

Mental Health Services 2011

Inspection of Mental Health Services in Day Centres

DAY CENTRE INSPECTED	Tallaght Day Centre
EXECUTIVE CATCHMENT AREA	Dublin West / Dublin South West / Dublin South City
HSE AREA	Dublin Mid-Leinster
CATCHMENT POPULATION	80,000 - 90,000
LOCATION	Sheaf House, Exchange Buildings, Tallaght, Dublin
TOTAL NUMBER OF PLACES	15 - 17
DATE OF INSPECTION	30 May 2011

Details

Service description

The day centre serving the Tallaght sector was located near the Adelaide, Meath and National Children's Hospital (AMNCH) in Tallaght. The day centre and day hospital occupied the second floor of a modern building which was bright and spacious. The day centre opened from 0900h to 1645h daily, Monday to Friday with an outreach service at the weekends and bank holidays.

Service users attended for a full day from 1030h to 1500h and attended a mix of group and individual sessions. Lunch was available for all service users in a café located on the ground floor of the building and was funded by the mental health service.

The day centre had a large day room, a kitchen and a recreation room. There was a comfortable consultation room and the day centre was accessible by stairs and a lift.

Premises

CHECKPOINT	RESPONSE
Are the premises part of a psychiatric hospital?	No
Are the premises an independent building?	Yes
Are the premises purpose built?	Yes
Are the premises accessible by public transport?	Yes
Is the sector headquarters located in the day centre?	Yes
How many activity rooms are there for service users?	2
How many service users are attending?	15
Is there a facility for providing hot meals?	Yes

Referral procedure

All referrals came through the sector team, in a variety of ways. Referrals were from the out-patient clinic, from the approved centre, from the community psychiatric nurse or from the home based treatment team. A referral form was completed for each person and the programme of treatment was discussed by the multidisciplinary team. It was reported by staff that the waiting time between referral and appointment at the day centre was a few days. Each service user was assigned a care coordinator.

Staffing levels

POST	NUMBER WTE	SESSIONS PER WEEK
Consultant psychiatrist	3	1 morning for each Consultant per week
Nursing staff	2	Full-time
NCHD	1	As required
Occupational therapist	1	No dedicated sessions, but available as required
Psychologist	1	No dedicated sessions, but available as required
Social worker	1	No dedicated sessions, but available as required
Speech and Language Therapist	0	Not available to the service
Dietician	1	Available as required

Range of services provided

Service users attended group and individual sessions. Most groups were run by the nurses. Groups were also held on a regular basis by the occupational therapist, sometimes in conjunction with the dietician. For example there were groups on Stress Management and Healthy Living. The occupational therapist also held individual sessions for individuals and service users also had one-to-one sessions with their key worker. Domiciliary visits were carried out by the day centre staff and members of the home based treatment team visited service users in their homes if necessary. Staff reported that the average length of attendance in the day centre was between one week and seven years.

All attendees at the day centre had individual multidisciplinary care plans; these were the same as those used in the approved centre and throughout the service. The clinical files of four service users were examined. All had individual care plans and up-to-date regular clinical notes but the majority of the entries were from nursing staff only.

Most service users attended activities on a sessional basis as part of their individual care plan. The activities include a Wellness and Recovery Action Plan, psycho-education, relaxation, watching films, a walking group and art sessions. Some service users who had been attending the day centre for many years attended for social activities held in the day centre as many of them lived alone and were quite isolated.

Service user input

Service users signed their individual care plan. One service user spoke of how pleased they were with the service and liked being able to drop in to talk with nursing staff if they had a problem.

Quality initiatives in 2011

- The service had emphasised a Recovery model approach to treatment in the past year.
- A new seven-seater minibus had been procured by the Mental Health Association and was available to the day centre and as a result there had been an increase in social outings for service users with staff.

Operational policies

The service had a number of policies relating to the operation of the day centre. There was a policy on risk management, admission, discharge, and home visits. Incidents were recorded on the STARS web tracking system and forwarded to management for review. All attendees had a Risk Of Violence Assessment (ROVA) carried out at the time of assessment. There was an ongoing system of mandatory staff training.

Planning

The service was planning to introduce an Assertive Outreach Team during the summer of 2011. It was unclear at the time of inspection what impact this would have on the day centre.

Conclusions

The day centre for the Tallaght sector was conveniently located in modern premises which were easily accessible by public transport. It offered a full-time programme of individual and group sessions for 15 - 17 attendees. It was very good to note that all attendees had individual care plans, a system which was in use throughout the service and that policies relevant to the day centre were in place. It was somewhat surprising to note that although all team members were located on site, none of the health and social care professionals provided dedicated sessions to attendees of the day centre. Staff reported that the length of attendance varied from one week to seven years. The staff impressed as being enthusiastic and there was a full schedule of activities.

Recommendations and areas for development

- 1. A review of service users in relation to length of attendance at the day centre should take place regularly.*
- 2. Consideration should be given to establishing dedicated sessions by health and social care professionals in the day centre.*