

Inspection Report

13 September 2023



Station Road Resource Centre

Type of service: Day Care Setting
Address: Station Road, Armagh
BT61 7NP
Telephone number: 028 3756 6385

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Southern HSC Trust	Registered Manager: Mrs Margaret (Mairead) Murphy
Responsible Individual: Dr Maria O’Kane	Date registered: 15/08/2019
Person in charge at the time of inspection: Day Care Worker	
Brief description of the accommodation/how the service operates: Station Road Resource Centre provides a service to 16 adults with a physical disability residing within the Armagh catchment area. A small number of the service users who attend have a learning disability.	

2.0 Inspection summary

An unannounced inspection was undertaken on 13 September 2023 between 9.30 a.m. and 1.30 p.m. The inspection was conducted by a care inspector.

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), Service user involvement, Restrictive practices, and Dysphagia management were also reviewed.

Good practice was identified in relation to service user involvement.

Areas for improvement identified related to the fire evacuation records.

All those consulted with indicated that they felt the day care setting was providing safe, effective and compassionate care; and that the service was well-led.

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 and staff members.

The information provided indicated that there were no concerns in relation to the day care setting. Staff spoken with indicated they had no concerns in relation to the care and support provided within the day care setting.

Service users' comments included:

- "I like it here."
- "No concerns at all."

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

- "I am happy being here in Station Road. I am more than happy with the care provided in Station Road."
- "I am happy with the care I receive in Station Road."

A number of staff responded to the electronic survey. The respondents indicated that they were 'very satisfied' or 'satisfied' that care provided was safe, effective and compassionate and that the service was well led. Written comments included:

- “Service users and staff are very proactive in working together to continue to improve the service they avail of. Both service users and staff take an enormous pride in the centre and this was evident at our garden tea party which was supported by service users/ past and present and their families and carers. It brought a real buzz to the centre and it is a pleasure to work here. We have a great rapport with our social work team and other professionals who are very supportive to both service users and ourselves.”

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 30 August 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 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 identified that there were clear processes in place for reporting and managing adult safeguarding concerns. No such concerns had been reported since the last inspection.

Staff were required to complete adult safeguarding training during induction and every two years thereafter.

No concerns had been raised under the whistleblowing policy.

The person in charge was aware of the incidents which required to be reported to RQIA under the Regulations.

There were no service users who currently required the use of specialised equipment. The person in charge was aware of how to source such training should it be required in the future.

All staff had been provided with training in relation to medicines management, as appropriate to their job role. However, none of the service users attending the day care setting required their medicine to be administered by the staff.

There were no restrictive practices in use within the day care setting.

The Mental Capacity Act (MCA) provides a legal framework for making decisions on behalf of service users who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, service users make their own decisions and are helped to do so when needed. When service users lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

Staff had been provided with training in relation to DoLS. The person in charge advised that none of the service users were subject to DoLS.

A resource folder containing information on DoLS was available for staff to reference. Advice was given in relation to adding additional resources to this folder.

A Fire Risk Assessment had been undertaken on 3 July 2023.

During the inspection fire exits were observed to be clear of clutter and obstructions.

There were systems in place relating to safety checks. These included fire safety checks and fire evacuations. Review of the records identified that the details of those service users who participated in the fire evacuation had not been recorded. Additionally, a number of staff had attended a fire evacuation drill in another Trust Day Care Setting. The inspector explained that fire evacuation drills must be site-specific. In addition, there was no evidence that the Complex Care nurse, who supported a service user in the day care setting on a regular basis, had attended a fire evacuation drill. An area for improvement has been identified.

5.2.2 What are the arrangements for promoting service user involvement?

From discussion with the person in charge and review of records it was evident that the service users were involved in all aspects of their care, as appropriate.

Service users' feedback was also sought on an annual basis and as part of the monthly service users' meetings.

Review of the service users' meeting minutes identified that they were asked for their views on the activities they wished to participate in. Some of the matters discussed included:

- Gardening project
- Sports Day
- Garden Tea Party

It was good to note that plans were also in place to resume fishing trips and going out on the bus for coffee.

Review of records and discussion with staff also noted a number of activities and health promotion activities which the service users enjoyed. These included:

- Audio and visual choice – wii
- Social skills
- Programme to promote/maintain personal care needs
- Exercise

- Computer skills
- Physiotherapy
- Arts and crafts

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

A number of service users were assessed by SALT with recommendations provided and some required their food and fluids to be of a specific consistency. Staff implemented the specific recommendations of the SALT to ensure the care received in the setting was safe and effective.

Staff demonstrated a good knowledge of service users' wishes, preferences and assessed needs. These were recorded within care plans along with associated SALT dietary requirements. Staff had undertaken training in relation to Dysphagia and in relation to how to respond to any choking incidents.

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

There was a system in place to ensure that appropriate recruitment checks would be completed and verified before staff members commenced employment and had direct engagement with service users; this included criminal record checks (Access NI).

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC).

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?

There was a system in place to ensure that all newly appointed staff complete a structured orientation and induction, having regard to NISCC's Induction Standards for new workers in social care, to ensure they were competent to carry out the duties of their job in line with the day care setting's policies and procedures.

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?

The day care setting's registration certificate was up to date and displayed appropriately.

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 manager is also the registered manager of a number of other day care settings. Advice was given in relation to ensuring the manager's presence is recorded within each of the day care settings.

The NISCC register was checked on a monthly basis.

The Annual Quality Report was in the process of being completed; this will be reviewed at a future inspection.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAIs) procedures.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. There had been no complaints received since the last inspection.

6.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007.

	Regulations	Standards
Total number of Areas for Improvement	1	0

The area for improvement and details of the QIP were discussed with the person in charge as part of the inspection process. Mairead Murphy, Registered Manager, also received feedback on the inspection findings at the end of the inspection. The timescales for completion commence from the date of inspection.

Quality Improvement Plan

Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007

Area for improvement 1

Ref: Regulation 26 (4)(f)

Stated: First time

To be completed by:
Immediate from the date of the inspection

The registered person shall ensure that records pertaining to fire drills are retained, to evidence the names of all attendees of fire drills held in Station Road day care setting; the names of service users should be recorded and also of those who may refuse to participate; and external staff such as any Complex Care Nurses, who are in regular attendance, must also attend a fire drill in Station Road.

Ref: 5.2.1

Response by registered person detailing the actions taken:

The registered person has ensured that records pertaining to fire drills are retained to evidence the dates and names of Service Users and Staff who have participated in fire drills in Station Road Resource Centre. Day Care Staff, Manager, Assistant Manager, Service Users and 7 Complex Healthcare Nurses attended a fire drill in Station Road Resource Centre on either Monday 23rd October 2023 or Tuesday 24th October 2023.

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



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