

Inspection Report

26 October 2021



Inspire House

Type of service: Day Care Setting

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Northern Health and Social Care Trust (NHSCT)	Registered Manager: Mrs Amanda Matthew
Responsible Individual: Mrs Jennifer Welsh	Date registered: 29 October 2019
Person in charge at the time of inspection: Day Care Worker	
Brief description of the accommodation/how the service operates: Inspire House is a day care setting that is registered to provide care and day time activities for up to 20 people with learning disabilities. The day care setting is open Monday to Friday and is managed by the NHSCT.	

2.0 Inspection summary

An unannounced care inspection took place on 26 October 2021 from 10.00 a.m. to 2.45 p.m.

This inspection focused on staff registrations with the Northern Ireland Social Care Council (NISCC), adult safeguarding, notifications, complaints and whistleblowing, Deprivation of Liberty Safeguards (DoLS), restrictive practice, dysphagia arrangements, monthly quality monitoring and Covid-19 guidance.

This inspection also sought to assess progress with any issues raised in the previous quality improvement plan (QIP).

One area for improvement was made in relation to adult safeguarding training for transport staff.

Good practice was identified in relation to staff training and the monitoring of care staffs' registrations with the NISCC. Good practice was also found in relation to system in place of disseminating Covid-19 related information to staff. There were good governance and management oversight systems in place.

The findings of this report will provide the establishment with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

Prior to inspection we reviewed the information held by RQIA in relation to the day care setting. This included the previous inspection report and the quality improvement plan (QIP) and any written and verbal communication received since the previous care inspection.

During our inspection we focused on speaking with the service users and staff to find out their views on the service.

The inspection also focused on reviewing a range of relevant documents, policies and procedures relating to the day care setting's governance and management arrangements. This included checking how care staffs' registrations with the NISCC were monitored.

We discussed any complaints and incidents during the inspection with the day care worker and we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in accordance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.

One area for improvement identified at the last care inspection was reviewed and an assessment of compliance was recorded met.

Information was provided to staff, service users and/or their relatives on how feedback could be provided to RQIA about the quality of services in the day care setting. This included service user/relative questionnaires and a staff poster. No responses were received.

The findings of the inspection were provided to the day care worker at the conclusion of the inspection.

4.0 What people told us about the service

The information provided by service users during the inspection indicated that there were no concerns in relation to the day care setting. All confirmed that they were very satisfied with the standard of care and support provided. We spoke with five service users and three staff including the day care worker.

Comments received during the inspection process included:

Service users' comments:

- "I love it here; everyone is nice to me."
- "I like coming and seeing my friends."
- "Staff ask me what I like doing here; I am happy here."

- “I like doing art and chair exercises.”
- “Staff tell us about how important it is to keep safe in Covid.”

Staff comments:

- “There is no restrictions in the day centre; service users have the freedom of the centre.”
- “Training provided by the Trust is very good and gives us understanding of certain practices.”
- “Care and support provided is on an individual basis.”
- “I got a very good induction when I started working in the centre.”
- “Staff and seniors are very approachable and I feel very much part of the team.”
- “I get regular supervision and my appraisal is done every year.”
- “We are aware of the Speech and Language referral process and the importance of timely referral.”
- “Lots of extra cleaning completed and good infection prevention and control measures in place.”

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last inspection to Inspire House was undertaken on 11 December 2020 by a care inspector; one area for improvement was identified. A QIP was issued. This was approved by the care inspector and was validated during this inspection.

Areas for improvement from the last inspection on 11 December 2020		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 28 (2) (3) (4) (5) Stated: First time To be completed by: Immediate from the date of the inspection	The registered person must ensure that the monthly monitoring visits are in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.	Met
	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the day care worker confirmed that this area for improvement had been addressed. Review of a sample of monthly quality monitoring reports evidenced that this area for improvement had been satisfactorily addressed.	

