

Inspection Report

4 July 2023



Drumross Adult Centre

Type of service: Day Care Setting
Address: 81 O'Neill Road, Newtownabbey, BT36 6UN
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

<p>Organisation/Registered Provider: Northern Health and Social Care Trust (NHSCT)</p> <p>Responsible Individual: Ms. Jennifer Welsh</p>	<p>Registered Manager: Ms. Clare Rolston</p> <p>Date registered: 22 November 2021</p>
<p>Person in charge at the time of inspection: Ms. Clare Rolston</p>	
<p>Brief description of the accommodation/how the service operates:</p> <p>Drumross Adult Centre is a day care setting with a maximum of 80 places. It provides care and day time activities for adults living with a learning disability. Service users may also have a physical disability, sensory needs, autism, mental health needs or require support with behaviours which may challenge.</p> <p>The setting is open Monday to Friday and is operated by NHSCT.</p>	

2.0 Inspection summary

An unannounced inspection was undertaken, as scheduled, on 4 July 2023 between 9.55 a.m. and 5.05 p.m. The inspection was conducted by a care inspector.

RQIA received intelligence/information on 3 July 2023 which raised some concerns in relation to several areas of practice within the day care setting. The inspection findings corroborated one aspect of the issues raised.

The inspection focused on the concerns shared with RQIA and also included: governance and management arrangements; the reporting and recording of accidents and incidents; complaints management; whistleblowing arrangements; Deprivation of Liberty Safeguards (DoLS); the use of restrictive practices; and service user involvement and Dysphagia management.

Good practice was identified in relation to service user involvement. There were good governance and management arrangements in place.

No areas for improvement were identified.

The inspector would like to thank the manager, service users, relative, HSC professional and staff for their support and assistance throughout the inspection process.

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 registration information and any other written or verbal information received from service users, relatives, staff or the Commissioning Trust. RQIA also reviewed the anonymous information referenced in Section 2.0.

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.

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.

4.0 What did people tell us about the service?

During the inspection we spoke with a number of service users, a relative, HSCT professional 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:

- "The staff are good."
- "I enjoy drama and circus skills."
- "The food is good."
- "I get my nails painted."
- "My day care worker is great."

Service user's relative's comments:

- "Staff are great and communicate well. The bus driver and guide help are fantastic."

Staff comments:

- "I feel the care is safe."
- "I love my job. We organised a day trip to Portrush on the train a few weeks ago. There was no problem getting staff released to go. All my training is up to date. I know what to do about safeguarding. I wouldn't hesitate to talk to senior staff if I was concerned about anything and I know it would be dealt with."
- "I'm well supported."

HSC Trust representative's comments:

- "I've been coming into Drumross for many years. The staff support me very well and carry out delegated tasks effectively and efficiently. There is good communication from staff. Actions agreed at reviews are followed up. I'm confident if I raised any concern, it would be dealt with."

Returned questionnaires indicated that the respondents were very satisfied with the care and support provided. Written comments included:

- "I like coming to the Centre. I like to do all the things on my care plan."

A variety of staff, relatives and visiting professionals responded to the electronic survey. The majority of respondents indicated that they were 'very satisfied' that care provided was safe, effective and compassionate and that the service was well led. Written comments included:

- "Brilliant service and very caring staff who do and have went over and above."
- "Very pleased with the service they provide and as a carer it is an invaluable service that I couldn't do without."
- "I've really enjoyed working here and I just love my job."
- "My relative greatly enjoys their days spent there. They are extremely well cared for, given choice of activities and encouraged to be as independent as possible. Staff also support them when needed in a compassionate and sensitive manner. They hate to miss a day which shows they are happy and keen to attend. Staff keep the family well informed of any issues and respond in a timely manner to any questions we may have. The team are well trained and skilled."

One response raised several matters that have been discussed with the manager for taking forward within the day care setting.

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 8 August 2022 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 manager 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 in normal business hours.

Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided.

The manager was aware of the type of incidents which are required to be notified to RQIA.

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, this was included within the day care setting's mandatory training programme.

The information received by RQIA raised concerns regarding staffing levels within the day care setting on a particular day. This was discussed with the manager and the staff rota reviewed. There was a period of time during this day when staffing levels fell below a level required to fulfil one aspect of a service user's care plan.

The manager assured RQIA going forward that sufficient numbers of staff would be on shift throughout each day to ensure the correct level of support and supervision is provided in keeping with assessed need. It was positive to note several new staff had been appointed since the previous inspection.

An examination of care records identified that moving and handling risk assessments and care plans were up to date.

Care reviews had been undertaken in keeping with the day care setting's policies and procedures. There was also evidence of regular contact with service users and their representatives, in line with the commissioning trust's requirements.

All staff had been provided with training in relation to medicines management. A review of the policy relating to medicines management identified that it is a registered nurse appointed by NHSCT who administers liquid medicines via oral syringe. If an oral syringe was used to administer medicine to a service user, this was clearly noted in the daily care records.

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 had completed appropriate Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. A resource folder was available for staff to reference. There were arrangements in place to ensure that service users who required high levels of supervision or monitoring and restriction had had their capacity considered and, where appropriate, assessed. Where a service user was experiencing a deprivation of liberty, their care records contained details of DoLS assessments completed and agreed outcomes developed in conjunction with the HSC Trust representative.

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 18 April 2023. Fire risk assessments for the day care setting were available for the inspection and had been completed on 4 October 2022. There was evidence of follow up on the recommendations. During the inspection fire exits were observed to be clear of clutter and obstructions.

5.2.2 What are the arrangements for promoting service user involvement?

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 plan of care. Service users were provided with easy read reports which supported them to fully participate in all aspects of their care. The service users' care plans contained details about their likes and dislikes and the level of support they may require. Care and support plans are kept under regular review and services users and /or their relatives participate, where appropriate, in the review of the care provided on an annual basis, or when changes occur.

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 day care setting and any activities they would like to become involved in. Some matters discussed included:

- Visit by The Giants ice hockey team
- Walking group
- Shopping trip
- Turn taking

We observed sincere warmth in the engagement between staff and service users. Staff spoken with were knowledgeable regarding service users' likes, dislikes and assessed needs. Service users were relaxed and comfortable in their surroundings and exchanges.

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. A 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.

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. Staff also implemented the specific recommendations of the SALT to ensure the care received in the setting was safe and effective.

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 (AccessNI), 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.

There was one volunteer working in the day care setting. A policy and procedure for volunteers was in place which clearly specified their role and responsibilities. The manager confirmed that volunteers did not undertake any personal care duties and that AccessNI checks had been completed.

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 has maintained a record for each member of staff of all training, including induction and professional development activities undertaken.

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 monthly 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.

The Annual Quality Report was reviewed and was satisfactory.

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.

The Statement of Purpose required updating with RQIA's contact details. The manager submitted the revised Statement of Purpose to RQIA within two weeks of the inspection.

The manager advised that there are ongoing plans to change the day care setting's opening hours and days for a trial period. The updated Statement of Purpose in this regard has been submitted to RQIA.

The manager also manages another day care setting which is registered with RQIA. The hours/days spent in each of the day care settings and the system for recording this was discussed.

We are aware of planned upgrade works within the day care setting and have liaised with RQIA Estates colleagues in this regard. This matter will be kept under review at the next inspection.

6.0 Quality Improvement Plan/Areas for Improvement

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



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