

Inspection Report

30 September 2021



Palms Day Care Centre

Type of Service: Day Care Setting

Address: The Jethro Centre, Flush Place, Lurgan, BT66 7DT

Tel No: 028 3832 5673

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Shankill Parish Association Responsible Individual: Mr Andrew Norman George Dunlop	Registered Manager: Ms Ruth Brimage, acting Date registered: Registration pending
Person in charge at the time of inspection: Ms Ruth Brimage	
Brief description of the accommodation/how the service operates: Palms Day Care Centre is a Day Care Setting that provides care and day time activities for a maximum of 16 people over the age of 65yrs who may be frail, have a physical disability or early stage dementia. The day centre operates on Wednesday, Thursday and Friday and is closed for statutory holidays.	

2.0 Inspection summary

An announced inspection was undertaken on 30 September 2021 between 10.10 a.m. and 3.10 p.m. by the care inspector.

This inspection focused on the Northern Ireland Social Care Council (NISCC) registrations and/or the Nursing and Midwifery Council (NMC) as appropriate, adult safeguarding, notifications, complaints and whistleblowing. We reviewed Deprivation of Liberty Safeguards (DoLS), restrictive practice, dysphagia arrangements, monthly quality monitoring and Covid-19 guidance.

An area requiring improvement was identified with regard to Adult Safeguarding training for ancillary staff and volunteers.

Good practice was identified in relation the monitoring of care staffs' registrations with the NISCC and/or the NMC and the system in place for disseminating Covid-19 related information to staff. There were good governance and management oversight systems in place. It was positive to note that service users are supported to be engaged in a range of activities to suit their individual interest and choice.

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

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the service was 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.

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

The inspection focused on reviewing a range of relevant documents, policies and procedures relating to the day care setting's governance and management arrangements. This included reviewing how care staffs' registrations with the NISCC and/or the NMC were monitored.

In addition, we discussed any complaints and incidents that had occurred since the last inspection with the manager and we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in accordance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.

Information was provided to staff, service users and/or their relatives on how feedback could be provided to RQIA about the quality of services in the day care setting. This included service user/relative questionnaires and a staff electronic survey.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

4.0 What people told us about the service

We spoke with four service users and two staff. We observed a number of service users being supported by staff to participate in a range of activities. Service users appeared relaxed and comfortable in the environment.

The information provided by service users and staff during the inspection indicated that there were no concerns in relation to the day care setting. Three questionnaires were received; those who responded indicated that they were satisfied with the care and support provided. There was no response to the electronic survey.

Comments received during inspection process included:

Staff comments:

- "Great place. I feel supported, the manager is approachable."
- "Service users have choice."
- "We have a great team; I love working here."
- "I have no concerns. The training is good."
- "We have enough PPE."
- "Covid has meant different ways of working but it is fine."
- "Activities are tailored to suit the service users and their needs."

- “I am very happy, I can report concerns to the manager.”

Service users’ comments:

- “It’s a lovely place, the staff are great.”
- “Staff are good.”
- “Everything is wonderful.”

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 inspection to Palms Day Care Centre was undertaken on 18 September 2019 by a care inspector; no areas for improvement were identified. An inspection was not undertaken in the 2020-2021 inspection year, due to the impact of the first surge of Covid-19.

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 responsible individual, the manager and staff demonstrated that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting adult safeguarding concerns.

It was confirmed by the manager that care staff are required to complete adult safeguarding training during their induction programme and required updates thereafter. However it was identified from discussions with the manager that a number of ancillary staff and volunteers had not completed safeguarding training. An area for improvement was identified.

Staff spoken with indicated that they had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidents of abuse. They could describe their role in relation to reporting poor practice and their understanding of the day care setting’s policy and procedure with regard to whistleblowing.

The day care setting has a system for retaining a record of referrals made in relation to adult safeguarding matters. Records viewed and discussions with the manager indicated that no adult safeguarding referrals have been made since the last inspection. It was discussed with the registered person and the manager the benefits of reviewing adult safeguarding matters as part of the monthly quality monitoring process. This will be reviewed at the next inspection.

The day care setting has provided service users with information in relation to keeping themselves safe and the details of the process for reporting any concerns.

Staff advised that there was enough staff to ensure the safety of the people who used the service. Observation of the delivery of care and support at the time of inspection and discussion with staff evidenced that service users' needs were effectively met by the number of staff on duty.

Details of incidents and accidents that had occurred were recorded. The information is reviewed and audited by the registered person and the manager. There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately. Records viewed were observed to contain detailed information of the actions taken and the outcome.

Staff were provided with training appropriate to the requirements of their roles. This included DoLS training. Staff demonstrated that they had an understanding that people who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the Mental Capacity Act.

Discussions with the manager indicated that there are no service users attending the day care service who are subject to DoLS.

