

# Inspection Report

7 March 2022



## Cookstown Day Centre

Type of Service: Day Care Service  
Address: 2 Westland Road, Cookstown, BT80 8BX  
Tel No: 028 8672 3900

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Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

## 1.0 Service information

<b>Organisation/Registered Provider:</b> Northern HSC Trust	<b>Registered Manager:</b> Not applicable
<b>Responsible Individual:</b> Mrs Jennifer Welsh (Acting)	<b>Date registered:</b> Not applicable
<b>Person in charge at the time of inspection:</b> Day Care Worker	
<b>Brief description of the accommodation/how the service operates:</b>  This is a Day Care Setting with a maximum of 30 places to provide care and day time activities for persons who are living with physical disabilities, mental ill health issues and /or a learning disability and dementia. The service is currently plans to relocate to a new premises in 2022.	

## 2.0 Inspection summary

An unannounced care inspection took place on 7 March 2022 between 9.15 a.m. and 12.45 p.m. by a care inspector.

This inspection focused on staff recruitment and the day care setting's governance and management arrangements as well as staff registrations with the Northern Ireland Social Care Council (NISCC), adult safeguarding, notifications, complaints and whistleblowing, Deprivation of Liberty Safeguards (DoLS), restrictive practices, dysphagia arrangements, monthly quality monitoring and Covid-19 guidance.

Service users and relatives said that they were very satisfied with the standard of care and support provided.

Two areas for improvement previously identified were not met and have been stated for the second time. No new areas for improvement were identified during this inspection.

Good practice was found in relation to the system in place of disseminating Covid-19 related information to staff. There were good governance and management oversight systems in place.

### 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 guidance, 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, Quality Improvement Plan (QIP), written and verbal communication received since the last care inspection.

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

During the inspection we discussed any complaints that had been received and any incidents which had occurred with the person in charge 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 to request feedback on the quality of service provided. This included service user/relative questionnaires and an electronic survey for staff to complete.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

### 4.0 What people told us about the service

The information provided by service users and staff during the inspection indicated that they had no concerns in relation to the day care setting. Service users were observed to be relaxed in their interactions with staff. Those spoken with indicated that they were happy attending the day care setting.

Staff and service users spoken with indicated that they had no concerns regarding the care and support provided. Comments provided included:

#### Staff comments:

- "I have no concerns."
- "The care here is excellent and we have really noticed great improvements in the service users, in the length of time they have been here with us."

#### Service users' comments:

- "They are all very good, couldn't be better."

- “All very good.”

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A number of service users spoken with, expressed their disappointment that the day care setting is moving to a different premises. They said that this would potentially impact upon them, if they ever required to attend the day care setting, on more days than they currently attend. These comments were relayed to the area manager, for review and action as appropriate.

A number of service users and relatives returned questionnaires. The respondents indicated that they were very satisfied that care was safe, effective and compassionate and that the service was well led.

Comments included:

- “Very satisfied with the care.”
- “We are all cared for very well and respected.”
- “This doesn’t really affect the care, but it is disappointing there will no longer be access to the gardens when we move to new premises.”

One staff member responded to the electronic survey, indicating that they felt very satisfied that the care was safe, effective and compassionate and that the service was well led. Written comments included:

- “I feel the service users are very well respected, well cared for and their needs are met with dignity and privacy.”

## **5.0 The inspection**

### **5.1 What has this service done to meet any areas for improvement identified at or since last inspection?**

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 inspection to Cookstown Day Centre was undertaken on 26 July 2019 by a care inspector; two 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.

