

Inspection Report

30 May 2022



The Laurels' Day Centre

Type of service: Day Care Setting
Address: Dromalane Road, Newry, BT35 8AP
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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 Paula Farrell
Responsible Individual: Dr Maria O’Kane (Registration Pending)	Date registered: 15 February 2022
Person in charge at the time of inspection: Mrs Paula Farrell	
Brief description of the accommodation/how the service operates: The Laurels’ is a Day Care Setting with 78 places that provides care and activities for people with learning difficulties. The service operates Monday to Friday.	

2.0 Inspection summary

An unannounced inspection was undertaken on 30 May 2022 between 09.00 a.m. and 12.00 am. 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 Safeguarding DoLS ,service user involvement, restrictive practices, Dysphagia and Covid-19 guidance was also reviewed.

It was positive to note that service users benefited from a well led service. There was a clear leadership and management structure in place which helped to ensure staff were clear about their role and responsibilities. The service was well organised and had a range of systems in place to ensure its operation and to support good communication.

Good practice was identified in relation to service user involvement. Staff we spoke with demonstrated good caring values and a desire to provide service users with quality personalised care. Staff were familiar with the choices and preferences of individual service users and strove to deliver on these.

We noted some of the compliments received by the setting:

- “Words cannot express what you have done for *****.”
- “Thanks to all the hard working staff.”
- “The Laurel’s has been a great part of ***** life.”

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 any previous areas for improvement identified, 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.

Having reviewed the model "We Matter" Adult Learning Disability Model for NI 2020, the Vision states, 'We want individuals with a learning disability to be respected and empowered to lead a full and healthy life in their community'. RQIA shares this vision and want to review the support individuals are offered to make choices and decisions in their life that enable them to develop and to live a safe, active and valued life. RQIA will review how service users who have a learning disability are respected and empowered to lead a full and healthy life in the community and are supported to make choices and decisions that enables them to develop and live safe, active and valued lives.

Information was provided to service users, relatives, staff and other stakeholders on how they could provide feedback on the quality of services. This included easy read questionnaires and an electronic survey for staff.

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.

Comments received included:

Service users' comments:

- "It's good to be back."
- "Good activities."
- "Great staff."
- "No complaints."
- "I would like more days."
- "Happy here in the Laurel's."

Staff comments:

- “A good induction that prepared you for the role.”
- “Friendly staff.”
- “A wide range of activities.”
- “Good ongoing training.”
- “Open door policy.”
- “Staff communicate well with each other.”
- “NISCC have good standards and accessible guidance.”
- “Good practical supportive staff.”
- “Excellent service user involvement.”

During the inspection we provided a number of easy read questionnaires for those supported to comment on the following areas of service quality and their lived experiences:

- Do you feel safe when you are at the Centre?
- Does your care protect you from harm?
- Is care effective – does your care work well for you?
- Is care compassionate – is your care given kindly with dignity and respect?
- Is the service well led – does the manager run the Centre in a good way?

😊 Yes ☹ No

Returned questionnaires show that those supported thought care and support was either excellent or good. No staff questionnaires were received prior to the issue of this report.

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 25 June 2021 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 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 person in charge established that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting and managing adult safeguarding concerns.

Staff were required to complete adult safeguarding training during induction and every two years thereafter. Staff who spoke with the inspector had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns. They could also 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 retained records of any referrals made to the HSC Trust in relation to adult safeguarding. A review of records confirmed that no concerns had been received since the last inspection.

The day care setting had provided service users with information about keeping themselves safe and the details of the process for reporting any concerns.

Staff were provided with training appropriate to the requirements of their role. Where service users required the use of specialised equipment to assist them with moving/lifting, this was included within the day care setting's mandatory training programme. A review of records confirmed that where the day care setting was unable to provide training in the use of specialised equipment, this is identified by the setting before care delivery commences and training is requested from the HSC Trust.

The person in charge reported that some service users currently required the use of specialised equipment. This was discussed and training was in place for staff on the use of the equipment.

Care reviews are undertaken in keeping with the day care setting's policies and procedures, however following discussions with the manager the setting is working closely with trust staff to review the current system.

