

Unannounced Care Inspection Report 11 August 2020



Enler Day Centre

Type of Service: Day Care Service
**Address: 9 The Enler Complex, Craigleith Drive,
Dundonald, BT16 2QG**
Tel No: 02895042790
Inspector: Jim McBride

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a Day Care Setting that provides care and support for a maximum of 50 service users daily. A programme of day care and day time activities is delivered Monday to Friday for adults who are over 65; may have a diagnosis of dementia; and may have needs arising from a mental health diagnosis; and physical disability.

3.0 Service details

Organisation/Registered Provider: Belfast Health and Social Care Trust	Registered Manager: Gerard Robinson
Responsible Individual: Catherine Jack (Pending)	
Person in charge at the time of inspection: Gerard Robinson	Date manager registered: 27/5/15
Number of registered places: 50	

4.0 Inspection summary

An unannounced inspection took place on 11 August 2020 from 09.10 to 12.00.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation (Northern Ireland) Order 2003, Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

Since the previous inspection of the service on the 29 October 2018 RQIA have not completed a primary inspection. In response to this RQIA decided to undertake an inspection of the service. This inspection was carried out using an on-site inspection approach in line with social distanced guidance.

Evidence of good practice was found in relation to Access NI and staff registrations with the Northern Ireland Social Care Council (NISCC). Good practice was also found in relation to all current Covid-19 guidance and the use of PPE guidelines, Covid-19 education and management including infection prevention and control measures. Individual quality measures in place completed by staff daily. It was good to note that staff had supported both service users and relatives through the Covid-19 time as the centre provided daily phone contact and activity packs to service users.

The centre staff must be commended for contacting service users by questionnaire in preparation for their return to the centre. The outcomes are highlighted in the main body of the report.

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

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mr Gerard Robinson, registered manager as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this day care service. This included the previous inspection report, the returned QIP, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service.

The inspector ensured that the appropriate staff checks were in place before staff work with service users and reviewed the following:

- Recruitment records specifically relating to Access NI and NISCC registration.
- Covid-19: guidance for Day care. Provided by RQIA for centres planning to reopen

RQIA provided information to service users, staff and other stakeholders that will support feedback on the quality of service delivery.

“Tell us” cards were provided for service users and those who visit them the opportunity to contact us after the inspection with their views. No responses were received prior to the issue of the report.

A poster was provided for care givers detailing how they could complete an electronic questionnaire. No responses were received prior to the issue of the report.

Ten questionnaires were also provided for distribution to the service users and their representatives; three responses were returned and comments are included.

Comments:

“Totally satisfied with the service and care provided by staff in the centre.”

RQIA information leaflets ‘How can I raise a concern about an independent health and social care service’ were also provided to be displayed appropriately.

During the inspection the inspector met with the registered manager, two staff and one service user’s relatives. No service users were available for comment as the centre is in preparation for reopening; however a number of questionnaires were issued to the manager for distribution to service users/relatives for completion.

Staff comments:

- “Good supervision and appraisal.”
- “A comprehensive induction is in place.”
- “Good Covid-19, training and preparation for centre staff.”
- “Good management support.”
- “The staff have worked well together to make the centre safe for the return of service users.”

Relative comments:

- “All the staff are professional and approachable.”
- “Good friendly communication.”
- “Staff know the service users individually.”
- “The staff have been very supportive during Covid-19.”
- “I have no complaints about the centre and value their support.”

The inspector would like to thank the registered manager, relative and staff for their support and co-operation throughout the inspection process.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

6.0 The inspection**6.1 Inspection findings****Recruitment records:**

The services staff recruitment processes were noted to be managed in conjunction with the organisation’s Human Resources (HR) Department, located at the organisation’s head office. Discussion with the manager identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 and Standard 11 relating to Access NI. The inspector reviewed documentation in staff files in relation to pre-employment checks which provided assurances that Access NI checks were completed before commencement of employment.

A review of four staff records confirmed that all staff are currently registered with NISCC. The inspector noted that the manager had a system in place each month for monitoring registration status of staff with NISCC and confirmed that all staff are aware that they are not permitted to work if their NISCC registration had lapsed.

Areas of good practice

Areas of good practice were identified in relation to the completion of checks with Access NI in conjunction with HR Department and staff registrations with NISCC.

