



**Nottinghamshire  
County Council**

# **Quality and Market Management Team Quality Monitoring Audit Form**

**Portland College Day Services, The Limes,  
The Centre at St Peters, and Kingsway Hall.**

## Service / Scheme Details

Company:	Portland College
Service / Scheme Name and address:	Portland College Day Services, The Limes, Nottingham Road, Mansfield NG18 4TJ
Service Representation	Matt Gallagher – Day Service Manager & Kerri Cutts – Deputy Manager
CQC Provider ID (if applicable)	N/A
CQC Location ID (if applicable):	N/A
Date of last CQC Inspection (if applicable)	Not regulated by CQC
Quality and Contracts Officer (QCO):	Chris Longden
Date of visit:	04/07/2024 The Limes 23/07/2024 St Peters 24/07/2024 Kingsway Hall

## Service / Scheme Information

Service Type:	Day Opportunities
Service Manager:	Matt Gallagher
Service Occupancy:	91
Number of Voids (if applicable):	N/A
Visual Assessment of Property / Facilities at time of visit	<p>The Limes Day Service at Portland College is located on the Portland College campus within its own building. The centre has several rooms to support different activities and needs such as arts and crafts, games room and life skills. All these rooms were observed to be clean and tidy and free from any obstructions or hazards.</p> <p>The Centre at St Peters is one of two Portland College day services Hub sites located in the community. This Hub is in a modern purpose-built centre located in Ravenshead. The Centre is clean, tidy, and well presented, being free from any hazards or obstructions. The day service Hub permanently functions from one of the many rooms available in the centre, providing day opportunities experiences in the community, away from the main campus. This hub focuses on crafting and enterprise. Citizens attend the Hub and craft items such as bracelets, phone attachments and necklaces for spectacles. These items are sold at Portland College and other craft fayres. Revenue made from the sold items is put back into the hub for materials and used to support other activities for the Portland College day opportunities.</p>

	Kingsway Hall is a Portland day service hub based in a community hall situated in Forest Town, Mansfield. This day service focuses on performing arts, singing, dancing and skills and confidence development. The performs two productions a year for the local community and will design and create their own props and costumes, including promotional posters and tickets. The hall is clean, tidy, and well presented, being free from any hazards or obstructions.
<b>Any planned work / change to the service?</b>	There are no plans for any structural changes to the services. The Day Service Manager advised of plans for changes to service delivery in terms of opening on Saturdays. Planning for this will commence from September 2024.

### Background to Visit

As part of the Quality and Market Management contracting management cycle, a Quality Monitoring Audit will be carried out to all contracted providers to monitor services to validate evidence of contractual compliance, good practice. This visit was an Annual Quality Monitoring Visit.

## **Standard One: People who use the service experience outcome focussed person centred care:**

People who receive a care service receives outcome focussed person-centred care, which considers their choices and preferences. Care is provided in a positive risk-taking environment, which supports people to make decisions regarding their care.

### **1.1 Do people have a person-centred/ positive behavioural support plan that has been reviewed in line with their assessed needs or when there is a change in needs. People and / or families / advocates are involved in the process and can contribute their views.**

Person 1:	KM (100702579)	Date of last review:	29/11/2023
Person 2:	AB (5028164)	Date of last review:	12/06/2024
Person 3:	MC (4038751)	Date of last review:	06/03/2024
Person 4:	KG (5032617)	Date of last review:	27/10/2023
Person 5:	HW (6020191)	Date of last review:	17/07/2024
Person 6:	AH (100189266)	Date of last review:	31/05/2024
Person 7:	LH (100082142)	Date of last review:	31/05/2024
Person 8:	GL (5038443)	Date of last review:	10/07/2024

#### **Observations:**

##### **The Limes**

The Day Service Manager informed us that people who use the various day opportunities at Portland College prefer to be called 'Citizens'.

We observed three care and support plans for citizens attending the service. The care and support plans for Portland College are both paper based and replicated electronically on the bespoke Portland College Day services app. This can be accessed by the Day Services team either by laptops, iPads, and mobile devices. All electronic devices are password protected.

We observed that all care and support plans for Portland College include a one-page profile at the front of the plan. This shows an up-to-date picture of the citizen, relevant details, emergency details, GP information, timetable, medication and any allergies and allergy management where required. We saw evidence that these are reviewed and updated regularly, for example, KM's care plan had been updated and reviewed on 04/06/2024.

We saw that Care and Support plans were fully evaluated/reviewed and updated regularly so always reflective of current Care and Support needs. We observed care and support plans to include review and amendment forms at the front of the plan. These are easily identifiable and clearly show when the review or an amendment has taken place, including what the amendment was for. For example, we saw evidence that a review and amendment was conducted on 06/03/2024, for MC around updates to likes and dislikes.

We saw that life history information has been gathered in enough detail to ensure staff have an awareness of family, past experiences, choices, preferences, and interests. Care and support plans have been developed with the person (with MCA) and / or family members. For example, we saw recorded in one care and support plan, evidence of involvement from their mum regarding the safe keeping of the citizen's money. There was evidence of an up-to-date Mental Capacity assessment and Best Interest Decision being carried due to the citizen being identified as lacking capacity around finances. The LPA had been considered and provided input throughout the process.

We also observed communication in another citizen's care and support plan from their Social Worker. This related to a review regarding the citizen now being assessed to access the Hydro pool. The care and support plan update, amendment and review could be clearly identified and dated 12/06/2024. Hydro swimming was clearly identified as now being added to the citizen's timetable, with all relevant risk assessments and documentation to support, now included in the care and support plan.

Care and support needs were fully documented and considered the physical, mental, social, emotional, and spiritual needs of the citizen and reflective of their assessed needs. For example, we observed evidence of SALT assessments that included how to assist the citizen, resources used, expressive skills such as body language and vocalisation and being part of the community.

We observed care and support plans to include an 'About Me' document, this was person centred, included the citizens timetable, mobility needs, activities, and goals. For example, we saw evidence that KM attends The Limes 3 times a week and The Kingsway Hub 2 times a week. We saw that one of KM's current goals is to use emotion cards with staff and fellow citizens to help express how he is feeling. This goal is currently ongoing.

We observed Positive Behaviour Support plans (PBS). We found these to be very detailed and specific to the needs of individual citizens. We found them to include the various types of behaviours that can be displayed such as agitation, hitting out, anxiety etc. List of known triggers for example not having preferred staff members, high pitch noises, and strategies, for example, 1:1 support, access to a resource box or calming activities after more physical activities. The PBS also included the details on physical intervention. The Day Service Manager informed us that all staff are trained to Level 1 in NAPPI UK, and this is included as part of the induction process for all new / probationary staff members.

#### **The Centre at St Peters**

The Day Service Deputy Manager informed us that people who use the various day opportunities at Portland College prefer to be called 'Citizens'.

We observed 2 care and support plans of NCC citizens attending the Centre at St Peters Hub on the day of the audit. The care and support plans for Portland College and its hub sites are both paper based and replicated electronically on the bespoke Portland College Day Services app. This can be accessed by the team either by laptops, iPads, and mobile devices. All electronic devices are password protected.

The Deputy Manager informed us that the care and support plans of the citizens attending The Centre at St Peters are kept at The Limes, Portland College campus overnight. They are collected in the morning from the main campus and brought to the hub, along with medications and any other items required at the hub for that day. The Deputy Manager confirmed that all items are returned and signed for at the main campus at the end of the day.

We observed that all care and support plans for Portland College include a one-page profile at the front of the plan. This shows an up-to-date picture of the citizen, relevant details, emergency details, GP information, timetable, medication and any allergies and allergy management where required. For example, we saw evidence on KG's one page profile, that they have allergies such as hay fever and allergic to Phenytoin medication (anti-epileptic medication). We saw an Epilepsy warning clearly highlighted on the one-page profile. It instructed staff to contact 999 in the event of a seizure, and to follow the Rescue Plan in the care and support plan. This was also evidenced in the Health and Medication section. We saw evidence to inform staff that paramedics are to administer the PRN Buccal Midazolam for KG.

