

Inspection Report

Name of Service: Knockbracken Day Centre

Provider: Belfast Health and Social Care Trust (BHSCT)

Date of Inspection: 23 December 2024

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider:	Belfast Health and Social Care Trust (BHSC)
Responsible Individual/Responsible Person:	Mrs. Maureen Edwards
Registered Manager:	Mrs. Susan Curry
Service Profile – Knockbracken Day Centre is a day care setting that is registered to provide care and day time activities for up to 75 people over the age of 65 who have a cognitive impairment or a formal diagnosis of dementia. Service users under the age of 65 with a confirmed diagnosis of dementia may also be considered for attendance. The day care setting is open Monday to Friday and is managed by BHSC	

2.0 Inspection summary

An unannounced inspection took place on 23 December 2024 between 9.40 a.m. and 3.00 p.m. by care Inspector. This was facilitated by the manager

The inspection was undertaken to evidence how the day care setting is performing in relation to the regulations and standards; and to determine if the day care setting is delivering safe, effective and compassionate care and is well led.

The inspection established that safe, effective and compassionate care was delivered to service users attending the day care setting and that the service is well led.

Staff promoted the dignity and independence of service users. Staff were knowledgeable and well trained to deliver safe and effective care.

Service users told us they liked attending the day care setting. Refer to Section 3.2 for more detail.

No areas for improvement were identified as a result of this inspection.

We would like to thank the manager, service users, staff, relatives and assistant service manager for their support and cooperation during the completion of the inspection.

3.0 The inspection

3.1 How we Inspect

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

To prepare for this inspection we reviewed information held by RQIA about this day care setting. This included registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning Trust.

The inspection examined the day care setting's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing, Deprivation of Liberty Safeguards (DoLS), restrictive practices and Dysphagia management were also reviewed

Information was provided to service users, relatives, staff and other stakeholders on how they could provide feedback on the quality of services. This included User Friendly questionnaires and an electronic survey.

3.2 What people told us about the service

Throughout the inspection process inspectors will seek the views of those attending, working in and visiting the day care setting; and review/examine a sample of records to evidence how the day care setting is performing in relation to the regulations and standards.

We spoke to number of service users, several relatives and staff to seek their views of attending, visiting and working within the day care setting.

Service users spoke positively about their experience of attending the day care setting; they highlighted how well looked after they felt and that attending the day care setting gave them structure to their week. Further comments included "the food is good" and "the staff are good".

The relatives of service users were complimentary of the day care setting; they described how well their relatives are looked after and commended the staff. One described how it was evident that the day care setting was "managed from the top". Another spoke about raising a query in relation to an environmental issue and how quickly it was resolved.

Staff spoke very positively in regard to the day care setting. One told us how the care is person centred and described how the staff team all demonstrated caring values. Another spoke highly of the support offered by the manager.

Returned questionnaires indicated that the respondents were very satisfied with the care and support provided, Comments included: “Staff always put their care and concern for us foremost”, “The food provided is first class and varied”, “Couldn’t be better” and “Very friendly atmosphere”. One respondent commented they would like more hairdressing days for the ladies.

There were no responses to the electronic survey.

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

The last care inspection of the agency was undertaken on 23 December 2023 by a care inspector. No areas for improvement were identified.

3.4 Inspection findings

3.4 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of service users.

A review of the agency’s staff recruitment records confirmed that all pre-employment checks, including criminal record checks (AccessNI), were completed and verified before staff members commenced employment and had direct engagement with service users. This included ancillary staff.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC) or the Nursing and Midwifery Council (NMC) or any other relevant regulatory body; there was a system in place for professional registrations to be monitored by the manager.

There was evidence that all newly appointed staff had completed a structured orientation and induction that included shadowing of a more experienced staff member. Written records were retained by the agency of the person’s capability and competency in relation to their job role

There were no volunteers offering support within the day care setting.

There was evidence of robust systems in place to manage staffing. A review of the rota indicated that there were sufficient staff on duty to support the service users.

Staff meetings were facilitated on a regular basis and a record of the matters discussed was retained.

3.4.2 Care Delivery

Staff interactions with service users were observed to be polite, friendly, respectful and supportive. The atmosphere was warm, pleasant and friendly.

Staff were knowledgeable about individual service users; in particular, their needs, preferences and personal history.

Service users had good access to food and fluids throughout their day. Staff communicated well to ensure each service user received their meals in keeping with their assessed needs.

The agency had provided service users with information about keeping themselves safe and the details of the process for reporting any concerns. This was also on display throughout the day care setting.

3.4.3 Management of Care Records

Service users' needs were assessed prior to and when they first attended the day care setting. Care plans were developed to direct staff on how to meet the service users' needs in a safe and effective manner.

Care reviews had been undertaken in keeping with the day care setting's policies and procedures. There was also evidence of regular contact with service users and their representatives, in line with the commissioning Trust's requirements.

The setting retained records of any referrals made to the HSC Trust in relation to adult safeguarding. A review of records confirmed that these had been managed appropriately.

A number of service users were assessed by a Speech and Language Therapist with recommendations provided and some required their food and fluids to be of a specific consistency. These were recorded in service users' care plans.

Where a service user was experiencing a deprivation of liberty, the care records contained details of assessments completed and agreed outcomes developed in conjunction with the HSC Trust representative.

3.4.4 Quality and Management of the Environment

The day care setting was observed to be clean, tidy and free of clutter. It had been tastefully decorated for the Christmas festivities.

The day care setting presented as cool in several areas, including one occupied by service users for sedentary activities. Liaison with a member of the management team confirmed that the room temperature fell within the required level of between 19 and 22 degrees. The staff member was requested to monitor same, especially following periods of closure such as weekends. This will be followed up at the next inspection.

RQIA is aware of planned improvement works to one part of the day care setting. This will be monitored until completion.

A fire risk assessment had been completed for the day care setting; follow up actions were completed on the day of inspection. Evidence was viewed that fire safety checks had been actioned as required. Staff had completed Fire Safety training and had all participated in a recent fire evacuation drill.

3.4.5 Quality of Management Systems

Mrs. Susan Curry has been acting manager within Knockbracken Day Centre since 6 March 2024. Mrs. Curry has submitted an application to RQIA for registration as manager; this will be reviewed in due course. Staff commented positively about the manager and described them as supportive and a mentor.

Discussions with the manager established that they were knowledgeable in matters relating to adult safeguarding and the process for reporting and managing adult safeguarding concerns.

There were monitoring arrangements in place in compliance with Regulations and Standards. A review of the reports of the agency's quality monitoring established that there was engagement with service users, service users' relatives, staff and HSC Trust representatives. The reports included details of a review of service user care records; accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements.

The agency's registration certificate was up to date and displayed appropriately.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedure. Where complaints had been received since the last inspection, these were appropriately managed and were reviewed as part of the agency's quality monitoring process.

Discussion with the manager and a review of records identified that incidents had been managed appropriately. No incidents had occurred that required investigation under the Serious Adverse Incident (SAI) procedures. The manager was aware what incidents were required to be notified to RQIA.

It was positive to note there was a process in place for an identified person to check transport at the end of each day to ensure no service users remained on the bus.

4.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs. Susan Curry, Manager, as part of the inspection process and can be found in the main body of the report.



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