivered in a way that promotes dignity and independence.
- Consider staffing levels and the level of the care provided.
- Talk to people using the service, if they are happy and willing to do so to gain their views on the opportunities available to them.
- Talk to relatives, if they are available to ask if they are happy with the care provided to their relatives and whether they are aware and feel able to report any concerns/ complaints.
- Consider staff training and the support offered to enable staff to do their jobs well.
- Observe interaction at all levels between clients, staff, Manager, and visitors.

## **Physical Environment**

### **External**

The Hub occupies a central position in Uttoxeter. It is clearly signposted from the road, and the entrance is easily accessible. The exterior of the building is well maintained and in good decorative order. There is no visitor parking, but a large Pay and Display car park is within walking distance. There is no outdoor space for client use, but a variety of outdoor activities are available.

Access to the Hub is gained via intercom.

It is unclear as to the extent of CCTV coverage, as DE Healthcare are tenants in the building, and CCTV is the responsibility of the landlords.

### **Internal**

There is a Visitors Book but we were not asked to sign it upon arrival. This was mentioned to the management during the course of our visit.

The interior is bright and airy, with all décor, equipment and furnishings in good condition.

All areas appeared clean and free of clutter, with no malodours.

Toilet facilities are shared by staff and clients, with the provision of 2 x Ladies, 2 x Gents and 1 x Disabled.

## Client Numbers

The Hub can accommodate a maximum of 20 service users. At the time of our visit there were 9 service users.

## Staff Numbers

Staff type	Total	Morning / Afternoon
Trained / Qualified Activity Leaders	1	1 Senior
Carers / support staff	2	2 Support Workers
Maintenance	1	As required
Administration	2	2 Business Administrator and HR
Management	2	Operational Lead Operations Director

## Management

**Management - A good service should have strong visible management.**

**The manager should be visible within the service, provide good leadership to staff and have the right experience for the job.**

### Our findings

The Senior is based in the client area of the Hub. She has an office but spends a great deal of her time interacting with the clients. The Operations Lead is based downstairs but plays an active role in the client area and is obviously well known to staff and clients.

The Operations Lead is a qualified Learning Disabilities Nurse and has been in post since September 2018. The Senior has been in post since the Hub opened 4 years ago. She has worked in care homes and day care facilities since leaving school and has an NVQ in care.

The organization as a whole has a robust management structure to whom the Operations Lead reports. The organization also has a Clinical Lead who was on site at the time of our visit.

## Comments

Strong and visible leadership was evident at the time of our visit.

## Staff Experiences and Observations

Quality Indicator 2 - Have the staff the time and skills to do their jobs

Staff should be well-trained, motivated and feel they have the resources to do their job properly.

### Our findings

Staff feel very positive about the service they provide to clients. Staff retention is good.

Staffing levels at present reflect a client base of 9. With the maximum number being 20, staffing levels would be increased as necessary to cover any additional clients.

Extra staff can be drawn in from other arms of DE Healthcare. Any supported care/residential clients accessing the day service will be accompanied by their own carers.

Temporary staff are only very rarely used.

A client's staffing needs are assessed prior to their accessing the service and staffing hours adjusted accordingly.

DE Healthcare has been awarded Employer of the Year at the British Care Awards.

DE Healthcare maintain a staff training matrix.

Mandatory staff training includes;

Emergency Aid, Safer Handling, Safeguarding, Fire Safety, Food hygiene, Epilepsy, Coping with aggression in the workplace, Challenging Behaviour, Diet & Nutrition, Infection Control, Care \* Administration of medications, Health & Safety, Mental Capacity Act (MCA), Deprivation of Liberty Safeguarding (DoLS).

Additional training is available if requested by individual staff members, for example Makaton, which the Senior has expressed an interest in.

Other addition training available includes:

Care Planning, Supporting people with Autism, Diabetes, Mental Health Matters, Person Centred Planning (PCP), Equality & Diversity.

Staff have 6 weekly Supervisions and annual Appraisals. The Operations Lead's Supervisions are carried out by the Operations Director.

All staff are manual handling trained and the Senior is a manual handling trainer.

### Comments

The various arms of the organisation ensure that adequate staffing levels can be maintained without the need for temporary or bank staff.

Although day services are not formally regulated, DE Healthcare are able to share policies and procedures from the other (regulated) arms of their organisation, for the benefit of staff and clients. Their most recent CQC report was Good.

## Quality Indicator 3 - Do staff have good knowledge of each individual client, their needs and how their needs may be changing

Staff should be familiar with clients' histories and preferences and have processes in place for how to monitor any changes in wellbeing.