We saw that Care and Support plans were fully evaluated/reviewed and updated regularly so always reflective of current Care and Support needs. We observed care and support plans to include review and amendment forms at the front of the plan. These are easily identifiable and clearly show when the review or an amendment has taken place, including what the amendment was for. For example, HW's care and support plan had been reviewed and updated on 17/07/2024 to now include swimming. The review and update had been clearly dated and signed by a staff member, referring to documents that had been reviewed and updated in the care plan.

We saw that life history information has been gathered in enough detail to ensure staff have an awareness of family, past experiences, choices, preferences, and interests. Care and support plans have been developed with the person (with MCA) and / or family members. For example, we saw that one citizen's care and support plan had been written in blue. We were informed by the Deputy Manager that it is in blue because the citizen has Dyslexia and the blue aids them to read and contribute to the updating of their own care and support plan.

Care and support needs were fully documented and considered the physical, mental, social, emotional, and spiritual needs of the citizen and reflective of their assessed needs. For example, we observed how one citizen needed support with eating and drinking. The care and support plan clearly documented how staff are to provide supervision around these times, particularly providing close supervision with hot drinks. We saw another example of where a citizen has an up-to-date Epilepsy support plan.

We observed care and support plans to include an 'About Me' document, this was person centred, included the citizens timetable, activities, and goals. For example, we saw evidence we saw that one of the current goals is to explore future work experience opportunities and to support this they have helped with the craft markets and promoting events for this, creating posters, costumes and tickets for the event, and supporting around the campus.

### Kingsway Hall

The Manager informed us that the care and support plans of the citizens attending Kingsway Hall are kept at The Limes, Portland College campus overnight. They are collected in the morning from the main campus and brought to the hub, along with medications and any other items required at the hub for that day. The Manager confirmed that all items are returned and signed for at the main campus at the end of the day.

We observed that all care and support plans for Portland College include a one-page profile at the front of the plan. This shows an up-to-date picture of the citizen, relevant details, emergency details, GP information, timetable, medication and any allergies and allergy management where required. For example, we saw evidence that one care and support plan clearly state that staff need to be proactive if GL shows signs of heightened levels of agitation, providing clear guidance for staff such as changing the environment, moving to a quieter and calmer area to avoid over stimulation, follow the agreed timetable as per the guidance in the PBS.

We saw that Care and Support plans were fully evaluated/reviewed and updated regularly so always reflective of current Care and Support needs. We observed care and support plans to include review and amendment forms at the front of the plan. These are easily identifiable and clearly show when the review or an amendment has taken place, including what the amendment was for. For example, we saw that one care plan had been reviewed and updated on the 10/07/2024 following a social care review that took place on the 9/07/24. New guidance has now been added to include 30-minute weekly check ins with a preferred member of staff.

We saw that life history information has been gathered in enough detail to ensure staff have an awareness of family, past experiences, choices, preferences, and interests. Care and support plans have been developed with the person (with MCA) and / or family members. For example, we saw evidence that one citizen has a great interest in Star Wars, sword fighting, pigeons, going to the gym, yoga, and swimming.

Care and support needs were fully documented and considered the physical, mental, social, emotional, and spiritual needs of the citizen and reflective of their assessed needs. For example, we saw that one citizen had stated that they live at home with their mother and that their family, and friends are very important to them.

We observed Positive Behaviour Support plans. We found these to be detailed and specific to the needs of individual citizens. For example, we saw one PBS for a citizen that receives constant 1:1 support. The PBS lists primary preventative strategies such as a varied timetable, consistent staff members and interests. Secondary strategies such as calming environment, daily routine, and the use of stress balls. Triggers and fast triggers such as prolonged and sudden loud noises, over stimulation and changes in mood.

## **1.2 Does the Person's support plan promote and evidence a strength-based approach around goals and outcomes which identifies patterns of daily living.**

Person 1: KM (100702579)

Person 2: AB (5028164)

Person 3:	MC (4038751)
Person 4:	KG (5032617)
Person 5:	HW (6020191)
Person 6:	AH (100189266)
Person 7:	LH (100082142)
Person 8:	GL (5038443)
Observations:	<p>We looked at the care and support plan records for citizens who attended Portland's Day Opportunities. We found that they were clear, concise, and easy to navigate. Care and Support plans focused on individual strengths and personal preferences and reflective of initial assessment of need.</p> <p><b><u>The Limes</u></b></p> <p>We saw that one citizen's goal was to access the community and through the use of communication aids, be empowered and confident to express needs. We saw evidence that SALT assessed this and worked with the citizen and staff team to train on the use of the TALK Tablet App on the iPad. We saw an example that the citizen can now successfully ask for a coffee and express basic need. The citizen is also able to inform people if they are happy or sad with the app. This is an ongoing, progressive goal.</p> <p>We saw evidence of effective 1:1 delivery in line with assessed needs and that documentation supported this. We saw that this enhanced level of care for example 1:1 support whilst attending the day service did not impact on service delivery for others and people did not have to wait for care and support to be delivered. This was clearly documented in the citizens care and support plan and where a more extensive level of 1:1 support was required, there would be clear instructions and guidance. We saw that one citizen required consistency around the staff that supported them. Current pictures of the staff were included and available for the citizen to look at and any changes to staff that might be required, the citizen would be notified well in advance where applicable to avoid any distress or anxiety. This has recently been put in place and had been documented in the care and support plan on the 04/06/2024, with clear guidance for staff put in place and a script had been created for the citizen to aid with this.</p> <p>We found that daily running records reflected the care delivery provided at Portland College and matched the care and support planning. For example, we saw in one care and support plan that one citizen wanted to become more independent using technological aids, we saw in running records, evidence from staff the citizen was using aids to communicate their wishes and needs when expressing that they wanted a drink.</p> <p><b><u>The Centre at St Peters</u></b></p> <p>One citizen goal was to learn to budget, and they were supported to learning about budgeting with money by providing staff to support with this. This goal is ongoing, and the Deputy Manager showed us how the goals are tracked on the Portland College app, staff will provide updates and when the goal has been achieved the goal will be marked as complete and the care plan updated accordingly. New goals will be discussed with the citizen and added to the care plan when current goals are completed.</p>



The Deputy Manager informed us that there is no 1:1 or 2:1 support required at The Centre. They advised that support may be required with personal care needs and if this is required the level of support would be recorded on the care log in the Portland College Care app. The Deputy Manager showed us the section on the app that would require completing. This included fields for date, time and the level of assistance required to support the citizen.

### Kingsway Hall

One citizen was working towards creating a TV channel workbook to display their creativity and inform others about their interests. Another citizen was actively working to build up their confidence in performing arts at Kingsway Hall. We saw evidence of this citizen on the stage performing a song and dance from the latest production of Willy Wonka. We saw an example of another goal where the citizen is actively encouraged to speak to staff if they are feeling upset or troubled about anything. The guidance clearly sets out that the citizen will speak to a staff member for assurance to avoid the citizen going home feeling upset. This would be recorded in the running records and care and support plan as and when the situation occurred. This is currently an active goal as there had been no instances that needed recording.

We saw evidence of effective 1:1 delivery in line with assessed needs and that documentation supported this. We saw that this enhanced level of care for example 1:1 support whilst attending the day service did not impact on service delivery for others and people did not have to wait for care and support to be delivered. We observed LH being provided with 1:1 support whilst at Kingsway Hall. The Manager informed us that the staff member supporting was one of LH's preferred staff members as outlined in the care and support plan and the PBS. The PBS listed preventative and secondary strategies such as preferred activities, consistent staff members and structure. We also saw a list of reactive strategies and post incident support, for example, offering reassurance, contacting family to speak to LH on the phone, and going for a walk.