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

Care planning and review:

The inspector reviewed six care plans in place for individual service users. These fully described the care and support required for individuals and included:

- Referral information
- Care plan
- Individual action plans
- Risk assessments
- Reviews.

Covid-19

The inspector spoke with the manager and to two staff members, who were knowledgeable in relation to their responsibility related to covid-19. Staff stated they were aware of the guidance in relation to use of PPE for activities that brought them within two metres of service users. Staff were also aware of the need to replace PPE between service users and how to appropriately dispose of used PPE.

The inspector reviewed the current practices relating to the following areas of guidance and good practice pertaining to Covid-19.

- Dissemination of information to staff
- Monitor staff practice
- IPC policies and procedures
- Infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19.
- Temperature monitored twice daily In line with guidance
- Used PPE storage and disposal
- Staff training and guidance on: a. infection prevention and control and b. the use of PPE equipment, in line with guidance.

The inspector reviewed records relating to Infection prevention and control policies which were in-line with the guidance. The policies and procedures had been updated to include covid-19. Policies and guidance were available to all staff in hard copy within the centres office.

The inspector reviewed templates that indicated that service users, staff and visitors will have their temperatures monitored twice daily in accordance with the guidance. Monitoring records also involved asking about and looking out for the following symptoms, fever of 37.8C or above, cough, loss of or change in sense of smell or taste.

Hand sanitisers have been placed in different areas throughout the centre for service users, staff and visitors to use to ensure good hand hygiene.

There was evidence that clear guidance with regards to IPC, donning (putting on) and doffing (taking off) of PPE. There was evidence that staff had completed training with regards to IPC. Training records reviewed verified this.

The staff on duty demonstrated that they had a good understanding of the donning and doffing procedures and were observed to be using PPE appropriately. The manager

discussed the procedures that both he and senior staff spot check the use of PPE by staff during the day. Spot checks on staff practice will be undertaken to ensure they are fully compliant with current guidance. Both the manager and staff discussed the “staff huddle” that will happen daily to ensure updates are circulated to all staff.

The procedure and guidance in place show that:

- Robust systems are in place to ensure that current infection prevention and control guidance is available and accessible to staff.
- There are effective systems in place to monitor staff compliance with good infection prevention and control practices.
- All staff working in the service are able to demonstrate their knowledge of infection prevention and control practice commensurate to their role and function in the service.

It was good to note that staff were working well together to support the best outcomes for service users, in a caring manner, whilst being caring and compassionate to both service users and their relatives.

It was noted that staff were committed to working in line with covid-19 guidance to ensure that the impact of current measures, strikes the correct balance between keeping people safe and promoting a good quality of life, as highlighted by a relative in their comments. Staff will be vigilant in terms of monitoring people for symptoms and are adhering to the public health guidance in order to minimise the risk of introducing or spreading COVID-19 within the centre.

The inspector noted the contact with service users and carers in preparation for the reopening of the centre. Respondents were asked to comment on the following areas:

- How did the closure impact on you / your informal carer(s)?
- Was there anything that staff from the Day Centre did during the closure that you found helpful / unhelpful?
- What changes, if any, would you like to see in the Day Centre for you to feel safe to return to day care during this current pandemic?
- Due to social distancing, fewer people can attend the day centre on any day. We are making decisions on who attends each day based on each person’s individual circumstances, and the risks they live with. How would you / your family feel, if you were unable to return to the day centre for the same number of days that you previously attended?
- If you were unable to attend the day centre; would you like staff to link in with you via technology, i.e. ZOOM? Would you have access and know how to use this?
- Would you consider a Day Opportunity as an alternative to Day Care, if required?
- The availability of transport to the day centre may be reduced due to social distancing requirements. Would you have alternative transport that you can avail of?

Comments received:

- “I missed my friends.”
- “I had regular phone calls.”
- “Good social distancing will be in place.”
- “Regular activity packs.”
- “I missed the social interaction.”
- “I was lost for structure and company.”

- “Phone calls were helpful and kind.”
- “I’m happy to come back.”

Areas of good practice

- Dissemination of information to staff
- Monitor staff practice
- IPC policies and procedures
- Infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19.
- Staff training and guidance.
- Reopening preparation and guidance.

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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