

Unannounced Care Inspection Report 5 March 2020



Lakeland Community Care

Type of Service: Day Care Service

**Address: Teemore Business Complex, 191 Belturbet Road,
Derrylin, BT92 9BL**

Tel No: 02867748895

Inspector: Angela Graham

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 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 is registered to provide care and day time activities for up to 38 service users. The service meets the needs of adults over 65 and/or with a physical disability or living with mild dementia. The day care setting is open Monday, Wednesday, Thursday and Friday and is managed by Lakeland Community Care Ltd.

3.0 Service details

Organisation/Registered Provider: Lakeland Community Care Ltd Responsible Individual: Patrick McGurn	Registered Person in charge: Patrick McGurn
Person in charge at the time of inspection: Senior Care Assistant	Date person in charge registered: Patrick McGurn – 16 April 2009
Number of registered places: 38	

4.0 Inspection summary

An unannounced inspection took place on 5 March 2020 from 10.00 to 13.10.

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.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the establishment was delivering safe, effective and compassionate care and if the service was well led.

As a public-sector body, RQIA have 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 settings, we are committed to ensuring that the rights of people who receive services are protected. This means we will seek 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. All day care settings should safeguard and promote service user choices and freedoms as they relate to the range of services being provided.

Evidence of good practice was found in relation to staff members' registrations with the Northern Ireland Social Care Council (NISCC), infection prevention and control and maintaining good working relationships.

No areas requiring improvement were identified.

Service users' comments are included throughout the report.

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

The inspector would like to thank the person in charge, service users and staff for their support and co-operation throughout the inspection process.

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 the person in charge, 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 4 March 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 4 March 2019.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- the registration details of the day centre
- information and correspondence received by RQIA since the last inspection
- incident notifications which highlighted that no incidents had been reported to RQIA since the care inspection on 4 March 2019
- unannounced care inspection report and QIP dated 4 March 2019.

During the inspection, the inspector met with the senior care assistant and two care assistants. Introductions were made to all service users while walking around the setting with individual interaction with eight service users.

Ten service user and/or relatives' questionnaires were provided for distribution; two service user/relatives questionnaires were returned to RQIA within the timeframe for inclusion in this report.

All respondents indicated that they were very satisfied that the care being provided to service users was safe, effective, compassionate and well led. Respondents made the following comments:

- "All our mums care needs are well catered for in a well-run facility."
- "Mum looks forward to and enjoys her time in Teemore Day Centre."
- "Very happy with all aspects of care."
- "The service you provide cannot be recommended enough."

At the request of the inspector, the person in charge was asked to display a poster within the day centre. The poster invited staff to provide their views electronically to RQIA regarding the quality of service provision; no responses were received.

The inspector requested that the person in charge place a 'Have we missed you' card in a prominent position in the day centre to allow service users, relatives and staff who were not available on the day of the inspection to give feedback to RQIA regarding the quality of service provision. No responses were received.

An RQIA information leaflet 'How can I raise a concern about an independent health and social care service' was also provided to be displayed in the day care setting.

A range of documents relating to the service were reviewed during the inspection and are referred to within the body of the report.

One area for improvement identified at the last care inspection was reviewed and assessment of compliance recorded as met.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 4 March 2019

The most recent inspection of the establishment was an unannounced care type inspection.

The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 4 March 2019

Areas for improvement from the last care inspection		
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
Area for improvement 1 Ref: Standard 21.8 Stated: First time To be completed by: 30 April 2019	The registered person should maintain a staff training record that clearly details the training provided to the staff. The record should specify: <ul style="list-style-type: none"> • The names and signatures of those attending the training event; • The date(s) of the training; • The name and qualification of the trainer or the • The name and qualification of the trainer or the training agency; and • Content of the training programme. 	Met

	Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the person in charge confirmed that this area for improvement had been addressed. The inspector reviewed a sample of staff training records and these records were in line with Standard 21.8.	
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6.3 Inspection findings

The person in charge described the staffing levels which have been assessed as necessary to provide a safe service in the setting. Assurances were provided to the inspector that sufficiently qualified, competent and experienced persons are working at all times to meet the assessed needs of the service users, taking into account the size and layout of the premises, the number of service users accommodated, fire safety requirements and the statement of purpose. A review of the staffing roster for weeks commencing 3 February 2020 until 5 March 2020 evidenced that the planned staffing levels were adhered to.

Discussions with staff and service users confirmed that they felt there were sufficient staff to ensure the safety of service users in the day centre. Observation of the delivery of care at the time of inspection evidenced that service users' needs were effectively met by the number of staff on duty.

There were arrangements in place to ensure that staff are registered with the Northern Ireland Social Care Council (NISCC). Information regarding registration details and renewal dates were maintained and available to the inspector. The person in charge confirmed that all staff are currently registered with NISCC.

The person in charge advised that no staff had been recruited since the previous care inspection. The person in charge confirmed that staff employment records were held within the organisation's head office and that all appointments were made in compliance with relevant legislative requirements and trust policy and procedures.

Discussions with the person in charge and staff on the day of inspection described positive working relationships in which issues and concerns could be freely discussed; staff reported they were confident that they would be listened to. In addition, staff confirmed that they felt supported by management. Staff demonstrated that they had knowledge of their role, function and responsibilities and they had no concerns regarding the practice of any of their colleagues.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout.

Discussion with the person in charge and observation of the environment confirmed that furniture, aids and appliances were fit for purpose for the needs of the service users. Infection prevention and control measures were in place, which included the availability of supplies of liquid soap and hand towels mounted on the walls, foot pedal operated bins and seven step hand hygiene notices which were positioned at wash hand basins. Staff also had effective access to gloves and aprons as required.

Service users' comments:

- "A great place to come, if the centre was open five days I would come the five days."
- "I am well cared for here. I see the staff every day being patient with the ladies and gentlemen that require more attention."
- "I enjoy all the activities we do here particularly the armchair exercises to music and the band coming in."
- "Staff are always kind and friendly, we are like a big family."
- "Great service and very important to people living in the country."
- "I have no suggestions for improvement."

Staff comments:

- "Staffing levels are based on what the service users' needs are. They are safe and enable us to provide the care required."
- "Care is very good here. Small staff team that knows the service users."
- "Meals and activities have been changed in the past to take on board service users' needs and preferences."
- "Service users are the reason we are here. The service is centred around the service users to ensure it meets their needs."
- "The senior undertakes my supervision every quarter and is always available to discuss any issues."
- "Each service user has a detailed care plan, individual to them."

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff members' registrations with the Northern Ireland Social Care Council (NISCC), infection prevention and control and maintaining good working relationships.

Areas for improvement

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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