### Our findings

Initial assessments are carried out on all clients expressing an interest in attending the day service. This is usually performed by the Operations Lead and the Senior. If there is a delay between the assessment and start date then the assessment will be repeated to ensure it is fully up to date.

A comprehensive personal care booklet is then compiled for each client, an example of which was seen at the visit.

We were given copies of:-

Initial Client Assessment

Client Booklet "About Me"

Daily Care Sheet

Safeguarding Adults

These documents are clear and concise. Care staff on duty document any changes on the Daily Care Sheet and also notify the Operations Lead.

A review with parents/carers is held 6 weeks after a client starts attending the service.

Each client has a diary, which is shared between the Hub and their home, with entries being made in both locations and information shared.

Staff are all DBS checked and have safeguarding training. An easy read safeguarding booklet is available for clients to address any concerns they may have.

All information for clients is available in easy read format. PECS (Picture Exchange Communication System) and Boardmaker are used for communicating with clients.

Clients' physical needs are assessed prior to entering the service, and any additional equipment is purchased as necessary. The Hub can accommodate wheelchair users but would struggle with any clients who required mobilization with a hoist.

### Comments

All aspects of a client's needs are assessed at the point of entry and regularly updated by the Operations Lead/Care Team as changes occur.

## Activities

### Quality Indicator 4 - Does the service offer a varied programme of activities?

Services should provide a wide range of activities and support clients to take part in activities, unless the service offers a specific type of service rather than a wider range of opportunities.

#### Our findings

Indoor	Off-site	Visits / trips out	Themed Monthly Events e.g.
Woodwork	Leisure Centre (Able Too)	Theatre	Halloween
Arts & Crafts	Swimming	Shopping	Christmas Paty
Bingo	Choir	Day Trips	Valentines
Quiz	Tea Dance		Talent Show
Karaoke	Farm		Film nights
Cooking			Race nights
Wii games console			Summer BBQ
Sensory Room			Fireworks Display
Computers			
Air Hockey			Other
Pool			Emotional Well-being classes
Tuck Shop			Anger Management
Breakfast Club			
Budgeting Skills			

Transport is provided in either a 9 seater people carrier or car. Both vehicles have weekly checks, (oil, water, tyres), carried out by the staff with assistance from clients.

Clients have the option of attending a local Adult Disability Club to address their physical health needs.

A client's need for 1:1 activities is assessed at the point of entry and staff hours provided accordingly. Any specific interests are also recorded at a client's assessment and accommodated as far as possible.

Daily feedback forms are completed by clients to assess their enjoyment of activities and to inform future activity provision.

It is intended to introduce targets for individual clients, associated with activities, for example one client is working towards making his own sandwiches.

Clients are supported in securing, attending and maintaining work placement. In house work experience is offered with the management in the Head Office and serving in the shop.

#### Comments

There are a wide range of formal activities on offer, as well as activity areas where individual clients can spend time as they wish. It is important that this is encouraged by staff to ensure that clients are adequately occupied.



## Catering Services

### Quality Indicator 5 - Does the service offer quality, choice around food and mealtimes?

If relevant, Services should offer a range of meal choices and adequate support to help clients who may struggle to eat and drink and accommodate different preferences and needs around individual dietary requirements.

#### **Our findings**

No meals are provided by the Centre, with the exception of the weekly breakfast club when staff and clients cook a full English breakfast together.

Clients either bring their own lunch in, go into town to buy it, or buy the ingredients to cook their own food with the help of the staff. Staff sit with the clients at lunchtime and can provide any necessary assistance with eating and drinking.

The centre liaises with the Speech and Language Therapy team, and the staff are proactive in identifying any issues with intake of nutrition, for example choking or weight control. They will then work with the family and health professionals to address any issues.

#### **Comments**

Of limited relevance as meals not provided.

### Quality Indicator 6 - Does the service accommodate clients personal, cultural and lifestyle needs?

Services should be set up to meet residents cultural, religious and lifestyle needs as well as their care needs, and shouldn't make people feel uncomfortable if they are different or do things differently to other clients.

#### **Our findings**

Personal care is not offered by the centre, although staff will assist clients with toileting needs, and will advise and support regarding personal hygiene.

A comprehensive assessment of each client's needs and preferences is taken prior to them being accepted into the service. This includes religious preferences, and clients can be taken to places of worship or worship can be facilitated in house.

Personal interactions between clients are closely monitored and friendships encouraged, both amongst the day centre clients, but also clients from residential and supported living. Similarly, if any friction is observed steps are taken to mitigate any issues, eg arranging separate activities.

#### **Comments**

Clients are treated very much as individuals in an extension of their own living environment.