## **1.3 Do people have a risk assessment that has been reviewed in line with their assessed needs or when there is an identified change in need.**

Person 1:	KM (100702579)	Risk Assessment Date:	04/6/2024 04/6/2024 20/6/2024
Person 2:	AB (5028164)	Risk Assessment Date:	12/6/2024
Person 3:	MC (4038751)	Risk Assessment Date:	14/6/2024
Person 4:	KG (5032617)	Risk Assessment Date:	27/10/2023
Person 5:	HW (6020191)	Risk Assessment Date:	18/04/2024
Person 6:	AH (100189266)	Risk Assessment Date:	31/05/2024
Person 7:	LH (100082142)	Risk Assessment Date:	31/05/2024

Person 8:	GL (5038443)	Risk Assessment Date:	10/07/2024
Observations:	<p>We looked at the care and support plans for citizens attending Portland Day Opportunities. The care plans identified areas of need and any associated risks or hazards. Where a risk/hazard had been identified, there was a corresponding risk assessment. The risk assessments balanced safety with people's right to make choices. Consideration was given to the requirements of the Mental Capacity Act 2005 (MCA).</p> <p>We found that the risk assessments were person centred, detailed, and clearly included the person at risk, the identified risk / activity, control measures and risk assessment method.</p> <p><b><u>The Limes</u></b></p> <p>We looked at one risk assessment for a citizen, it was detailed and covered the area of interactions with others. It clearly identified the specific risks to the citizen and any subsequent risks. Triggers were clearly identified such as noise levels and busy environments. It clearly identified control measure where clear and staff were to access quiet and calm environments to allow the citizen to calm. They should be supportive and encourage the citizen to leave the environment whilst offering positive emotional support. This was reviewed 14/06/2024.</p> <p>We observed a risk assessment for a modified diet. This was in conjunction with input from SALT following their assessment. The risk assessment was for a level 6 diet (soft and bitesize consistency). The assessment provided details to follow to ensure food was of the right size and consistency and control measures and signs to be aware of such as signs of aspiration and to seek medical advice immediately if identified.</p> <p>We observed another detailed risk assessment to support a citizen with personal care whilst using manual handling techniques for transfers. We found the assessment to be clear and concise, providing clear instructions for staff dependant on the environment and situation. For example, there were protocols to follow around communication, using precise, short sentences, offering reassurance throughout and the citizen to use communication aids when communicating with staff. Appropriate attire and PPE to be worn and to ensure the environment is fit for purpose before undertaking the task.</p> <p>We found that risk assessments had been reviewed regularly or as the persons needs changed. We found that the reviews included the views of the citizen and their family members, their carers, significant others in their lives, their appropriately registered Lasting Power of Attorney. Where people had not been included in the review, the rationale had been documented.</p> <p>We also observed general risk assessments which have been completed for the Portland College day services. These are electronically recorded in the desktop items supplied by the Day Service Manager. They include risks such as fire, use of cleaning materials and slips and trips.</p> <p><b><u>The Centre at St Peters</u></b></p>		

For example, we observed a risk assessment for Healthy eating and fluid intake. We saw evidence that the Mental Capacity assessment was carried out with the citizen, exploring any allergies or intolerances and any special dietary needs, the impacts to health with unhealthy choices. Responses from the citizen are clearly documented, describing that the citizen was using the aid of symbols to assist with their answers. The capacity assessment deemed that the citizen lacked capacity regarding healthy eating and a Best Interests decision was subsequently completed on the 04/06/2024.

We saw another example of a risk assessment where a citizen required support due to Epilepsy. The risk assessment clearly detailed allergies to a particular type of epilepsy medication – Phenytoin and that the citizen is prescribed Buccal Midazolam. We saw instructions for staff in the event of a seizure, that they are required to call 999 immediately as stated in the Epilepsy support plan and for Paramedics to administer the Buccal Midazolam.

We saw a general risk assessment for the Centre. This was reviewed 09/01/2024. This covered the following areas:

- Safeguarding for citizens, how staff are required to operate. Staff to be present in the main allocated room at all times. Citizens to only be in allocated rooms of the centre for day service due to other groups / members of public using the centre.
- CCTV – Currently no operational CCTV in the building.
- Environmental risks.
- Health and Safety.
- Fire Safety – Day Service staff are responsible for overseeing evacuations and responsible for contacting emergency services. Using the register to identify the day service group.
- Assembly points – Main car park and evacuation routes

### **Kingsway Hall**

One citizen is diagnosed with Prada Willi Syndrome, Learning disability and weak muscle tone. The risk assessment states that staff are to discreetly monitor food intake during mealtimes as the citizen is at risk of taking additional items in addition to their main meal. Staff are also to encourage and offer rest breaks during activities to support the citizen with their weak muscle tone.

We saw another risk assessment example, regarding interactions with others. The citizen does not like others in their personal space, or excessive noise from peers. The risk assessment directs staff to refer to the PBS and apply proactive strategies. For example, offering reassurance, re-direction and talking to the citizen and acknowledging what has been said to avoid any anxiety.

We saw a general risk assessment for Kingsway Hall. This was reviewed 09/01/2024. This covered the following areas:

- Safeguarding. Support for citizens, how staff are to operate. Staff to be always present in the main hall.

	<ul style="list-style-type: none"> <li>• Security and CCTV – This is covered by the Caretaker and is for the cameras on the entrance and exits.</li> <li>• Environmental risks – This includes the bar area and windows.</li> <li>• Performances by citizens – CCTV will be turned off. Instructions for staff locations and fire exits to be highlighted.</li> <li>• Fire safety – Assembly points, evacuation routes and procedures.</li> </ul>
<b>1.4 Is their evidence of Accurate daily records that are reflective of the persons care and in accordance with GDPR guidance?</b>	
<b>Observation:</b>	<p><b><u>The Limes, The Centre at St Peters and Kingsway Hall</u></b></p> <p>We observed that the care and support plan records were stored electronically on Portland College’s online bespoke app. We saw that this was password protected. We also observed that physical copies of the care and support plans were also stored in the building in a locked cabinet inside a locked office.</p> <p>We saw evidence of care delivery that reflected any enhanced levels of care and support in line with care and support plans. We saw appropriate escalation of care within these records. We saw daily running records reflected the needs of the citizens attending the day service. For example, we saw that one citizen received 2 hours of 1:1 support each day whilst attending the day service, the daily running records highlighted this had been carried out.</p> <p>The Day Service Manager informed us that running / daily records are completed electronically on Power Apps, the Portland College bespoke system. Staff receive training which is provided internally on how to use Power Apps. They use iPads or a smart phone device, we observed both in use during our visit. New staff members will receive further mentoring through their designated coach after their induction period.</p> <p>A demonstration of the live app was provided by the Day Service Manager. We found this to contain the following sections:</p> <ul style="list-style-type: none"> <li>- Activity log. This shows morning and afternoon activities. It also includes progress towards goals identified in care and support plans, including any achievements. There is an additional box for any observations, including refusal of activities, general mood etc. We saw an example of a citizen playing the drums. It was recorded that they enjoyed the activity and were ‘smiling throughout.’</li> <li>- Meal log. This shows what the citizen has had for lunch. What they selected for lunch, with an option to select if a modified diet. If this is selected, an additional field will appear for further information to be provided.</li> <li>- Option to alert Manager. If selected an email alert with the details of concern will be sent to the Management team.</li> <li>- Daily care log. This lists personal care carried out and any transfers required. It also includes any observations, change of pads or clothing.</li> <li>- Daily communication. This automatically goes to the Management team to notify them of any communication, including with family.</li> <li>- Body Maps.</li> <li>- Seizure diary for epilepsy, where applicable.</li> </ul>

