

# Announced Care Inspection Report 25 February 2021



## Shankill Day Centre

**Type of Service: Day Care Setting**  
**Address: 151-157 Shankill Road, Belfast, BT13 1FD**  
**Tel No: 028 9504 3220**  
**Inspector: Joanne Faulkner**

[www.rqia.org.uk](http://www.rqia.org.uk)

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

Shankill Day Centre located in Belfast is a Day Care Setting which provides care and support for a maximum of 30 adult service users daily. A programme of day care and day time activities is delivered Monday to Friday for adults who are over 65 years, and may have a diagnosis of dementia and may have needs arising from mental health diagnosis and physical disability.

## 3.0 Service details

**Organisation/Registered Provider:**  
Belfast Health and Social Care Trust (BHSCT)

**Responsible Individual:**  
Dr Catherine Jack- application received,

**Registered Manager:**  
Mr Jason McIlvenna

registration pending.	
<b>Person in charge at the time of inspection:</b> Mr Jason McIlvenna	<b>Date manager registered:</b> 17 August 2010

#### 4.0 Inspection summary

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.

The last care inspection was undertaken on 11 October 2018. An inspection was not undertaken in the 2019-2020 inspection year, due to the impact of the first surge of Covid-19.

Since the date of the last care inspection, RQIA was informed of any notifiable incidents which had occurred within the day care setting in accordance with regulations.

An announced inspection took place on 25 February 2021 from 10.30 to 13.30.

We reviewed the dates that criminal records checks for staff employed by the day care setting (Access NI and POCVA) had been completed to ensure that they were in place before staff were supplied to service users. We checked that all staff were registered with the Northern Ireland Social Care Council (NISCC) or the Nursing and Midwifery Council (NMC) and that there was a system in place for ongoing monitoring of staff registrations.

We reviewed staff adherence to the Covid-19 guidance through discussion with the manager, a number of staff, service users and a relative. In addition, we reviewed Covid-19 related information, disseminated to staff and displayed throughout the day care setting.

An area requiring improvement was identified with regards to staff training in relation to Adult Safeguarding.

Evidence of good practice was found in relation to staff registrations with NISCC and NMC. Good practice was also found in relation to Infection Prevention and Control (IPC), the use of Personal Protective Equipment (PPE) and Covid-19 education.

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.

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

#### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	1

An area for improvement and details of the Quality Improvement Plan (QIP) were discussed with Mr Jason McIlvenna, registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

#### **4.2 Action/enforcement taken following the most recent care inspection dated 11 October 2018**

No further actions were required to be taken following the most recent inspection on 11 October 2018.

#### **5.0 How we inspect**

Prior to inspection we reviewed the information held by RQIA in relation to the day care setting. This included the previous inspection report, notifiable events and written and verbal communication received since the previous care inspection.

During our inspection we focused on speaking with the service users, their relatives and staff to find out their views on the service.

To ensure that the required pre-employment checks were in place before staff commence employment, we reviewed the following:

- Recruitment records specifically relating to Access NI and NISCC/NMC registrations.

We also reviewed IPC procedures to ensure that they were compliant with the current Covid-19 guidance.

We discussed any complaints and incidents that had been received by the day care setting with the manager and in addition we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in line with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.

RQIA provided information requesting feedback from service users, staff and other stakeholders in relation to the quality of service provided. This included an electronic survey for staff and questionnaires for service users and relatives.

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

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

## 6.0 What people told us about this service

The feedback received indicated that people were satisfied with the current care and support. During the inspection we spoke with the manager and a number of day care workers, service users and a relative of one service user. All those spoken with confirmed that staff wore PPE as necessary. Comments are detailed below:

### Staff

- “I am very happy. The manager is great, very approachable.”
- “I can chat over any concerns with the manager.”
- “The manager listens.”
- “Love working here, have been here 12 years.”
- “This is a great place.”
- “The service users can do what they want.”

### Service users

- “The care is great, it couldn’t be better. I really enjoy coming here.”
- “I love it.”
- “The food is great.”
- “The staff are great.”
- “I would be lost without it.”
- “I love coming here.”

### Relatives

- “It is really good; it is good for mum’s mental health.”
- “My mother goes four days per week. The staff are brilliant, they couldn’t be any better to her.”
- “Couldn’t speak any more highly of the staff.”
- “Staff are very caring.”
- “My mother couldn’t do without it.”

Service users returned questionnaires. The feedback received indicated that people were satisfied with the current care and support.

## 7.0 Inspection

There were no areas for improvement made as a result of the last care inspection.

## 7.1 Inspection findings

### Recruitment

Staff recruitment is completed in conjunction with the BHSCT Human Resources (HR) department. 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 commence employment and direct engagement with service users. Records

viewed evidenced that criminal record checks (Access NI or POCVA) had been completed for all staff.

A review of the records confirmed that staff provided are currently registered with NISCC or NMC as appropriate. Information regarding registration details and renewal dates are monitored by the manager. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date. We noted that there was a system in place for monitoring staff registrations on a monthly basis.

## **Governance and Management Arrangements**

We noted that there is a process for recording complaints in accordance with the day care settings policy and procedures. On the day of the inspection we noted that no complaints had been received since the last inspection on 11 October 2018. A number of compliments were available for review and evidenced a high level of satisfaction with the service provided.

We discussed the monitoring arrangements in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. We reviewed the day care setting's monthly monitoring reports completed in November and December 2020 and January 2021. We identified that the process included engagement with service users, service user's relatives, staff and HSCT representatives. The reports included details of the review of service user care records; accident/incidents; safeguarding matters; complaints; staff training and staffing arrangements.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately. It was noted that a small number of the notifiable events related to choking incidents that had occurred; records viewed and discussion with the manager evidenced that appropriate actions had been taken and that staff had liaised with the BHSCCT speech and language team (SALT) and HSCT keyworkers. There was clear guidance for staff with regards outcomes of SALT assessments completed for individual service users. Staff had received additional training.