Areas for improvement from the last inspection on 26 July 2019		
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 25.1  <b>Stated:</b> First time  <b>To be completed by:</b> 31 August 2019	The registered person shall ensure that the carpet identified at the inspection is cleaned or replaced.	<b>Not met</b>
	<b>Action taken as confirmed during the inspection:</b> Whilst we acknowledge that the day care setting is due to be relocated to new premises within the next few weeks, the carpet had not been replaced since the last inspection and it was noted to be stained and in need of cleaning. This area for improvement was not met and has been stated for the second time.	
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 25.7  <b>Stated:</b> First time  <b>To be completed by:</b> 30 September 2019	The registered person shall ensure that the uneven surface identified at this inspection is repaired.	<b>Not met</b>
	<b>Action taken as confirmed during the inspection:</b> Whilst we acknowledge that the day care setting is due to be relocated to new premises within the next few weeks, the uneven surface had not been repaired. This area for improvement was not met and has been stated for the second time.	

## 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), in keeping with the regional policy.

It was confirmed that staff are required to complete adult safeguarding training during their induction programme and required updates thereafter. It was good to note that support staff had also undertaken training in adult safeguarding.

Discussion with the person in charge, confirmed that no matters had been raised under the whistleblowing procedures.

The day care setting has a system for retaining a record of referrals made in relation to adult safeguarding matters. No concerns had been referred to the Adult Protection Gateway Service (APGS) since the last inspection. Discussions with the person in charge demonstrated that they were knowledgeable in matters relating to adult safeguarding and the process for reporting adult safeguarding concerns. Adult safeguarding matters are reviewed as part of the quality monitoring process.

Observation of the delivery of care at the time of inspection evidenced that service users' needs were effectively met by the number of staff on duty. Service users were observed to be relaxed in their interactions with staff. Those spoken with indicated that they were happy attending the day care setting.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

The person in charge demonstrated that they have an 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. Examination of service users' care records confirmed that DoLS practices were embedded into practice with the appropriate documentation available for review for two service users subject to restrictions.

Review of staff training records confirmed that all staff had undertaken DoLS training.

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. Staff were observed adhering to guidance and were knowledgeable about IPC practices. 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. Hand sanitisers were strategically located throughout the day care setting.

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.

There was a good system in place to share information relating to Covid-19 and IPC practices.

### **5.2.2 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). All staff had undertaken training in Dysphagia.

The person in charge identified a number of service users who required assistance with eating and drinking due to having swallowing difficulties; some of whom required their food and drinks to be of a specific consistency. Review of the records confirmed that the required food and fluid modifications were included in each service users individual care plan.

### 5.2.3 Are there robust systems in place for staff recruitment?

Staff recruitment was completed in conjunction with the organisation's Human Resources (HR) department. There was a system in place to ensure that recruitment was managed in accordance with the Regulations and Minimum Standards, before staff members commence employment and have direct engagement with service users.

A review of the records confirmed that all staff provided were appropriately registered with the Northern Ireland Social Care Council (NISCC). Information regarding registration details and renewal dates was monitored on a monthly basis; this system was reviewed and found to be in compliance with Regulations and Standards.

### 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 on a monthly basis.

There is a process for recording complaints in accordance with the day care setting's policy and procedures. Review of the complaints records identified that they had been managed appropriately.

It was established during discussions with the area 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, the day care setting was deemed to be providing safe, effective and compassionate care; and the service was well led.

## 7.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with the Day Care Settings Minimum Standards, 2012.

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	0	2*

\* the total number of areas for improvement includes two that have been stated for a second time.

Areas for improvement and details of the Quality Improvement Plan were discussed with the person in charge, 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.	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 25.1  <b>Stated:</b> Second time  <b>To be completed by:</b> 7 June 2022	The registered person shall ensure that the carpet identified at the inspection is cleaned or replaced.  Ref: 5.1
	<b>Response by registered person detailing the actions taken:</b> The identified carpet has not been replaced as Cookstown Day Centre will be relocating to fully renovated premises on the Westlands site in April 2022.
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 25.7  <b>Stated:</b> Second time  <b>To be completed by:</b> 7 June 2022	The registered person shall ensure that the uneven surface identified at this inspection is repaired.  Ref: 5.1
	<b>Response by registered person detailing the actions taken:</b>  The identified uneven surface has not been repaired as Cookstown Day Centre will be relocating to fully renovated premises on the Westlands site in April 2022. This room is currently not used as an activity room for service users.

*\*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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