5.2 Inspection findings

5.2.1 Are there systems in place for identifying and addressing risks?

The day care setting's provision for the welfare, care and protection of service users was reviewed. The organisation's policy and procedures reflected information contained within the Department of Health's (DoH) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

Discussions with the day care worker demonstrated that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting adult safeguarding concerns.

It was confirmed that care staff were required to complete adult safeguarding training during their induction programme and regular updates thereafter. However, it was identified from discussions with the day care worker that transport staff had not completed safeguarding training. An area for improvement was made in this regard.

Discussion with the day care worker established that there had not been any suspected, alleged or actual incidents of abuse since the previous care inspection. The day care worker and staff further confirmed that there was a clear pathway for staff to follow in regard to referring any safeguarding concerns to appropriate professionals and established that they were aware of their roles and responsibilities in relation to reporting adult safeguarding concerns and maintaining safeguarding records.

Service users who spoke to us stated that they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns in relation to safety or the care being provided. The day care setting had provided service users with information in relation to keeping themselves safe and the details of the process for reporting any concerns.

Service users and staff advised that there was enough staff to ensure the safety of the people who used the service.

Observation of the delivery of care at the time of inspection evidenced that service users' needs were effectively met by the number of staff on duty.

The day care setting's governance arrangements in place for identifying, managing and where possible, eliminating unnecessary risk to service users' health, welfare and safety was reviewed during the inspection. This indicated that an effective incident/accident reporting policy and system was in place. Staff are required to record any incidents and accidents in a centralised electronic record, which is then reviewed and audited by the manager, senior manager and the NHSCT governance department. A review of these records and discussion with the day care worker evidenced that there had been no incidents recorded since the previous inspection.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

Staff were provided with training appropriate to the requirements of their roles. Discussion with staff confirmed that mandatory staff training was up to date. Staff consulted on the day of inspection confirmed that they had received sufficient training to enable them to fulfil the duties and responsibilities of their role. This included DoLS training.

Staff had an understanding that people who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the Mental Capacity Act. The day care worker confirmed that no restrictive practices were used in the day care setting.

On entering the day care setting the inspector's temperature and contact tracing details were obtained by the support worker who advised that this is completed for all persons entering the day care setting in line with current Covid-19 guidelines.

The environment was observed and there was evidence of infection prevention and control measures (IPC) in place such as Personal Protective Equipment (PPE) which was available for staff. Other infection prevention and control measures were in place, which included supplies of liquid soap and hand towels mounted on the wall and foot pedal operated bins. Wall mounted hand sanitisers were strategically located throughout the day care setting. There were numerous laminated posters displayed throughout the day care setting to remind staff of good hand washing procedures and the correct method for donning (putting on) and doffing (taking off) PPE.

Discussion with the day care worker and staff identified that they had a good understanding of the procedure to follow in the event of service users or staff being diagnosed with Covid-19. We discussed the provision of mandatory training specific to IPC measures with staff. Staff confirmed that they had undertaken IPC training and that the training provided them with the necessary skills and knowledge to care for and support service users. A review of staff training records confirmed that staff had received training in IPC and Covid-19 awareness including the donning and doffing of PPE. The day care worker confirmed that management were monitoring progress with overall mandatory training to ensure full compliance.

Staff described how they wore PPE for activities that brought them within two metres of service users. The staff members spoken with reported that there was an appropriate supply of PPE and sufficient bins available to allow the safe disposal of PPE.

Observations of the environment concluded that it was fresh smelling and clean throughout.

There was a good system in place to share information relating to Covid-19 and IPC practices. Staff were observed adhering to guidance and were knowledgeable about IPC during discussions.

5.2.2 Is there a system in place for identifying service users Dysphagia needs in partnership with the Speech and Language Therapist (SLT)?

Discussions with staff and review of service user care records reflected the multi-disciplinary input and the collaborative working undertaken to ensure service users' health and social care needs were met within the day care setting. There was evidence that day care staff made referrals to the multi-disciplinary team and these interventions were proactive, timely and appropriate. Staff were also implementing the specific recommendations of the SLT to ensure the care received in the setting was safe and effective.