	<ul style="list-style-type: none"> <li>- Behavioural incidents. Anything inputted in this section automatically alerts the Behavioural Support Manager. This records the type of incident, details of the incident, known triggers, what happened next / calming measures and post incident support.</li> </ul> <p>We found that confidential records were stored in line with the Portland College GDPR policy and procedure. We spoke with staff and found that they understood their responsibilities in relation to record keeping and the storage and handling of confidential information. We saw evidence on IHASCO, the electronic training matrix that staff had completed the GDPR training. This is reviewed regularly by the Management team.</p> <p>We observed evidence that Portland College has an auditing process in place to monitor the quality of service and delivery. The audits are carried out by the Management team. We saw evidence that all documents are reviewed annually unless any updates are required sooner. Any changes, reviews or amendments are clearly logged at the front of the care and support plan. Any findings and outcomes would be discussed with the staffing team at the day service.</p> <p>Technology is widely used by staff daily, for example all support plans are recorded electronically, iPads and smart phone devices are used for recording purposes. Electronic care plans / assessments allowed for person centred care approaches and were not generically created. Staff have received training on how to use the technology in place. There was a clear contingency plan in place if technology fails.</p>
<b>1.5 Are people afforded a choice of nutritious food and in accordance with their assessed needs.</b>	
Person 1:	KM (100702579)
Person 2:	AB (5028164)
Person 3:	MC (4038751)
Person 4:	KG (5032617)
Person 5:	HW (6020191)
Person 6:	AH (100189266)
Person 7:	LH (100082142)
Person 8:	GL (5038443)
Observations:	<p>Citizens attending the day service have a meal provided as part of the day care fee. There is a packed lunch option available for citizens if they are off campus. Citizens can also bring their own lunch. Modified options are also available.</p> <p>The Day Service Manager informed us that citizens eat their meals in the campus dining area and a 4 weekly menu is provided by the Portland College catering team. We found that menus offered choice, and that people were able to choose a variety of foods. We found that there were suitable amounts of nutritious food on the menu. We also observed that the menu has a healthy option guide for citizens. Menus are easily accessible throughout the site and can also be sent home. We found that where possible, people were involved in the planning of menus.</p>

	<p>We found that where people required support to eat, that this was given as the care plan dictated. We observed an up-to-date Eating and Drinking folder that goes into the dining area. This clearly identifies any needs and requirements such as adaptive cutlery or plate guards and any dietary needs. We found that nutrition needs are clearly documented and managed where there is an identified risk or requiring the management of allergies. The catering staff on campus are made aware of any allergies that citizens may have.</p> <p>We found that where people had been identified at risk, that appropriate assessments had been undertaken by external professionals such as SALT and people were in receipt of modified diets where required. We saw evidence of a risk assessment and SALT guidance for a level 6 modified diet. Staff are required to ensure the citizen's food is soft and of a bitesize consistency.</p> <p>We observed that cultural needs are considered around mealtimes. This is evidenced on the first page of the care and support plan in 'Important information.' We saw evidence of Muslim meal requirements and dietary needs.</p> <p>We found that citizens had access to fluids throughout the day. We observed filtered water machines in the building and the Day Service Manager informed us that squash, tea, and coffee are also provided throughout the day.</p> <p><b><u>The Centre at St Peters and Kingsway Hall</u></b></p> <p>The Day Service Manager and Deputy Manager informed that packed lunches are provided for the hub sites. An order form is completed the previous week with multiple choices for example, sandwiches, pasta, fillings such as tuna, egg, cheese and onion, fruit, snacks, and yoghurt. There is also a soft option available. Dietary, religious, and cultural needs are also taken into consideration, along with any risk assessments, Mental Capacity and Best interest assessments.</p>
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## 1.6 People are supported through all stages of life by staff respecting their choices and preferences?

Person 1:	KM (100702579)
Person 2:	AB (5028164)
Person 3:	MC (4038751)
Person 4:	KG (5032617)
Person 5:	HW (6020191)
Person 6:	AH (100189266)
Person 7:	LH (100082142)
Person 8:	GL (5038443)
Observations:	<p><b><u>The Limes, The Centre at St Peters and Kingsway Hall</u></b></p> <p>End of life arrangements have not been considered due to attendees of the service generally being younger. However, there is evidence that personal and cultural considerations have been made when producing care and support plans.</p>

The Day Service Manager advised that considerations are in place to support citizens through all stages of life and that DNACPR, DNAR and RESPECT forms would be completed accordingly. We saw evidence of these questions on the application form and is asked during the application process. There are currently no citizens attending the day service with a DNAR in place.

## **Standard Two: Keeping People Safe:**

People are protected from abuse or the risk of abuse, including financial abuse and the safe handling of their medication. People are supported and needs are met in line with MCA and DoLs / DoLiC requirements.

### **2.1 Does the service have a set of policies and procedures that appear to be up to date and regularly reviewed?**

Observations:	<p>Policies and procedures for Portland College, including the Day Services are stored online and are always accessible via the Portland Connect SharePoint site. We observed various policies and procedures. There is also a separate Care Manual that covers policies and procedures for all aspects of the College campus and day service hubs. This was reviewed December 2023. These were also made available as desktop items.</p> <p>Examples of policies and procedures viewed:</p> <ul style="list-style-type: none"><li>• Critical Incident and Business Continuity. Reviewed August 2023</li><li>• Whistleblowing Policy. Reviewed March 2020</li><li>• Health and Safety Policy. Reviewed July 2023</li><li>• Infection Control (Covered in Care Manual)</li><li>• GDPR Policy. Reviewed and updated March 2020</li><li>• Safeguarding Policy. Reviewed January 2024</li><li>• Quality and staff training Policy. Reviewed and updated May 2023</li><li>• Complaints, Concerns, Compliments and Comments procedure. Reviewed June 2021 (Document states should be reviewed every July)</li><li>• Medication (Covered in Care Manual)</li><li>• Mental Capacity Act Policy. Reviewed January 2023</li><li>• Code of Conduct: January 2025</li><li>• Bullying and Harassment: Published November 2023</li><li>• Equality and Diversity: Reviewed January 2024</li><li>• Fire Safety: No approval or review date.</li><li>• Medication: Last reviewed March 2022</li><li>• Moving and Handling: Last reviewed March 2022</li></ul>
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### **2.2 Are the policies and procedures part of the staff induction process and accessible to staff at all times?**

Observations:



	The Day Service Manager confirmed that policies and procedures are always part of the staff induction process and accessible to staff. We looked at the induction process and Quality policy (Reviewed May 2023) for staff training and staff files and found evidence in the induction timetable.
<b>2.3 Does the service appear to have a safeguarding policy which is accessible to all staff and people supported?</b>	
Observations:	<p>We observed the safeguarding policy for Portland College. This policy covers the whole campus, including the day services. We saw evidence that this was reviewed in January 2024.</p> <p>We found that the management were aware of Making Safeguarding Personal. We were informed that the Day Service Manager and Deputy Manager are deputy safeguarding leads on the campus. The Day Service Manager also stated that staff fully understand what Making Safeguarding Personal means and provided explanations of gaining consent from citizens, ensuring they feel empowered and involved throughout the process and identifying what outcome the citizen wants. When speaking with staff it was clear they understood their roles and responsibilities.</p>
<b>2.4 Do staff have knowledge of the local safeguarding procedure and reporting process?</b>	
Observations:	<p>We spoke with people who use the service and found that they were knowledgeable of who they should report to if they had a concern. We spoke with staff and found that they were knowledgeable of national and local reporting requirements and knew how and where to report safeguarding concerns. Staff were able to describe what steps they would follow if they suspected or witnessed abuse.</p> <p>The Day Service Manager informed us that safeguarding records are stored on the Portland College shared drive on SharePoint. There is a safeguarding team in place at Portland College comprising of a Designated safeguarding lead, x2 Deputy safeguarding leads (Day Service Manager and Deputy Manager in Day Service) and x5 Deputy safeguarding leads for the whole campus. The safeguarding team will meet fortnightly and intermittently to review any live cases and discuss any existing concerns.</p> <p>We looked at the safeguarding records maintained by the Day Service Manager for the day service. We found that there are no current 'live' cases. We found that a clear record of safeguarding referrals is kept electronically, with running records that start as soon as an allegation is identified and remain live and updated throughout. We saw evidence of referrals being stored on the safeguarding drive along with any documentation relating to the incident. Concerns that do not meet the criteria for MASH (Multi Agency Safeguarding Hub) are also logged, with a tracker in place to monitor any themes.</p> <p>We observed large signage for safeguarding processes and procedures in areas of the building for citizens and staff. This detailed how to recognise and report safeguarding concerns. This was also presented in easy read and symbols.</p>
<b>2.5 Are staff aware of the Whistleblowing process and reporting arrangements?</b>	
Observations:	We saw evidence of a clear whistle blowing policy. All staff have access to the policy via Portland Connect, the Portland College SharePoint site.