On entering the day care setting the inspector's contact tracing details were obtained; staff stated that this was completed for all persons entering the day care setting in line with current Covid-19 guidelines.

The environment was observed during the inspection and there was evidence of infection Prevention and Control (IPC) measures in place such as Personal Protective Equipment (PPE) which was available for staff. Other IPC measures were in place, which included hand hygiene guidance notices, supplies of liquid soap and hand sanitiser.

There were laminated posters displayed throughout the day care setting to remind staff of good hand washing procedures and the correct method for donning and doffing PPE.

Observations of the environment concluded that it was fresh smelling and clean throughout. There was a good supply of PPE throughout the service. Activity rooms were spacious and it was noted that social distancing guidelines were being adhered to. Staff discussed how they had adapted activities during the pandemic to reduce the risk of transmission of the virus.

It was identified that a door into a bathroom area was held open by a latch; this was discussed with the registered person and the latch removed immediately. The manager stated that it was used to provide easier access for service users; the registered person will pursue the possibility of installing a mechanism that will release the door in the event of a fire.

There was a good system in place to share information relating to Covid-19 and IPC practices. Staff were observed adhering to guidance and were knowledgeable about IPC during discussions.

5.2.2 Are their robust systems in place for staff recruitment?

The review of the day care setting's staff recruitment records confirmed that recruitment was managed accordance with the regulations and minimum standards. Pre-employment checks are completed before staff members' commenced employment and had direct engagement with service users. Records viewed evidenced that criminal record checks (AccessNI) had been completed for all staff including driver and volunteers.

A review of records confirmed all staff working in the day care setting were currently registered with NISCC or the NMC as appropriate. Information regarding registration details and renewal dates was monitored by the manager; this system was reviewed and found to be in compliance with regulations and minimum standards.

The manager confirmed that all staff are aware that they are not permitted to work if their professional registration lapses. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

There were a small number of volunteers providing support in the day care setting; it was identified that Access NI checks had been completed and that an induction had been provided.

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

Discussions with staff and review of service user 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 day care staff made referrals to the multi-disciplinary team and these interventions were proactive, timely and appropriate. Staff could describe how they would implement the specific recommendations of the SALT to ensure the care received in the setting was safe and effective as required.

It was noted that no service users have been assessed by SALT in relation to dysphagia needs and specific recommendations made with regard to their individual needs in respect of food and fluids. Staff spoken with demonstrated a good knowledge of service users' wishes, preferences and assessed needs; and how to modify food and fluids. It was positive to note staff had undertaken dysphagia awareness training. We discussed with the manager the benefits of providing the training to those staff preparing the meals.

5.2.4 Are there robust governance processes in place?

There were monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. Quality monitoring visits had been undertaken by the registered person. A sample of reports viewed for June, July and August 2021 provided evidence that the monitoring process included engagement with service users, relatives, and staff.

The reports included details of the review of service user care records; accident/incidents; complaints and the environment.

We discussed with the registered person and manager the benefits of including information with regard to the review of safeguarding matters and staffing arrangements.

There is a process for recording complaints in accordance with the day care setting’s policy and procedures. It was noted that no complaints had been received since the last inspection.

Discussion with staff confirmed that they knew how to receive and deal with complaints and the process for ensuring the information was forwarded to the manager.

There was a system in place to ensure that staff received supervision and appraisal in accordance with the day care settings policies and procedures.

It was established during discussions with the manager that the day care setting had not been involved in any Serious Adverse Incidents (SAIs)/Significant Event Analyses (SEAs) or Early Alerts (EAs).

6.0 Conclusion

Based on the inspection findings and discussions held with the manager, staff and service users, RQIA was satisfied that this service was providing safe and effective care in a caring and compassionate manner; and that the service was well led by the manager.

An area requiring improvement was identified with regard to Adult Safeguarding training for ancillary staff and volunteers.

7.0 Quality Improvement Plan/Areas for Improvement

	Regulations	Standards
Total number of Areas for Improvement	0	1

An area for improvement has been identified where action is required to ensure compliance with The Day Care Settings Minimum Standards, 2012. Details of the Quality Improvement Plan were discussed with Ruth Brimage, manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Day Care Settings Minimum Standards, 2012.	
<p>Area for improvement 1</p> <p>Ref: Standard 13.4</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing from the date of inspection.</p>	<p>The registered person shall ensure that staff have completed training on and can demonstrate knowledge of safeguarding.</p> <p>This relates specifically to ensuring that ancillary staff and volunteers complete safeguarding training.</p> <p>Ref: 5.2.1</p> <p>Response by registered person detailing the actions taken: Volunteer and ancillary staff have now completed safeguarding training via e-learning and support from the setting Manager. This was completed by 17 November 2021.</p>

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The Regulation and Quality Improvement Authority

7th Floor, Victoria House
15-27 Gloucester Street
Belfast
BT1 4LS

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)

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