All staff had been provided with training in relation to medicines management and the person in charge discussed the review of medication training in relation to on-line training. The person in charge advised that no service users required their medicine to be administered with a syringe. The person in charge was aware that should this be required, a competency assessment would have to be completed before staff could safely undertake this task.

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 who spoke with the inspector demonstrated their understanding that service users who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the Mental Capacity Act (MCA).

It was positive to note that service users were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the setting supported this practice. Service users had the support of a team of staff who were suitably skilled and experienced to meet their assessed needs.

Staff had completed appropriate Deprivation of Liberty Safeguards DoLS training raining appropriate to their job roles. The person in charge reported that none of the current service users were subject to DoLS arrangements.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that the last full evacuation drill was undertaken on the 1 October 2021. Fire risk assessments for the centre were available for the inspection and had been completed in 2020 and due for review August 2022. Staff fire training was completed the 22 February 2022. Fire exits were observed to be clear of clutter and obstruction.

5.2.2 What are the arrangements for promoting service user involvement?

The purpose of the LD NI Model is to outline what individuals with learning disabilities expect of services, how services will achieve this and how they will be measured to ensure high quality, cost effective care.

Learning Disability Services have a duty to each and every individual that they serve and must respect and protect their human rights. At the same time, Learning Disability Services also have a wide social duty to promote equality through the care it provides and in the way it provides care. This includes addressing the needs of those groups or sections of society who may be experiencing inequalities in health and wellbeing outcomes.

From reviewing service users' care records and through discussions with service users, it was good to note that service users had an input into devising their own activities. The service users' care plans contained details about their likes and dislikes and the level of support they may require.

We found an effective quality assurance survey took place regularly; we reviewed the results and outcomes that were satisfactory. The service delivered had also been regularly reviewed through a range of internal and external audits.

The setting regularly sought a range of feedback from service users, which was consistently positive.

It was also positive to note that the day care setting had service user meetings on a regular basis which enabled the service users to discuss what they wanted from attending the setting and any activities they would like to become involved in. Some matters discussed included:

- Previous minutes
- Activities
- Issues
- Food
- New staff

Some service users comments included:

- "I'm happy at the centre."
- "Happy the walking group has started again."
- "Happy with food choices."
- "No complaints."

The day care setting had completed a quality survey with service users and sought feedback on a number of areas including:

- How do you feel being back in day care?
- Do you like your transport to day care?

- Do you like the food at day care?
- Do you feel safe at day care?
- Do you make choices at day care?
- Do you choose your food at day centre?
- Do you make choices about your group room?
- Are you involved in decisions about your care?
- Is communication good on day care?
- Do you make choices about activities?
- Do you like the activities at day care?
- Would you like more activities at day care?
- Are you happy with personal care at day care?
- Do you know who to talk to if you are upset?
- Do you have any problems at day care?
- Do staff support you at day care?
- Do you know why staff have to wear facemasks?
- Do you know why staff have to wear PPE?

We noted a selection of the comments received:

- “I think the staff are all very pleasant at the Laurels. They have done their utmost best during this trying time; to keep things as normal, and as fun as they can.”
- “****, ***** and all the staff have been so welcoming towards my daughter. Her whole mood has changed since she started at the laurels and she is getting back to her friendly self. Thank you.”
- “Communication is excellent with the key worker. The drivers and guide helps are always friendly and show great respect to the service user.”
- “I would just like to add that my daughter loves the laurels and her mood and general overall wellbeing has improved dramatically.”
- “My son loves the laurels; he was so devastated when it closed. He missed his key worker and the friends he has made. I know at times it can be difficult, but they do a great job.”
- “I am happy with all that you do for my son and explaining to him about Covid-19.”
- “I am delighted that day care services have been able to reopen. My family member who is a service user experienced many emotions during lockdown and it was clear that he missed the connection of attending day care. Thank you.”
- “My Daughter is more settled when going to the Laurels as she needs routine. Everyone is so friendly to her and helpful. It makes life that much easier.”
- “My daughter loves attending the Laurels and I find all the staff to be really helpful and good at their jobs.”
- “Finds it easier to concentrate now that there are less people”

It was important that individuals with learning disabilities are supported to maintain their relationships with family, friends and partners during the Covid-19 pandemic. Service users were provided with an information leaflet/easy read document to explain Covid-19 and how they could keep themselves safe and protected from the virus. Where individuals with learning disabilities continued to experience anxiety about the pandemic, the agency was aware of the resources available from NI Direct, HSC websites and local organisations to support service users.