	We spoke to staff members at Portland College day services, and it was clear that they were aware of the whistleblowing policy and who they would contact if they needed to alert outside of the organisation.
<b>2.6 Do care and support plans appear to consider and comply with the requirements of the Mental Capacity Act 2005?</b>	
Person 1:	KM (100702579)
Person 2:	AB (5028164)
Person 3:	MC (4038751)
Person 4:	KG (5032617)
Person 5:	HW (6020191)
Person 6:	AH (100189266)
Person 7:	LH (100082142)
Person 8:	GL (5038443)
Observations:	<p>We spoke with the Day Service Manager and Deputy Manager regarding the Mental Capacity Act 2005. We found them to be knowledgeable with a clear understanding of the act and when a Mental capacity assessment is required. We also spoke with staff and found that they had a good understanding of Mental Capacity.</p> <p>We saw evidence of MCA and DOLs training on the staff training matrix.</p> <p>We found that Mental Capacity assessments were evidential, and gave information on the environment, time of day, communication (i.e., questions asked, and answers given) and any further communication aids. For example, we saw that picture cards and easy read documents are used to enable the citizen to decide. We found that mental capacity assessments and best interest decisions had been reviewed alongside the care plan.</p> <p>We saw evidence of a Mental Capacity assessment for KM around managing finances whilst attending the day service. The assessment provided details of how the assessment was carried out, the environment, for example, in a quiet area of the day service to avoid any distractions from ongoing activities or stimuli. Involvement from LPA, this was a meeting with KM's mother. KM was deemed to lack capacity regarding finances and managing them whilst at the day service. We saw evidence of the best interest checklist and decision following the assessment.</p> <p>We saw additional evidence of a Mental Capacity assessment for choosing healthy options at mealtimes and promotion of overall good health. It was recorded that the citizen can sometimes show a fixation towards sweets and puddings. Staff supported the citizen in choosing healthy options from the menu with the use of symbols and brand images that the citizen is familiar with. There is evidence of the citizen being shown symbols of a selection of foods and drinks, both healthy and unhealthy and the benefits of choosing a healthy option to not impact on their health.</p>

<b>2.7 Where the person is subject to restrictions, they must be authorised under the Deprivation of Liberty Safeguards (dolls) / Liberty Protection Safeguards (LPS) using the least restrictive measures and reviewed accordingly.</b>	
Person 1:	KM (100702579)
Person 2:	AB (5028164)
Person 3:	MC (4038751)
Person 4:	KG (5032617)
Person 5:	HW (6020191)
Person 6:	AH (100189266)
Person 7:	LH (100082142)
Person 8:	GL (5038443)
Observations:	<p>We observed people were able to move about without restriction We found that all staff and management had a clear understanding of dolls, and this was included in the training matrix.</p> <p>Currently DOLs is not required or applicable for Day Services.</p>
<b>2.8 Are People protected from financial and material abuse?</b>	
Person 1:	KM (100702579)
Person 2:	AB (5028164)
Person 3:	MC (4038751)
Person 4:	KG (5032617)
Person 5:	HW (6020191)
Person 6:	AH (100189266)
Person 7:	LH (100082142)
Person 8:	GL (5038443)
Observations:	<p>We found that the provider had an up-to-date policy for finances and managing citizens' money and valuables. We found that staff were aware of who to report to, should they suspect financial abuse.</p> <p>We found that there was a process in place to support people to manage their own money safely and that high value items can be stored securely if required.</p> <p>The Day Service Manager informed us that a float is kept at the day service for citizens and if they require money for anything. We saw evidence of a balance sheet for the float and that it is regularly updated. The Day Service Manager informed us that the float is stored in a locked cabinet in the office.</p>

	<p>We found that the service kept accurate records of citizens' finances, including a running record of incoming and out-goings. This included date, time, balance, what is being signed in i.e. cash / card / bus pass. We saw evidence of recordings of how much was spent and dates and times of when signed out.</p> <p>We found that finances had been audited regularly. The Day Service Manager confirmed that this is carried out on a monthly basis, and we saw evidence of this.</p>
<b>2.9 Does the service have robust systems in place to manage medication and health needs effectively?</b>	
Person 1:	KM (100702579)
Person 2:	AB (5028164)
Person 3:	MC (4038751)
Observations:	<p>The provider has an up-to-date medication policy that staff can easily access via Portland Connect. This was reviewed in December 2023. Each person has an up-to-date medication support plan in place, including hospital traffic light systems and including MCA assessments where required.</p> <p>We saw evidence of MAR (Medical Administration Record) charts being completed consistently, appropriately and processes for auditing are in place. MAR front sheets are consistent and provide an effective summary of patient allergies, medication administration preferences, correct date of birth and current photograph. Staff signature sheets were in place to identify who is trained to administer medication. We also observed that two signatures are required when signing for medication.</p> <p>We saw evidence of profile pages included in the MAR folders. For example, we reviewed the MAR folder for MC. We could see the days that MC attended, medication required, how to be taken and route and why the medication is required. We saw that MC required PEG medication and we saw evidence of the enteral feeding regime chart.</p> <p>The Deputy Manager informed us that they have a designated Meds Lead allocated for the day. A picture of the Lead will be displayed clearly on the notice board in the main corridor. We also evidenced that Medication Leads will wear a High Vis jacket during medication rounds. The Deputy Manager informed us that this helps citizens and staff clearly identify when medications are being administered.</p> <p>Suitable systems are in place for ordering and disposing of medication including records in and out of service. The Deputy Manager showed us the disposal procedure. This involved the medication being put into a bag, two signatures are required. This is then sent to another part of the campus who have a medication disposal box.</p> <p>The service monitors the medication room and fridge temperatures daily and these were within the correct range i.e., room less than 25 degrees and fridge between 2-8 degrees on the day. We observed on the day that the medication fridge was 3 degrees, and the room temperature was 21 degrees. The Day Service Manager informed us that these are regularly recorded and checked on a weekly basis.</p>

The Deputy Manager informed us that there is a controlled drugs book and locked cabinet for controlled medications. We saw evidence of signature sheets for staff to confirm they have read the relevant policy and procedure. There are currently no controlled medications at Portland College Day Service.

We observed a rescue medications cabinet. The Deputy Manager showed us Buccal Midazolam currently stored in there.

There are no covert medications administered. The Deputy Manager informed us that they do have a citizen that requires crushed medication. this is for Clonazepam and is administered via PEG. We saw evidence of instructions for staff to follow which we observed matched the prescription label.

The needs of those people in receipt of 'When required' (PRN) medication were reviewed in accordance to plans and staff know if and when to administer this. Systems are in place to monitor how effective PRN is. Staff were able to show they knew what to do if medication has been missed or given in error.

We saw MAR charts for homely remedies. The Deputy Manager informed us that citizens will purchase these and bring them in. The MAR charts detail what the medication is, route, when to administer, signatures and dates.

The Deputy Manager informed us that there are no self-medicators at Portland College Day Service.

The Deputy Manager informed us that there have been no medication incidents or errors in the last six months. The Deputy Manager showed us the process for reporting errors and incidents. A reporting form would be completed and submitted to safeguarding. This would be reviewed in line with Portland safeguarding procedures via the safeguarding leads. Staff would be taken off administration duties with immediate effect whilst the investigation was carried out. Staff would be required to re-complete competencies before being signed back on for administration duties. We saw evidence of a medication error tracker. This records details of the error, names, date, time, person responsible and outcomes.

