

Inspection Report

22 December 2023



Knockbracken Day Centre

Type of service: Day Care Setting
Address: Knockbracken Healthcare Park,
Saintfield Road, Belfast BT8 8BH
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Belfast Health and Social Care Trust (BHSCT)	Registered Manager: Mrs. Breige Connery - not registered
Responsible Individual: Dr. Catherine Jack	Date registered: Acting since 29 September 2023
Person in charge at the time of inspection: Mrs. Janette Hewitt	
Brief description of the accommodation/how the service operates: 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 BHSCT	

2.0 Inspection summary

An unannounced inspection was undertaken on 22 December 2023 between 10 a.m. and 2 p.m. The inspection was conducted by a care inspector.

The inspection examined the agency'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), Service user involvement and Dysphagia management was also reviewed.

Good practice was identified in relation to service user involvement. There were good governance and management arrangements in place.

Further areas of good practice were observed in relation to monthly audit activity, handling of service users' money and fire safety procedures.

No areas for improvement were noted.

The inspector would like to thank the person in charge, service users and staff for their help and support in the completion of the inspection.

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.

In preparation for this inspection, a range of information about the service was reviewed. This included registration information and any other written or verbal information received from service users, relatives, staff or the Commissioning Trust.

As a public-sector body RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care services, we are committed to ensuring that the rights of people who receive services are protected. This means we will be seeking assurances from providers that they take all reasonable steps to promote people's rights. Users of day care settings have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted.

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

4.0 What did people tell us about the service?

During the inspection we spoke with a number of service users, relatives and staff members.

The information provided indicated that there were no concerns in relation to the day care setting.

Comments received included:

Service users' comments:

- "I love coming here."
- "The company and friendships are great."
- "The food is good especially the soup."
- "I have no issues with the transport."
- "It's beautiful here. I look forward to coming."
- "Staff support us and I can talk to them."

Service user's relative's comments:

- "It's terrific. Staff have supported my relative and I from day one. My relative is very settled here. The staff communicate with me really well. They are well trained for their jobs. I have no concerns"

Staff comments:

- “I’ve worked here a long time. I love it. I’m well supported. My training is up to date. I know what to do if I had a safeguarding concern.”

Returned questionnaires indicated that the respondents were satisfied with the care and support provided. Written comments included:

- “The service provided to my relative by Knockbracken is outstanding. Staff ensure he is safe and talk to him directly. They give him his independence as much as he can. Since he started, he has gained new confidence.”
- “The service is excellent. The times the buses arrive can sometimes be unpredictable but that is understandable as traffic can be heavy. My relative can’t tell me what he does there and I would like to know if he takes part in any activities.”

No responses were received to the electronic survey.

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 care inspection of the day care setting was undertaken on 15 December 2022 by a care inspector. No areas for improvement were identified.

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 person in charge established that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting and managing adult safeguarding concerns.

Staff were required to complete adult safeguarding training during induction and every two years thereafter. Staff who spoke with the inspector had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns in normal business hours.

The day care 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.

Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided. The day care setting had provided service users with information about keeping themselves safe and the details of the process for reporting any concerns. Information was also on display around the day care setting.

RQIA had been notified appropriately of any incidents that had been reported to the Police Service of Northern Ireland (PSNI) in keeping with the regulations. Incidents had been managed appropriately.

The person in charge reported that none of the service users currently required the use of specialised equipment. They were aware of how to source such training should it be required in the future.

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.

It was positive to note that while medicines are not administered within the day care setting, all staff had been provided with training in relation to medicines management.

Staff had completed appropriate Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. The person in charge reported that none of the service users were subject to DoLS. A resource folder was available for staff to reference.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that the last full evacuation drill was on 21 June 2023. Fire risk assessments for the day care setting were available for the inspection and had been completed on 16 January 2023. There was evidence of follow up of actions identified within the risk assessment. All staff had completed fire training. During the inspection fire exits were observed to be clear of clutter and obstructions.

Following the last inspection, improvements had been made to the procedures for the management of service users' monies for services provided within the day care setting.

5.2.2 What are the arrangements for promoting service user involvement?

From reviewing service users' care records, it was good to note that service users had an input into devising their own plan of care. The service users' care plans contained details about their likes and dislikes and the level of support they may require. Care and support plans are kept under regular review and services users and /or their relatives participate, where appropriate, in the review of the care provided on an annual basis, or when changes occur.

It was also positive to note that the day care setting had service user meetings on a regular basis which enabled the service users to discuss what they wanted from attending the day centre and any activities they would like to become involved in. Some matters discussed included:

- COVID
- Activities

- Transport
- Meals

Discussions with staff and review of service users' 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 staff made referrals to the multi-disciplinary team and these interventions were proactive, timely and appropriate.

Staff demonstrated a good knowledge of service users' wishes, preferences and assessed needs. It was apparent that service users were familiar with staff as they appeared relaxed and comfortable in their surroundings and interactions.

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

One service user was assessed by SALT with recommendations provided. A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents.

Staff implemented the specific recommendations of the SALT to ensure the care received in the setting was safe and effective. These were recorded within the care plan along with associated SALT dietary requirements.

5.2.4 What systems are in place for staff recruitment and are they robust?

No new staff had been appointed since the previous inspection.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC). There was a system in place for professional registrations to be monitored by the manager.

There were no volunteers working in the day care setting.

5.2.5 What are the arrangements for staff induction and are they in accordance with NISCC Induction Standards for social care staff?

While no staff had undergone induction since the last inspection, the person in charge was aware of the requirement for new staff to have a structured orientation and induction to the day care setting.

Written records were retained by the day care setting of the person's capability and competency in relation to their job role. The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken.

5.2.6 What are the arrangements to ensure robust managerial oversight and governance?

There were monthly monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. A review of the reports of the day care setting's monthly 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 Annual Quality Report was reviewed and was satisfactory. Several comments in the report from HSC Trust professionals were noted:

- "The staff create an environment you are happy to be part of. I always find it a joy and a privilege whenever I visit the centre."
- "All my service users have spoken highly of the care and attention received and have benefitted from the service."

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

The day care setting'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 day care setting's policy and procedure. Where complaints were received since the last inspection, these were appropriately managed and were reviewed as part of the day care setting's monthly quality monitoring process.

'There was a system in place for managing instances where a service user did not attend the day centre as planned. This included a system for signing in and out the service users who attend.

We discussed the acting management arrangements which have been ongoing since 29 September 2023; RQIA will keep this matter under review.

6.0 Quality Improvement Plan/Areas for Improvement

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



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