

# Announced Care Inspection Report 17 August 2021



## Lisburn Assessment & Resource Centre

**Type of Service: Day Care Service**  
**Address: 58 Wallace Avenue, Lisburn, BT27 4AE**  
**Tel No: 028 9263 3535**

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Assurance, Challenge and Improvement in Health and Social Care

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## 1.0 Service information

<b>Organisation/Registered Provider:</b> South Eastern Health and Social Care Trust (SEHSCT)	<b>Registered Manager:</b> Mr Rapheal Kearns
<b>Responsible Individual:</b> Mr Seamus McGoran	<b>Date registered:</b> 8 October 2009
<b>Person in charge at the time of inspection:</b> Mr Rapheal Kearns	
<b>Brief description of the accommodation/how the service operates:</b> Lisburn Assessment and Resource Centre (LARC) is a day care setting located in Lisburn and provides a programme of day care and day time activities Monday to Friday for adults with varying degrees of learning disability needs. Some service users also require support due to sensory needs, dementia and physical disability.	

## 2.0 Inspection summary

An announced care inspection took place on 17 August 2021 between 9:50 am and 2.20pm.

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, 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 safeguarding training for ancillary staff.

Good practice was identified in relation to staff training and the monitoring of care staffs' registrations with the NISCC and/or the NMC. Good practice was also found in relation to system in place of disseminating Covid-19 related information to staff. There were good governance and management oversight systems in place.

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.

### 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.

Prior to inspection we reviewed the information held by RQIA about this day care setting. This included the previous inspection report and Quality Improvement Plan (QIP) 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 checking how care staffs' registrations with the NISCC and/or the NMC were monitored.

We discussed any complaints and incidents during the 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 poster. Six service users/relatives responses were received within the timescale requested; they indicated that they were satisfied with the care and support provided. One comment was received: "Would like the return to five day placements." There was no response to the staff 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 observed a number of service users being supported by staff. Service users unable to communicate their views to us appeared relaxed and comfortable in the environment. The information provided by service users during the inspection indicated that there were no concerns in relation to the day care setting. We spoke with four staff including the manager.

#### Staff comments:

- "This is a great place to work, the staff are great and the service users are safe."
- "Staff have a shared focus and aim."
- "Service users are well cared for."
- "It can be challenging at times; especially due to Covid."
- "I feel supported, I can raise issues."
- "Good team work."
- "The service users come first."
- "Always enough PPE (Personal Protective Equipment)."
- "I felt really supported during Covid. The training is really good."

- “I can approach the manager or seniors with concerns. I have no concerns or issues.”
- “We get good support.”

**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 of the service was undertaken on 31 October 2019 by a care inspector; one area for improvement was identified and a QIP was issued. This was approved by the care inspector and was validated during this inspection.

<b>Areas for improvement from the last care inspection</b>		<b>Validation of compliance</b>
<b>Action required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007</b>		
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 20 (1) (a) (b) &amp; (c)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Following inspection date.31/10/19</p>	<p><b>20.—</b>(1) The registered person shall, having regard to the size of the day care setting, the statement of purpose and the number and needs of service users—</p> <p>(a) ensure that at all times suitably qualified, competent and experienced persons are working in the day care setting in such numbers as are appropriate for the care of service users;</p> <p>(b) ensure that the employment of any persons on a temporary basis in the day care setting will not prevent service users from receiving such continuity of care as is reasonable to meet their needs;</p> <p>(c) ensure that the persons employed to work in the day care setting—</p> <p>(i) receive appraisal, mandatory training and other training appropriate to the work they are to perform. Ref: 6.2</p> <p>The registered person must undertake a review of all staff records in place ensuring, the required documentation is in place for each individual employed.</p>	<b>Met</b>
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>We reviewed information relating to agency staff provided and noted that the required documentation is in place for each individual supplied.</p>	

## 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 manager 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 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 ancillary staff including bus drivers and domestic staff had not completed safeguarding training. An area for improvement was identified.

Staff 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 two adult safeguarding referrals have been made since the last inspection. It was noted that an investigation relating to a recent referral is ongoing. Adult safeguarding matters are reviewed as part of the quality monitoring process.

The day care setting has provided service users and their relatives 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 at the time of inspection and discussion with staff evidenced that service users' needs were effectively met by the number of staff on duty.

All incidents and accidents were recorded on an electronic system which are reviewed and audited by the manager, to ensure follow up of any outstanding actions, and the SEHSCT governance department. There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

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.

There are arrangements in place to ensure that service users who require high levels of supervision or monitoring and restriction have had their capacity considered and where appropriate assessed.

Where a service user is experiencing a deprivation of liberty, the care records contain details of assessments completed and agreed outcomes developed in conjunction with the HSC Trust representative.

On entering the day care setting the inspector's contact tracing details were obtained by the senior day care worker who advised that this is 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 PPE which was available for staff. Other IPC measures were in place, which included seven step hand hygiene guidance notices being positioned at wash hand basins, supplies of liquid soap and hand towels mounted on the wall and foot pedal operated bins.

There were numerous 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 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 in accordance with the regulations and minimum standards, before staff members' commenced employment and had direct engagement with service users. Records viewed evidenced that criminal record checks (AccessNI) had been completed for staff.

A review of records confirmed all staff working in the day care setting are currently registered with NISCC or the NMC. 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.

Discussion with staff confirmed that they were registered with NISCC or the NMC. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

### 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 were also implementing the specific recommendations of the SALT to ensure the care received in the setting was safe and effective.

It was noted that a number of 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 all staff had undertaken dysphagia awareness training.

### 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 a manager from another service. A sample of reports viewed for March, April and May 2021 provided evidence that the monitoring process included engagement with service users, service users' representatives and staff, also that the conduct of the day care setting was examined and that action plans for improvement were developed, if necessary.

There is a process for recording complaints in accordance with the day care setting's policy and procedures. The manager confirmed that two complaints were received since the date of the last inspection. It was noted that the complaints had been managed in accordance with the day care setting's policy and procedures.

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.

On area requiring improvement was identified with regard to safeguarding training for ancillary staff working in the service.

We would like to thank the manager, service users and staff for their support and co-operation throughout the inspection process.

**7.0 Quality Improvement Plan/Areas for Improvement**

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	0	1

An area for improvement identified during this inspection is detailed in the QIP. Details of the QIP were discussed with Mr Raphael Kearns, manager, as part of the inspection process. The timescales commence from the date of inspection.

Areas for improvement have been identified where action is required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012</b>	
<p><b>Area for improvement 1</b></p> <p>Ref: Standard 13.4</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 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 ancillary staff.</p> <p>Ref: 5.2.1</p> <p><b>Response by registered person detailing the actions taken:</b></p> <p>The Registered Manager will ensure that ancillary staff complete training and can demonstrate knowledge of Adult Safeguarding. This will be achieved through:-</p> <p>Regular liaison with Trust Support Services and Transport managers to ensure their staff and drivers are trained in Adult Safeguarding Awareness.</p> <p>Where possible enable ancillary staff to avail of this training and be informed of any updates alongside day care colleagues.</p> <p>Adult Safeguarding awareness training completion dates will be forwarded to the Day Centre manager for inclusion in Lisburn Assessment and Resource Centre's training matrix to ensure compliance</p>



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



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](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
 [@RQIANews](https://twitter.com/RQIANews)

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