The Deputy Manager informed us that staff receive Boots theory training and are then required to carry out three practical competencies which are observed and signed off by the Deputy Manager. All staff medication trained require a yearly competency assessment, carried out by the Deputy Manager. We saw evidence of the signed and completed competency sheets.

#### **The Centre at St Peters and Kingsway Hall**

The Deputy Manager informed us that medications and MAR charts are collected and returned daily from the main site at The Limes. Medications are booked in and out, being recorded on booking forms. We saw an example on the day of the audit of 34 paracetamol in the time of entry section of the form. We also saw Buccal Midazolam x4 prefilled syringes. MAR charts are completed and signed when medication has been administered and the stock take form will be amended accordingly.

### **Standard Three: People who use services are supported by competent staff:**

People are supported and cared for by competent staff who are suitably recruited and sufficiently inducted and trained to provide them with the knowledge, skills and experience to be competent and professional.

#### **3.1 Does the service have regular supervision and appraisals arrangements in place for staff in line with Policies and Procedures?**

Observation:	<p>We spoke to staff who reported that they receive supervisions on a quarterly basis with an annual appraisal and individual performance review (IPR). These are carried out by the Day Service Co-Ordinators who are responsible for smaller teams of staff members. We saw evidence of a robust supervision tracker in place. This has also been sent as a desktop item. The tracker clearly lists all staff at the day service, what their role is, Line Manager and schedule of quarterly supervision dates. The tracker also identifies staff members currently on probation. We found the tracker to correspond with supervisions and appraisals.</p> <p>We observed that supervision records are stored on the Portland College shared drive on SharePoint. We reviewed some sample supervisions and found that staff were able to freely speak about their role, as well as any areas of progression. We found that supervisions were undertaken as the policy dictated, alongside annual appraisals and IPR's. We found that there were policies in place to support disciplinary, performance management and attendance management. Supervisions clearly listed objectives and goals and documented progress towards achieving objectives. There are sections for staff to discuss any concerns, including safeguarding and work and home life.</p> <p>We found that there was a probation period for new recruits starting at the service, and we found that staff had a probationary review meeting which was conducted by the management.</p>
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#### **3.2 Does the service have a robust induction process including a training matrix in line with people's assessed need.**

Observation:	<p>We found that new staff members undertook a robust induction process, and staff were expected to complete Care Certificate or equivalent. We found that this was managed effectively, and induction was signed off by both staff member and management.</p> <p>The Day Service Manager informed us that the induction process is mandatory and lasts for a month. New staff members will be assigned a Line Manager and a 'Buddy' to shadow. We saw evidence of a shadowing schedule in place, this covers all aspects of the role and includes a checklist for both trainee and Line Manager to sign off once completed. This evidence was also provided as a desktop item. Included on the shadowing checklist are areas such as competency examples, Health and Safety, First Aid, Citizen care and support plans and safeguarding. Once the shadowing and induction has been completed, the process is followed up with regular meetings. The probation period lasts for six months and is reviewed at three months. The Day Service Manager informed us that this can be extended to nine months if required.</p>
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We reviewed the training matrix on IHASCO. This is managed by the Deputy Manager. It includes an online software suite, with packages of training to be completed. There are also face to face training sessions identified on this system. We observed that all staff members including the management team are listed on the training matrix. We saw evidence that the system shows what training has been completed, what is mandatory, when a test was attempted and when complete.

We saw evidence of the Dashboard on IHASCO, and we found that the service had an overall training compliance of 91.3 PERCENT. The Day Service Manager explained that this is due to recent new starters (8.6 Percent) who still need to fully complete their training modules. We observed that there are currently no expired training requirements.

We saw examples of courses currently on offer and being completed by staff at Portland College day Service. These include, Autism Awareness, MCA, Safeguarding, GDPR, Manual handling and NAPPI UK. The Day Service Manager informed us that all staff must have or be working towards a Care Certificate or NVQ Level 2 as a minimum requirement. All Co-Ordinators must have NVQ Level 3 and Deputy and Day Service Managers must be qualified to NVQ Level 5.

### 3.3 Do the staff files evidence the following?

#### Staff File One: FL

Date of Application / CV:	08/08/2023	Comment:	Fully completed.
Date of Interview Form:	12/09/2023	Comment:	Evidence of interview notes
Reference One	Achieve Together 25/09/2023	Comment	Deputy Manager at previous employment.
Reference Two:	J Booth 27/09/2023	Comment	Character reference
Date of DBS:	02/10/2023	Comment	Enhanced
DBS Risk Assessment required	No	Comment.	
Right to Work Documentation Received:	Yes	Comment	Passport (date of issue 22/6/2023). Driving Licence (6/12/2022)
Contract Start Date:	16/10/2023	Comment	

#### Staff File Two: SS

Date of Application / CV:	17/08/2023	Comment:	Fully completed.
Date of Interview Form:	15/09/2023	Comment:	Evidence of interview notes
Reference One	NHS 9/11/2023	Comment	Current employer
Reference Two:	L Morris 17/10/2023	Comment	Character reference

Date of DBS:	27/10/2023	Comment	Enhanced
DBS Risk Assessment required	No	Comment.	
Right to Work Documentation Received:	Yes	Comment	Driving Licence (date of issue 26/05/2023) Passport (date of issue 28/09/2023)
Contract Start Date:	20/11/2023	Comment	

Staff File Three: TD			
Date of Application / CV:	04/09/2023	Comment:	Internal applicant
Date of Interview Form:	12/09/2023	Comment:	Evidence of interview notes
Reference One	Portland College	Comment	Current employer
Reference Two:	Kingsmill Hospital	Comment	Previous employer
Date of DBS:	Already completed as internal applicant	Comment	
DBS Risk Assessment required	No	Comment.	
Right to Work Documentation Received:	Yes	Comment	Passport, driving licence, proof of address
Contract Start Date:	23/10/2023	Comment	
Observation:	<p>We reviewed the staff files of three staff members within the service. We found that the management had undertaken a robust recruitment process of staff. We found that pre-employment checks had been undertaken such as right to work, identity checks, certification of learning and where appropriate, risk assessments. We found that adequate references had been obtained.</p> <p>We found that DBS (Disclosure and Barring Service) checks had been undertaken and information was stored within the staff member's file.</p>		



## **Standard Four: Services are managed effectively:**

People receive high quality care through an effectively managed service. The provider/manager takes responsibility, is accountable for their actions, and has an effective system for identifying, assessing and monitoring the quality of the service provision.

### **4.1 Does the service have an allocated Manager that is registered (if applicable)?**

Observation:	<p><b><u>The Limes, The Centre at St Peters and Kingsway Hall</u></b></p> <p>Matt Gallagher is the Day Services Manager, with Kerrie Cutts as the Deputy Manager. Matt has been in post for eight years and is qualified to Level 5. Kerrie has been working at Portland College for thirteen years and is currently working towards her Level 5 qualification.</p> <p>On discussion with staff, they made it clear they felt the management team are approachable and supportive. Our observations throughout the visit saw the management team interacting positively with both citizens and staff members.</p>
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### **4.2 Does the service have robust rostering system and appear to have adequate staffing levels and an out of hours /on-call system in place?**