The day care setting had completed an annual review in relation to their practice which incorporated service user and their representatives' feedback (Regulation 17).

We noted some of the comments received from service users and relatives:

Service users:

- “I like the routine”
- “Enjoy doing my colouring in and going out for walks”
- “I like the activities, I like the staff, I enjoy my dinner, I feel safe”
- “I would like to get back to five days”
- “I like going walking and using the computer”
- “I like meeting my friends”

Relatives:

- “I am happy with everything at the Laurels. ... is happy going each day”
- “.. Is happy at the Laurels. He is cared for to the best of everyone ability”
- “All the staff are very pleasant, and welcoming our son looks forward to his day in the Laurels.
- “Covid has been a very challenging time and the Laurels have tried to keep a good level of activities”
- “I would like to see the centre return to 5 days as soon as possible. It would mean so much to service users”
- “.. Receives exceptional care. Nothing is too much bother for staff”
- “I am grateful for their hard work especially recently during such difficult times”
- “Service users wellbeing has greatly improved from the day centre opened back up”

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

New standards for thickening food and fluids were introduced in August 2018. This was called the International Dysphagia Diet Standardisation Initiative (IDDSI). A small number of service users were assessed by SALT with recommendations provided and some required their food and fluids to be of a specific consistency.

A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents. Swallowing awareness was also completed by staff during First-Aid training. Staff implemented the specific recommendations of 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 were familiar with how food and fluids should be modified we also noted documentation in place in the food preparation area.

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

A review of the day care setting's staff recruitment records confirmed that all pre-employment checks, including criminal record checks (Access NI), were completed and verified before staff members commenced employment and had direct engagement with service users. Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC) or the Nursing and Midwifery Council (NMC) or any other relevant regulatory body.

There was a system in place for professional registrations to be monitored by the manager. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date. 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 evidence that all newly appointed staff had completed 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.

There was a robust, structured, three day induction programme which also included shadowing of a more experienced staff member. Written records were retained by the day care setting of the person's capability and competency in relation to their job role.

A review of the records pertaining to Regulation 20 of The Day Care Settings Regulations (Northern Ireland) 2007 and Standard 21 of The Day Care Settings Minimum Standards 2021 relating to staff also identified that they had been recruited, inducted and trained in line with the regulations.

The day care setting had maintained a record for each member of staff of all training, including induction and professional development activities undertaken. The records included the names and signatures of those attending the training event, the date(s) of the training and the content of the training programme. Staff were supported by a system of induction, training and supervision to ensure they were effective in their role.

All NISCC registrants must maintain their registration for as long as they are in practice. This includes renewing their registration and completing Post Registration Training and Learning.

5.2.6 What are the arrangements to ensure robust managerial oversight and governance?

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 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. We noted some of the comments received during quality monitoring:

Service users:

- "Staff are brilliant they help me."
- "***** is very good."
- "I love the food here."
- "I like everybody here."

Staff:

- “A good environment.”
- “I enjoy working here.”
- “Dream working here.”
- “My induction was good.”

Relatives:

- “My ***** loves the laurels and there is good communication.”
- “We would be lost without it.”
- “My ***** loves the centre.”
- “Brilliant we don’t have a word to say.”

HSC Staff:

- “Staff are very accommodating.”
- “The centre provides a welcoming environment.”
- “The laurels is very good.”
- “IPC clear and evident that staff are working well.”

The Annual Quality Report was in progress. The report will include a commentary and feedback on the experiences of people using and working in the setting. The report will be forwarded to RQIA on completion.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAIs) or Significant Event Audits (SEAs) procedures.

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

There was a system in place to ensure that complaints were managed in accordance with the day care setting’s policy and procedure. A number of complaints had been received since the last inspection. These were being actioned through the settings policies and procedures and in conjunction with other trust staff.

6.0 Conclusion

RQIA was satisfied that this day care setting was providing services in a safe, effective, caring and compassionate manner and the service was well led by the manager/management team.

7.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the manager, as part of the inspection process and can be found in the main body of the report.



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