The manager confirmed that the organisation's adult safeguarding practices are directed by the regional Adult Safeguarding Prevention to Protection in Partnership, July 2015 and its associated Operational Procedures, September 2016. An Adult Safeguarding Champion (ASC) was identified for the service.

Discussion with the manager indicated that there was a clear pathway for staff to follow in relation to referring any safeguarding concerns. The manager confirmed no adult safeguarding referrals were made since the last care inspection.

Staff who spoke to us demonstrated that they had a clear understanding of the actions to be taken with regards to reporting matters relating to allegations of abuse. However, we identified that support staff such as transport and domestic staff had not received training with regards to adult safeguarding. The manager stated that the senior managers are currently addressing this matter. An area for improvement was identified.

Discussion with staff evidenced that they were knowledgeable regarding service users' individual needs. Staff also demonstrated awareness of the need for person centred interventions which facilitate engagement with service users and promote effective communication and social engagement. Observations of staff practice on the day of inspection evidenced that they were confident and effective in their communication with the service users and adapted their communication methods as necessary. We observed interventions that were individualised, proactive and timely.

Discussion with service users evidenced that they felt the care provided was safe, effective, compassionate and well led.

## **Covid-19**

The environment was observed during the inspection and there was evidence of IPC measures in place such as availability of PPE for staff. Other IPC measures were in place, which included seven step hand hygiene notices positioned at wash hand basins, supplies of liquid soap and hand towels mounted on the wall and foot pedal operated bins. Wall mounted hand sanitisers were strategically located throughout the day care setting. Wall mounted hand sanitisers checked were clean, sufficient product was available and these were well maintained and fit for purpose. Observations of the environment concluded that it was fresh smelling and clean throughout.

Discussion with the manager and staff identified that they had a good understanding of the procedure to follow in the event of service users or staff being diagnosed with Covid-19. We noted that staff had received training in IPC in line with their roles and responsibilities. Observation of staff practice evidenced that staff adhered to IPC procedures. Staff have a daily meeting to discuss Covid-19 matters.

Staff had also completed training in relation to Covid-19 and on the donning (putting on) and doffing (taking off) of PPE. Signage was displayed throughout the day care setting in relation to donning and doffing guidance and social distancing.

Staff described how they wore PPE for activities that brought them within two metres of service users. Staff reported that there was a good supply of PPE.

Environmental changes and changes to the routines of the day care setting had been made, to ensure that social distancing could be maintained. Reduced numbers of service users are attending the day care setting at present. The dining room and the activity room furniture had been rearranged to ensure that the two metre distance could be maintained.

There was also a system in place to ensure that staff and service users had twice daily temperature checks completed. Staff described how they supported service users to adhere to Covid-19 guidance with particular regards to handwashing, social distancing and the wearing of facemasks.

Enhanced cleaning schedules were in place to minimise the risk of cross contamination. This included the frequently touched points throughout the building. We observed care staff cleaning hard surfaces and frequently touched points throughout the inspection.

We reviewed the current practices relating to the following areas of guidance and good practice pertaining to Covid-19.

- dissemination of information to staff
- monitoring of staff practice
- infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19
- staff training and guidance in relation to infection prevention and control and the use of PPE, in line with guidance

We reviewed records relating to infection prevention and control policies which were in line with the guidance. A folder containing Covid-19 information was available and included current guidance documents from the Public Health Agency (PHA) and the DOH.

The procedures and guidance in place evidenced that:

- clear systems are in place to ensure that current infection prevention and control guidance is available and accessible to staff
- there are effective systems in place to monitor staff compliance with good infection prevention and control practices
- staff are able to demonstrate their knowledge of infection prevention and control practice commensurate to their role and function in the service
- service users had been provided with information with regards to Covid-19 and IPC

From feedback, it was positive to note that staff were working well together to support the best outcomes for service users, in a safe, effective and compassionate manner. Staff are being vigilant in terms of monitoring people for symptoms and are adhering to the public health guidance in order to minimise the risk of introducing or spreading Covid-19.

Specific risk assessments had been completed for service users and staff in respect of social engagement in designated areas and whilst using HSCT transport.

### Areas of good practice

Evidence of good practice was found in relation to staff recruitment practices specifically relating to Access NI checks and staff registrations with NISCC/NMC as appropriate. Good practice was found in relation to IPC; here was evidence that staff and service users had been adhering to the current Covid-19 guidance on the use of PPE.

### Areas for improvement

One area for improvement was identified during the inspection in relation to adult safeguarding training for staff.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	1

## 8.0 Quality improvement plan

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

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the day care setting. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

## 8.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

## 8.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

## Quality Improvement Plan

### Action required to ensure compliance with The Day Care Settings Minimum Standards, 2012

<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> 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>Ref: 7.1</p> <p><b>Response by registered person detailing the actions taken:</b> Jason McIlvenna, Shankill Day Centre manager has arranged for support staff to access Adult Safeguarding Awareness training immediately. This will be taking place at Shankill Day Centre Thursday 22<sup>nd</sup> April 2021.</p> <p>Prior to the inspection, Grace Reihill, Assistant Service Manager for ACOPS Day Care had written to the Belfast Trust Adult Safeguarding Champion, and the Training lead for our service querying the plans to implement this training for all support staff interfacing day care services. We have been given assurances that this is planned as additional mandatory training for the relevant staff groups.</p>
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*\*Please ensure this document is completed in full and returned via Web Portal\**



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