Observation:	<p><b><u>The Limes, The Centre at St Peters and Kingsway Hall</u></b></p> <p>We found that the Manager had a clear support system in place. There was a clear plan for cover within the service and clear escalation in the case of an emergency. The Manager informed us that in the case of an emergency, for example staff shortage; the contingency plan is to offer additional shifts to existing staff members, including Managers and Co-Ordinators. The management team would also adopt the use of flexi and Bank staff to fill gaps.</p> <p>We saw evidence of a detailed and robust rota system in place, it clearly shows how many staff members are on shift, where they are assigned; including task and roles, who additional support staff are and Medication Leads. This was also included in the Desktop items.</p> <p>The Day Service Manager informed us that there are no vacant posts to be filled as they are currently fully staffed. There are 55 staff in total. This consists of 1 Day Service Manager, 1 Deputy Manager, 4 Co-Ordinators (Seniors) and the remaining are support workers, including 6 newly recruited and working through induction.</p> <p>We found that staff meetings had been undertaken regularly with a clear record of discussions that took place.</p>
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	<p>We found there to be sufficient staffing levels to allow staff to have a good work life balance and the service did not rely on staff doing large amounts of overtime.</p> <p>The Day Services Manager informed us that there are core staff members that will work at the hubs to provide consistency for the citizens attending the hubs. Staff would only be changed due to appointments, leave etc. and citizens would be notified in plenty of time of any changes.</p>
<b>4.3 Does the service have an up-to-date Business Continuity Plan that is regularly reviewed?</b>	
Observation:	<p>We saw evidence of the service Critical Incident and Business Continuity plan. The plan is robust and covers all areas of the Portland College campus, including the day services. The Day Service Manager informed us that the Principal and Senior Management Team and Primary Response Team are responsible for strategic and operational decisions. The policy contains contact details for all relevant people including external agencies. We observed that this was updated in August 2023. The document has been provided as a desktop item.</p>
<b>4.4 Does the service have a system to obtain feedback from People / Family / Professionals?</b>	
Observation:	<p>The Limes, The Centre at St Peters and Kingsway Hall</p> <p>There is evidence that the service has a system in place to obtain feedback from citizens, family, and professionals. with an overarching review to inform the business plan/organisation. The Day Service Manager informed us that Citizen Surveys are conducted bi-annually along with a Portland Voice survey which aids with the College Self-assessment report and KPI's.</p> <p>We saw evidence that the survey feedback is collated, considered, and agreed actions set out and followed up. For example, in one Citizen survey we saw that a citizen had expressed concerns of not knowing who to go to if they felt unsafe. The agreed action showed that staff had spoken to the citizen about the Safeguarding team and physically shown them the posters in the Day Service. The plan clearly detailed which staff member this was allocated to and the follow up and further findings responses such as introducing the citizen to specific staff members, so they felt reassured.</p> <p>We saw another example in the Citizen survey where a citizen had stated classrooms require improvement. It is recorded that the citizen was asked for more information around improvement, the citizen indicated the walls needed painting. Staff informed the citizen that the walls had been recently painted and the citizen pointed to other walls that needed painting. The citizen did express that they were happy with the equipment and games currently provided.</p> <p>We observed results from the Portland Voice report that had been collated from January to April 2023 -2024, covering all Portland College services, including day services. We saw evidence that results show out of 77 citizens, 83% rated their experience as either very good or good. This is an increase of 9% from responses taken in 2022-2023. This document has been provided as a desktop item.</p>

	<p>We saw evidence of good news stories provided by the Day Services Manager. For example, we saw a story from January 2024 for Inspire Adult Learning Courses. The story related to an event in November 2023 where a group of citizens attended a lino printing course provided by Inspire. The group learnt how to safely cut lino and print their own designs onto gift tags and cards. The course required citizens to keep their own learning journal. The group of citizens filled out their learning journal honestly each week, reflecting on each session by recording their own achievements, what was enjoyed and what could be improved next time. The document included photos of citizens participating at the event.</p> <p>We saw evidence of another example where LUSH had visited the day service in March 2024, to deliver a bath bomb workshop. Citizens actively participated and it was recorded that they really enjoyed the session, with one citizen stating, "It was the best day of her life!".</p>
<b>4.5 Does the service have effective systems in place to identify, analyse and respond to complaints, safeguardings and concerns?</b>	
Observations:	<p>We observed the Complaints, Concerns, Compliments and Comments policy and procedure for Portland College. This document had been reviewed in June 2021. This document provides guidance and processes for raising concerns, safeguarding, complaints, and compliments, including recording forms. It also provides details around response and timescales.</p> <p>The Day Service Manager informed us that there is a Three Stage system in place, we evidenced this in the policy.</p> <ul style="list-style-type: none"> <li>• Stage 1. Concern / Informal Stage. This deals with concerns about issues of a day-to-day nature which can usually be easily resolved.</li> <li>• Stage 2. Complaint / Formal Stage. If unhappy with the resolution from the first stage, the concern can be raised formally as a complaint and sent to the Quality Manager.</li> <li>• Stage 3. Appeal. If a resolution has not been found after Stage 2, the appeal process will commence and will be reviewed by the Assistant Principal of Quality.</li> </ul> <p>The Day Service Manager informed us that there have been no complaints or concerns raised in the last twelve months.</p>
<b>4.6 Does the service have a quality assurance procedure with evidence of regular self-audits with ensuing actions?</b>	
Observation:	<p>We found clear evidence of auditing processes in place to monitor quality of service delivery. The audits were evidence based and were relative to ensuring quality processes are in place. The Day Service Manager also provided an example as a desktop item. The audit is called a Self-Assessment – A Journey to Excellence.</p> <p>The Day Service Manager used findings from audits to form an action plan with measurable outcomes, realistic timescales and named staff members to drive completion. This has this been used to inform higher management. The action plan had clearly been implemented, evaluated, and reviewed. The Day Service Manager informed us that the Action Plan is supported by routine checks, including medication audits, Care app audits and session observations.</p>

	<p>We observed the Action Plan and saw examples of targets such as care planning. The document lists evidence of what they are currently doing well for example, all care plans are person centred, fully considering care and support needs, robust assessment processes in place, copies of care plans held at Hub sites. This is followed by an action plan of what they need to do next to further improve their systems. For example, reducing the time it takes to make care plan amendments and to action updates, a target has been set for one week and to consider how internal notifications and behavioural incident forms automatically trigger care pan updates.</p>
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NOT FOR HOME CARE

## **Standard Five: Environment is safe and homely:**

People live in an environment which is clean, safe and personalised.

### **5.1 Is their evidence of robust Infection Prevention Controls measures in place? (Not applicable for Home Care)**

<p>Observations:</p>	<p>We observed the policy and procedures for Infection, Prevention and Control. This is in the Portland College Care Manual. We found this had been reviewed in December 2023.</p> <p>Speaking with the Day Service Manager they told us there is a Housekeeping Team responsible for the whole Campus and they are centrally managed. They have specific cleaning rotas for the whole Campus, including the Day Service. We were advised that this is generally carried out in the morning before the Day Service starts. Cleaning is not the responsibility of the Day Service staff; however, they will clean during the day if required.</p> <p>Staff and citizens have good access to hand washing, toileting, and/or bathroom facilities. We did not evidence that any concerns had been raised by staff and citizens about the cleanliness of the service.</p> <p>We found the toilets and bathroom / personal care rooms to be clean and in good condition.</p> <p>The Day Service Manager informed us that Legionella testing is carried out weekly by the Housekeeping Team and that a Legionella and temperature profiling test is carried out monthly by a company called Hydro-X.</p> <p>All equipment &amp; COSHH products are stored appropriately and in line with requirements. We observed that the main COSHH cupboard is locked and only accessible via a keypad system. Sharps bins are provided and appropriately stored in the Medication room which always remains locked and only accessible to staff members.</p> <p>There was appropriate PPE stock and supplies available. Staff were observed wearing appropriate PPE in line with government guidelines throughout the visit.</p> <p><b><u>The Centre at St Peters and Kingsway Hall</u></b></p>
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	<p>The Day Services Manager informed us that one of the staff members attending the hub sites will also be a Portland Health and Safety representative. Any concerns identified would be reported to the relevant site representative depending on the hub. Concerns and issues would also be reported back to the Day Service Manager and the Portland Health and Safety committee.</p> <p>We saw evidence that all COSHH items at both hubs are stored appropriately and in line with requirements. We observed that the main COSHH cupboards are locked and only accessible by staff at each service.</p>
<b>5.2 Is their evidence of H&amp;S poster with current responsible individual?</b>	
Observations:	We observed an up-to-date Health and Safety poster clearly on display within the service, with the appropriate responsible individuals named.
<b>5.3 Does the service have evidence of fire safety practices and procedures and up to date PEEPs?</b>	
Observations:	<p>The Day Service Manager informed us that fire assessments and equipment are checked by the Health and Safety Manager and Team for the whole of the Portland College Campus. Fire alarms are tested weekly and simulated evacuations / drills are carried out quarterly.</p> <p>People knew how to exit in an emergency and there is an emergency plan in place including detailed PEEPs for individual and their needs. Where PEEPS (Personal Emergency Evacuation Plan) were in place, they were detailed including zones, mobility needs and cognition. We observed PEEPS within files for citizens using the service. These were person centred and contained additional information to support citizens with any anxiety or reassurance they may require. PEEPS have been reviewed along with the respective care plans. There is fire evacuation plan in place, and it is up to date.</p> <p>We observed an up-to-date Evacuation map located in the main corridor. There are evacuation grab bags and sleds in place, these are accessible to staff and included up to date information and equipment. For example, this included a rechargeable floodlight, headlamps, high vis vests, thermal blankets, ID labels and a first aid kit.</p> <p>The Day Service Manager informed us that there are three Fire Wardens at The Limes. They receive annual refresher training, and we observed an up-to-date poster in the main corridor clearly showing pictures of who the Fire Wardens are, making them easily identifiable to citizens, staff, and visitors.</p> <p><b><u>The Centre at St Peters</u></b></p> <p>The Deputy Manager informed us that fire assessments and equipment checks are carried out by the Centre Manager. Evacuations are practised by Portland staff and citizens in line with Portland College requirements and the citizens know how to evacuate the building. We saw evidence of evacuation maps and plans and clear signage throughout the building.</p>