## **Client Experiences and Observations**

The atmosphere in the centre appears happy and relaxed, and conversations with individual clients reflect that this is how they are feeling. They enjoy the variety of activities on offer, interaction with the other clients and members of staff, and any special roles they are given. Our guided tour was provided by one of the clients, who was very informative about all the facilities on offer. They receive great encouragement from the staff and are very proud of their achievements, eg. winning the quiz, or creating something in woodwork,

## **Family / Carers experiences (if available)**

No family or carers were present at the centre at the time of our visit. However, Healthwatch Staffordshire have received feedback directly to their office from one parent whose son has started attending The Hub for two days a week. The feedback was positive the parent expressed their view that the service was of good quality, met the needs of her son and that both she and her son were happy with the service.

**Quality Indicator 7 - The service should be an open environment where feedback is actively sought and use.**

**There should be mechanisms in place for clients and relatives to influence what happens in the service, such as a Clients and Relatives Committee or regular meetings. The process for making comments or complaints should be clear and feedback should be welcomed and acted on.**

## **Our findings**

Daily feedback forms are issued to clients as outlined above. The content of these forms has influenced change, for example altering the 1:1 client/carer ratios where care needs have changed. If clients state on their forms that they have not enjoyed their day, this is taken forward by the Operations Lead and members of staff.

Regular questionnaires are sent out to parents/carers, and a relatives meeting has been scheduled for the end of February. The centre operates an open-door policy if family want to come in at any time.

Monthly newsletters have previously been issued, but these have been temporarily suspended in order to make any amendments resulting from the new GDPR regulations. The latest issue is now in draft form and will be sent out to all families once completed.

An open day is scheduled for later in the year.

There is a formal complaints procedure in place, and a booklet outlining this is available within the centre. There is also an easy read version of the booklet for the use of clients. Complaints are addressed to the Operations Director and responded to in discussion with the Operations Lead. The centre does not make use of any independent advocacy organization but staff will support any clients wishing to make a complaint and refer to other organisations as appropriate.

## **Comments**

The centre and organization as a whole appear very keen to involve clients and their families in designing and remodeling the provision of care.

## **Additional Information**

The Hub currently operations between the hours of 8 a.m. to 5.30 p.m., however they are able to support from 8 a.m. to 10 p.m. if the need arises.

## **Summary, Comments and Further Observations**

Day services are not formally regulated by CQC which can make it difficult for a provider to establish a framework within which to operate. However, it is clear that DE Healthcare have worked hard to draw upon their knowledge and experience gained from the regulated activities they offer, namely residential care and supported living, to define the parameters within which the Hub operates and the standards to which they adhere.

We found that the centre met all of the Quality Indicators that are considered within this report and provided a well managed, caring and responsive service.

## **Comments**

It was a pleasure to visit the Hub and thank you again to the staff and clients for making us feel so welcome

## **Recommendations and Follow-Up Action**

Staff must ensure that visitors to The Hub complete their details in the Visitors Book.

## **Provider Feedback**

**The Manager of DE Healthcare provided the following feedback about the visit.**

When asked us what they felt worked well about the way the Authorised Representatives carried out the recent Enter and View visit, they responded;

***The staff members who visited the Hub to carry out the visit, were very knowledgeable and approached each question thoroughly, allowing us to share examples of how each of the standards are met. We were given time to respond and felt comfortable in highlighting the positives and negatives for clients looking for day opportunities.***

***The representatives took the time to engage with the clients accessing the Hub, which was really positive. The clients reported after that they enjoyed taking part in the visit and I have since shared the draft report with them (which they are very pleased with!)***

***The representatives were keen to view all the documentation used and we were happy to share copies for future reference.***

When asked were there any aspects of the Enter and View visit which you felt did not work well or could be improved, they responded;

***No, overall, I felt that it was both a positive and beneficial visit and as a team we would welcome further visits.***

When asked, as a provider of a service, did the Enter and View visit help you to identify areas for improvement and if so, in what way, they responded;

*It was really refreshing to engage in a discussion around day opportunities and the benefits of some form of quality visit/monitoring. The visit enabled us to share current practice initiatives that we have introduced and when the other day opportunities reports are published, we will be able to benchmark our current provision. As a team we feel empowered following the visit to continue to develop the services we offer and ensure we continue to meet and hopefully in the future exceed the quality standards.*

**DISCLAIMER**

Please note that this report only relates to findings we observe on the specific date of our visit. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time.



## Healthwatch Staffordshire

Room 31, Staffordshire University Business Village  
Dyson Way, Staffordshire Technology Park  
Stafford  
ST18 0TW

<http://healthwatchstaffordshire.co.uk/>

email: [enquiries@healthwatchstaffordshire.co.uk](mailto:enquiries@healthwatchstaffordshire.co.uk)

Freephone 0800 051 837

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