

Announced Care Inspection Report 2 March 2021



Praxis Care Foyle Projects

Type of Service: Day care
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Inspector: Kieran Murray

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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

Praxis Care Foyle Projects is a Day Care Setting with 35 places (reduced numbers due to Covid-19) that provides care and daytime activities for adults who have a learning disability in the Western Health and Social Care Trust (WHSCCT) area. The service users are supported by up to four staff.

3.0 Service details

Organisation/Registered Provider: Praxis Care Group Responsible Individual: Mr Greer Wilson	Registered Manager: Ms Tracey Devenney
Person in charge at the time of inspection: Team Leaders	Date manager registered: 20 March 2019

4.0 Inspection summary

An announced inspection took place on 2 March 2021 from 10.00 to 12.55.

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.

Since the last inspection on 7 August 2018, RQIA received a number of communications from the Day Care Service. Whilst RQIA was not aware that there was any specific risk to the service users within Praxis Care Foyle Projects. A decision was made to undertake an on-site inspection adhering to social distancing guidance.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation (Northern Ireland) Order 2003, 2007. The Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012 and The Northern Ireland Social Care Council (Social Care Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017.

The inspection sought to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

No areas requiring improvement were identified during this inspection.

Evidence of good practice was found in relation to:

- staff recruitment;
- covid-19 education and management, including infection prevention and control (IPC) measures, personal protective equipment (PPE) and updating of the policy; service user involvement;
- collaborative working; registrations with Nursing Midwifery Council (NMC) and the Northern Ireland Social Care Council (NISCC) and;
- records relating to Adult Safeguarding.

Service user comments:

- "I love it here."
- "the staff are excellent."

- “the staff are all very nice.”
- “the staff keep two metres apart.”
- “I missed meeting the staff when the service was closed.”
- “my social worker comes here from time to time.”
- “I go shopping to Sainsbury’s and I wear a mask.”
- “there are plenty of masks and sanitisers.”

Relatives comments:

- “the service is excellent.”
- “without the service XXXX would stay in bed.”
- “I see the staff wearing PPE and taking temperatures at the door of the service.”
- “when the service was closed XXXX was devastated.”
- “They have taken every possible step to ensure safety during Covid-19.”
- “My XXX has attended Praxis Connects formerly the Cookie Company for many years and has been well cared for and looked after throughout her time there.”

Staff comments:

- “I had Covid-19 e-learning training.”
- “the service users make the job worthwhile.”
- “I know the process of donning (putting on) and doffing (taking off) of PPE.”
“management would listen to concerns and take them seriously.”
- “I had a hand-washing and PPE competency assessment.”
- “XXXX is the adult safeguarding champion.”
- “I got an induction and it lasted five days.”
- “The service users are all very happy within their day opps placement. They were all delighted were when they returned to their placement following the closure during Covid-19.”

Community professional:

- “It is a great service.”
- “Staff have a great relationship with clients.”
- “Family tell me they are happy.”
- “I have been up to the service and I have seen staff wearing PPE.”

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.

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 team leaders, 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 7 August 2018

No further actions were required to be taken following the most recent inspection on 7 August 2021.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this day care service. This included the previous inspection report, notifiable events, concerns and any written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service. We also spoke with Health and Social Care (HSC) professionals involved with the service.

We ensured that the appropriate staff checks were in place before staff work with service users and reviewed the following:

- Recruitment records specifically relating to Access NI, NMC and NISCC registrations.
- Covid-19: guidance.
- A range of documents, policies and procedures relating to the service were reviewed during the inspection and are referred to within the body of the report.

RQIA provided information to service users/relatives, staff and other stakeholders that will support feedback on the quality of service delivery. This included questionnaires, 'Tell Us' cards and a staff poster to enable the stakeholders to feedback to the RQIA.

The feedback information received indicates that service users' relatives were satisfied with the current care and support provided. Comments received are included in the report.

Information received from staff indicates they are generally satisfied with the care and support within the agency. However, one response indicated that they were 'neither satisfied nor dissatisfied that the service was well led. As there was no contact details recorded for staff, we discussed this comment with the team leader on 19 March 2021.

During the inspection we met with two team leaders, six service users, one staff member and a telephone conversation with two service users' relatives and one community professional.

We would like to thank the team leaders, service users, relatives, staff and community professionals for their support and co-operation throughout the inspection process.

6.0 The inspection

6.1 Inspection findings

Discussions with the team leaders identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 21, Schedule 2 and Standard 17 relating to Access NI. We reviewed documentation in relation to pre-employment checks which provided assurances that Access NI checks were completed before commencement of employment.

We noted that the manager had a system in place each month for monitoring registration status of staff with NISCC/NMC and confirmed that staff are aware that they are not permitted to work if their NISCC/NMC registration had lapsed.

On the day of the inspection we noted that the day care agency had not made any safeguarding referrals to the WHSCT area since the last inspection undertaken on 7 August 2018.

The day care agency maintains a policy relating to complaints and compliments; these records are recorded and managed in accordance with the nursing agency's policy and procedure. On the day of the inspection we noted that the day care agency had not received any complaints since the last inspection undertaken on 7 August 2018.

On the day of the inspection it was noted that no incidents had taken place since the previous inspection 7 August 2018.

We noted comments from service users, relatives, staff and community professionals during regular monthly quality monitoring:

Service User:

- "XXX loved coming to the service."

Relatives:

- "XXX very happy with the service provided to XXX."

Staff:

- "XXX said XXX was happy in the service and felt very supported by management."

Community professional:

- "quality of the service is good."

Covid-19:

The staff we spoke to were knowledgeable in relation to their responsibility in relation to Covid-19. The staff who spoke to us on the day of the inspection were aware of the guidance in relation to use of PPE for activities that brought them within two metres of patients. Staff told us that they were aware of the need to replace PPE between service users and how to appropriately dispose of used PPE.

We reviewed records relating to IPC policies, training and use of PPE which were in-line with the guidance. The policies and procedures had been updated to include Covid-19 and were available within the day care service.

We evidenced easy read guides on Covid-19 – How to Stay Safe, How to Get a Test, If You Feel Ill on the noticeboard within the day care service for service users.

A one way system was in operation in the day care service.

Staff who spoke to us described how and where donning (putting on) and doffing (taking off) of PPE happened within the day care service.

Staff who spoke to us they were aware of the need to ask and look out for the following symptoms, fever of 37.8C or above, cough, loss of or change in sense of smell or taste in service users or staff.

It was positive to note that we had our temperatures recorded and a wellness check completed before entering the day care service.

We evidenced twice daily cleaning arrangements and completed records within the day care agency. – do cleaning schedules include the cleaning of frequently touched surfaces, seating, shared aids and equipment including activity equipment and crockery and records maintained?

We noted that the agency has reduced numbers of service users attending to ensure compliance with social distancing guidelines.

Hand sanitisers were placed in different areas throughout the day care agency for staff and visiting professionals to use to ensure good hand hygiene.

The team leaders advised us that monitoring of staff practices was carried out by competency assessments in relation to PPE, hand-washing as well as direct observations of staff.

The team leaders advised us that information was disseminated to staff via emails and the Covid-19 notice board.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to completion of checks of Access NI, NISCC/NMC registrations, safeguarding, monthly quality monitoring reports and compliance with Covid-19 guidance.

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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