	<p>People knew how to exit in an emergency and there is an emergency plan in place including detailed PEEPs for individual and their needs. Where PEEPS (Personal Emergency Evacuation Plan). We observed PEEPS within files for citizens using the service. These were person centred and contained additional information to support citizens with any anxiety or reassurance they may require. PEEPS have been reviewed along with the respective care plans.</p> <p>For example, we saw a PEEPS where it identifies that a citizen has hearing, and mobility needs and that they may not understand what the alarm is. Staff will provide support by walking with the citizen and offering reassurance throughout the evacuation.</p> <p><b><u>Kingsway Hall</u></b></p> <p>The Deputy Manager informed us that fire assessments and equipment checks are carried out by the Centre Manager. Evacuations are practised by Portland staff and citizens in line with Portland College requirements and the citizens know how to evacuate the building. We saw evidence of evacuation maps and plans and clear signage throughout the building.</p> <p>People knew how to exit in an emergency and there is an emergency plan in place including detailed PEEPs for individual and their needs. Where PEEPS (Personal Emergency Evacuation Plan). We observed PEEPS within files for citizens using the service. These were person centred and contained additional information to support citizens with any anxiety or reassurance they may require. PEEPS have been reviewed along with the respective care plans.</p> <p>For example, we saw a PEEPs for one citizen who requires 1:1 support to navigate steps and may become anxious due to the noise from the alarms. Staff will inform the citizen if there are any alarm tests planned. This document had been updated on 31/05/2024 by the Day Services Manager.</p> <p>We saw another example where a citizen will require 1:1 support throughout an evacuation. Staff are to provide prompts and to continue with 1:1 support at the assembly point due to the citizen tending to walk off. Reassurance to be offered throughout.</p>
<b>5.4 Is their evidence of environment and equipment being maintained regularly and fit for purpose?</b>	
<b>Observations:</b>	<p><b><u>The Limes</u></b></p> <p>The Day Service Manager informed us that equipment is regularly checked and maintained. The Care Admin team manage all equipment and servicing across the Portland College campus. It is the responsibility of the Care Admin team to liaise with the relevant company for maintenance requirements across the campus.</p> <p>Staff know who to contact if there are any issues with equipment use delivery and/or maintenance. They will report any faults identified or repairs required to the Care Admin team. We observed that this is an electronic reporting system.</p>

	<p>The Day Service Manager informed us that all servicing is carried out either 6- or 12-months dependant on the type of equipment. All log sheets of servicing and repairs are held by the Care Admin team. We saw evidence of an overhead hoist that had been serviced on 22/02/2024. This will be reviewed in 6 months because it is designed to lift people.</p> <p><b><u>The Centre at St Peters and Kingsway Hall</u></b></p> <p>The Day Service Manager informed us that equipment is regularly checked and maintained and the responsibility of the Centre Managers / Caretakers. If there are any concerns relating to the building and equipment, all staff know who to contact and report to.</p>		
<b>5.5 Is their evidence of regular building H&amp;S checks?</b> <b>Evidence of:</b>			
<b>Gas Certificate</b>	<table border="1"> <tr> <td>Date:</td><td>Awaiting documents to be sent by Day Service Manager.</td></tr> </table>	Date:	Awaiting documents to be sent by Day Service Manager.
Date:	Awaiting documents to be sent by Day Service Manager.		
<b>Electrical Certificate</b>	<table border="1"> <tr> <td>Date:</td><td></td></tr> </table>	Date:	
Date:			
<b>PAT Certificate</b>	<table border="1"> <tr> <td>Date:</td><td></td></tr> </table>	Date:	
Date:			
<b>Observation:</b>	<p>Health and Safety documentation and certificates are held by the Portland College Health and Safety Team. We saw evidence of the Health and Safety policy. This was published July 2023.</p> <p>We have requested evidence of gas, electrical and PAT certificates from the Day Service Manager.</p>		
<b>5.6 Does the Service have a current legislation compliant Fire Risk Assessment?</b>	<table border="1"> <tr> <td>Date:</td><td>February 2024</td></tr> </table>	Date:	February 2024
Date:	February 2024		
<b>Observation:</b>	<p>There is a clear and robust system for managing and monitoring health and safety within the service. Staff are well informed and educated about general health and safety, fire and infection control policies and procedures within the home as evidenced by training records.</p> <p>We saw evidence that the Fire Risk assessment had been reviewed in February 2024 and that fire alarms are tested weekly and simulated evacuations / drills are carried out quarterly.</p>		
<b>5.7 Do the service have a maintenance schedule and a system to report, record and monitor repairs?</b>			
<b>Observation:</b>	<p>There is a clear system for supporting people to report safety and maintenance issues and there is detailed evidence of completion / action. The service and equipment were maintained to a high standard.</p>		



	<p>The Day Service Manager informed us that repairs and maintenance are reported through the electronic reporting system identified on the estates maintenance help desk, located on the Portland College intranet. Reporting is carried out via the online form, but staff can report manually in the event of any technological issues. All reports will be RAG rated in accordance with priority.</p> <p>Whilst at the Day Service we observed an Estates maintenance worker fitting a new lock to a cupboard.</p>
<b>5.8 Does the service have a system for reporting, recording, escalating, and managing incidents and accidents (RIDDOR)?</b>	
<b>Observations:</b>	<p>We found that Portland College has a system in place to record, escalate and manage incidents and accidents.</p> <p>The Day Service Manager informed us that the Portland College Health and Safety Team carry out all investigations; the Manager will report incidents to the Health and Safety Manager who will generate the report, investigate, and manage. The Day Service Managers have access to these records for monitoring purposes and will be notified online regarding updates and conclusions.</p> <p>The Day Service Manager showed us an example of the RIDDOR reporting procedure; this was for a work-related injury. It was muscular strain to the chest area, resulting in the person being absent from work for over 7 days. We could see evidence of this incident being reported via the online system through to the Health and Safety Manager.</p>

# Summary of Findings

## Positive Feedback

- Care and support plans evidenced to be person centred and developed with the person and / or their family members.
- The service was adequately staffed with a good team structure to ensure the citizens have a very positive daily experience.
- The service offered a variety of activities to meet the needs of the citizens attending.
- The citizens attending during the visit were observed to be very happy and engaging positively with staff and activities on offer.
- Goals and outcomes for citizens were clearly recorded and being met or actively working towards being achieved.

## Areas of Concern:

- Policies and procedures for the campus are currently being reviewed and updated by the Assistant Principle – Ike Onwukwe. Policies should have a planned review date documented in the policy.