It was noted that a number of service users had been assessed by SLT in relation to dysphagia needs and specific recommendations made with regard to their individual needs in respect of food and fluids. Staff spoken with demonstrated a good knowledge of service users' wishes, preferences and assessed needs and how to modify food and fluids. It was positive to note all staff had undertaken dysphagia awareness training.

5.2.3 Are there robust systems in place for staff recruitment?

The day care worker advised that there were no newly recruited staff to the day care setting and that the staff team had all worked in the day care setting for a number of years. An agency support worker was currently working in the day care setting due to a current vacancy. The day care worker assured us that the manager endeavoured, to book the same agency staff in order to promote consistent care delivery to service users and familiarity between them and staff; this was evidenced in a review of staff roster information. Discussion with the agency staff member who worked in the day care setting since July 2021 confirmed that they had been appropriately orientated to the setting and made aware of service users' care records.

The day care worker confirmed that recruitment was managed in accordance with the regulations and minimum standards, before staff members commence employment and direct engagement with service users.

A review of records confirmed all staff working in the day care setting were registered with NISCC. Information regarding registration details and renewal dates was monitored by the day care worker; this system was reviewed and found to be in compliance with regulations and minimum standards. The day care worker confirmed that all staff were aware that they were not permitted to work if their professional registration was to lapse.

Discussion with staff confirmed that they were registered with NISCC. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

The day care worker told us that the centre does not use volunteers or voluntary workers.

5.2.4 Are there robust governance processes in place?

There were monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. Quality monitoring visits had been undertaken by a monitoring officer. A sample of reports viewed provided evidence that the monitoring process included engagement with service users, service users' representatives and staff, also that the conduct of the day care setting was examined and that action plans for improvement were developed, if necessary.

Quality monitoring reports also included review of service user care records; accident/incidents; safeguarding matters; complaints; compliments; staff recruitment and training, and staffing arrangements.

There was a process for recording complaints in accordance with the day care setting's policy and procedures. The day care worker confirmed that no complaints were received since the date of the last inspection.

Discussion with staff confirmed that they knew how to receive and deal with complaints and ensure that the manager was made aware of any complaints.

Discussions with the day care worker and staff described positive working relationships in which issues and concerns could be freely discussed; staff reported they were confident that they would be listened to. In addition, staff confirmed that they felt supported by management.

There was a system in place to ensure that staff received supervision and appraisal in accordance with the day care settings policies and procedures.

It was established during discussions with the day care worker that the day care setting had not been involved in any Serious Adverse Incidents (SAIs)/Significant Event Analyses (SEAs) or Early Alerts (EAs).

6.0 Conclusion

Based on the inspection findings and discussions held with staff and service users, RQIA was satisfied that this service was providing safe and effective care in a caring and compassionate manner; and that the service was well led.

One area for improvement was made in relation to adult safeguarding training for support staff.

The inspector would like to thank the day care worker, service users and staff for their support and co-operation throughout the inspection process.

7.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with the Day Care Settings Minimum Standards, 2012.

	Regulations	Standards
Total number of Areas for Improvement	0	1

This inspection resulted in an area for improvement being identified. Findings of the inspection were discussed with the day care worker, as part of the inspection process and can be found in the main body of the report.

Quality Improvement Plan	
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012	
Area for improvement 1 Ref: Standard 13.4 Stated: First time To be completed by: Immediate and ongoing from the date of inspection	The registered person shall ensure that staff have completed training on and can demonstrate knowledge of adult safeguarding. This relates specifically to transport staff. Ref: 5.2.1
	Response by registered person detailing the actions taken: All Transport staff completed Safeguarding Adults Training on 02nd December 2021. They will be included in this training moving forward with adult centre staff. Transport manager will ensure manager receives copies of the certificates for training once received by transport staff.

Please ensure this document is completed in full and returned via Web Portal



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