

Announced Care Inspection Report 23 February 2021



Edgcumbe Assessment and Therapy Unit

Type of Service: Day Care Setting

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Inspector: Joanne Faulkner

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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

Edgcumbe Assessment and Therapy Unit is a Day care setting which provides specialist care to service users living with dementia. The service aims to maintain skills and abilities of people through meaningful activities. The day care setting is open from Monday to Friday.

3.0 Service details

<p>Organisation/Registered Provider: Belfast Health and Social Care Trust (BHSCT)</p> <p>Responsible Individual: Dr Catherine Jack - application received - registration pending.</p>	<p>Registered Manager: Mrs Joan Telford, Acting Manager</p>
<p>Person in charge at the time of inspection: Mrs Joan Telford</p>	<p>Date manager registered: Mrs Joan Telford- application received - registration pending.</p>

4.0 Inspection summary

Due to the coronavirus (COVID-19) pandemic the Department of Health (DOH) directed RQIA to continue to respond to ongoing areas of risk identified in services.

The last care inspection was undertaken on 18 October 2018. An inspection was not undertaken in the 2019-2020 inspection year, due to the impact of the first surge of Covid-19.

Since the date of the last care inspection RQIA was also informed of any notifiable incidents which had occurred within the day care setting in accordance with regulations.

An announced inspection took place on 23 February 2021 from 10.30 to 13.30.

We reviewed the dates that criminal records checks for staff employed by the day care setting (Access NI) had been completed to ensure that they were in place before staff were supplied to service users. We checked that all staff were registered with the Northern Ireland Social Care Council (NISCC) or the Nursing and Midwifery Council (NMC) and that there was a system in place for ongoing monitoring of staff registrations.

We reviewed staff adherence to the Covid-19 Guidance through discussion with a number of staff and service users. In addition, we reviewed Covid-19 related information, disseminated to staff and displayed throughout the day care setting.

Evidence of good practice was found in relation to staff registrations with NISCC and the NMC. Good practice was also found in relation to Infection Prevention and Control (IPC), the use of Personal Protective Equipment (PPE) and Covid-19 education.

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

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

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 Mrs Joan Telford, Acting 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.

4.2 Action/enforcement taken following the most recent care inspection dated 18 October 2018

No further actions were required to be taken following the most recent inspection on 18 October 2018.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA in relation to the day care setting. This included the previous inspection report, notifiable events and 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.

To ensure that the required pre-employment checks were in place before staff were employed to work with service users, we reviewed the following:

- Recruitment records specifically relating to Access NI and NISCC/ NMC registrations.

We also reviewed IPC procedures to ensure that they were compliant with the current Covid-19 guidance.

We discussed any complaints and incidents that had been received by the day care setting with the manager. In addition we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in line with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.

RQIA provided information requesting feedback from service users, staff and other stakeholders in relation to the quality of service provided. This included an electronic survey for staff and questionnaires for service users/relatives. Responses received indicated that the persons were satisfied with the service provided. Comments included:

- "I've worked in Edgumbe for many years. A lot of service users have passed through the doors however the staff team has remained quite consistent. It is always a joy to hear positive comments from staff, carers and service users. I have loved every minute of working at Edgumbe and enjoy the activities as much as the service users. I hope that this essential service continues for the benefit of those living with dementia."

- “The new manager is approachable.”

We would like to thank the manager, service users 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 What people told us about this service

The feedback received indicated that people were satisfied with the current care and support. During the inspection we spoke with the manager, deputy manager, and a number of day care workers and service users. All those spoken with confirmed that staff wore PPE as necessary. Comments are detailed below:

Staff

- “The manager is brilliant and approachable.”
- “Staff know the service users; it is all very individualised.”
- “We have smaller numbers due to Covid, this can be difficult for activities but it is needed.”
- “Covid has been as stressful period as we were redeployed.”
- “Great place to work; I am here 13 years.”
- “We have enough PPE and take service users’ temperatures twice daily.”
- “We can report issues and they are followed through.”

Staff spoken with praised the manager and the deputy manager for their approachability and responsiveness.

Service users

- “The pandemic has made things difficult, but I understand that this is no-ones fault.”
- “Everything is good at present.”
- “I am very pleased and delighted to come here.”
- “I am fine.”
- “Care is excellent. Everyone very helpful and friendly; couldn’t find anyone better.”
- “No I have confidence and care in my staff.”
- “All good, girls are brill.”
- “Love it here, staff are great.”
- “Food is lovely, couldn’t be better. No complaints.”

7.0 Inspection

There were no areas for improvement made as a result of the last care inspection.

7.1 Inspection findings

Recruitment

The review of the day care setting's staff recruitment records confirmed that recruitment was managed in accordance with the regulations and minimum standards, before staff members commence employment and have direct engagement with service users. Staff recruitment is completed in conjunction with the HSCT Human Resources (HR) department. Records viewed evidenced that criminal record checks (Access NI) had been completed for all staff.

A review of the records confirmed that all staff provided are currently registered with NISCC or NMC as appropriate. Information regarding registration details and renewal dates are monitored by the manager. The manager confirmed that all staff are aware that they are not permitted to work if their professional registration lapses. Discussion with staff confirmed that they were registered with NISCC or the NMC as appropriate. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date. We noted that there was a system in place for monitoring staff registrations on a monthly basis.

Governance and Management Arrangements

We noted that records of complaints had been retained in accordance with the day care settings policy and procedures. On the day of the inspection we noted that a number of complaints had been received since the last inspection on 18 October 2018. We identified from records viewed that complaints received had been dealt with in accordance with organisation's policy and procedures, and that the outcomes are recorded.

Samples of compliments were available for review and evidenced a high level of satisfaction with the service provided.

We discussed the monitoring arrangements in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. We reviewed the day care setting's monthly monitoring reports completed in January and February 2021. We identified that the process included engagement with service users, service user's relatives and staff. The reports included details of the review of service user care records; accident/incidents; safeguarding matters; complaints; staff training and staffing arrangements.

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

The manager confirmed that the organisation's adult safeguarding practices are directed by the regional Adult Safeguarding Prevention to Protection in Partnership, July 2015 and its associated Operational Procedures, September 2016. An Adult Safeguarding Champion (ASC) was identified for the service.

Discussion with the manager indicated that there was a clear pathway for staff to follow in relation to referring any safeguarding concerns. Staff who spoke to us demonstrated that they had a clear understanding of the actions to be taken with regards to reporting matters relating to allegations of abuse. The manager advised that a small number of adult safeguarding referrals were made since the last care inspection. Records viewed and discussions with the manager indicated that adult safeguarding matters had been managed in accordance with the procedures.

Discussion with staff evidenced that they were knowledgeable regarding service users' individual needs. Staff also demonstrated awareness of the need for individualised interventions which facilitate engagement with service users and promote effective communication and social engagement. Observations of staff practice on the day of inspection evidenced that they were confident and effective in their communication with the service users and adapted their communication methods as necessary. We observed interventions that were person centred, polite, proactive and timely.

Discussion with service users evidenced that they felt the care provided was safe, effective, compassionate and well led.

Covid-19

The environment was observed during the inspection and there was evidence of IPC measures in place such as availability of PPE for staff. Other IPC measures were in place, which included seven step hand hygiene notices positioned at wash hand basins, 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. Wall mounted hand sanitisers checked were clean, sufficient product was available and these were well maintained and fit for purpose. Observations of the environment concluded that it was fresh smelling and clean throughout.

Discussion with the manager 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 noted that staff had received training in IPC in line with their roles and responsibilities. Observation of staff practice evidenced that staff adhered to IPC procedures. Staff have a daily meeting to discuss Covid-19 matters.

Staff had also completed training in relation to Covid-19 and on the donning (putting on) and doffing (taking off) of PPE. Signage was displayed throughout the day care setting in relation to donning and doffing guidance and social distancing.

Staff described how they wore PPE for activities that brought them within two metres of service users. Staff reported that there was a good supply of PPE. IPC and hand hygiene audits were undertaken.

Environmental changes and changes to the routines of the day care setting had been made, to ensure that social distancing could be maintained. Reduced numbers of service users are attending the day care setting. The dining room and the activity room furniture had been rearranged to ensure that the two metre distance could be maintained.

There was also a system in place to ensure that staff and service users had twice daily temperature checks completed. Staff described how they supported service users to adhere to Covid-19 guidance with particular regards to handwashing, social distancing and the wearing of facemasks.

Enhanced cleaning schedules were in place, to minimise the risk of cross contamination. This included the frequently touched points throughout the building. We observed care staff cleaning hard surfaces and frequently touched points throughout the inspection.

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

- dissemination of information to staff
- monitoring of staff practice
- infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19
- staff training and guidance in relation to infection prevention and control and the use of PPE, in line with guidance

We reviewed records relating to infection prevention and control policies which were in line with the guidance. A folder containing Covid-19 information was available and included current guidance documents from the Public Health Agency (PHA) and the DOH.

The procedures and guidance in place evidenced 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.

From feedback, it was positive to note that staff were working well together to support the best outcomes for service users, in a safe and compassionate and person centred manner. Staff are being 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.

Specific risk assessments had been completed for service users and staff in respect of social engagement in designated areas, both internally and externally and whilst using HSCT transport.

Areas of good practice

Evidence of good practice was found in relation to staff recruitment practices and staff registrations with NISCC/NMC. Good practice was found in relation to IPC; all staff and service users had been adhering to the current Covid-19 guidance on the use of PPE.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

8.0 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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