



Announced Care Inspection Report

14 April 2021



Gloucester Park Day Centre

Type of Service: Day Care Setting
Address: Gloucester Park, Larne, BT40 1PD
Tel No: 028 2827 4311
Inspector: Angela Graham

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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

Gloucester Park is a day care setting with 65 places, the centre provides care and day time activities for older people, people with dementia, physical disability and people who have mental ill health. The day care setting is open Monday to Friday and is managed by the Northern Health and Social Care Trust (NHSCT).

3.0 Service details

Organisation/Registered Provider: Northern Health and Social Care Trust Responsible Individual Ms Jennifer Welsh	Registered Manager: Mr Ronnie Cartwright
Person in charge at the time of inspection: Mr Ronnie Cartwright	Date manager registered: Acting – Awaiting application

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 24 February 2020. Since the date of the last care inspection, RQIA were informed of a small number of notifiable incidents which had occurred within the day care setting in accordance with regulations.

Following an assessment of information held by RQIA relating to the service, and in the absence of RQIA not being made aware of any specific risk to the service users within the day care setting, the decision was made to undertake a remote inspection approach, to reduce any risk in relation to the spread of Covid-19.

An announced inspection took place on 14 April 2021 from 10.00 to 15.15 hours.

Information was requested to be submitted to RQIA prior to the inspection and this was reviewed by the inspector in advance of the inspection. The inspection focused on discussing aspects of the submitted information, in order to substantiate the information.

We reviewed the dates that criminal records checks (AccessNI) had been completed to ensure that they were in place before staff commenced employment. We checked that all staff were registered with the Northern Ireland Social Care Council (NISCC) and that there was a system in place for ongoing monitoring of staff registrations. Staff adherence to the Covid-19 Guidance was also reviewed through discussion with the manager. We also reviewed the list of all Covid-19 related information, disseminated to staff and displayed throughout the day care setting. We verified staff understanding in the context of staff discussions during inspection.

Evidence of good practice was found in relation to recruitment practices and staff registrations with NISCC. Good practice was also found in relation to infection prevention and control (IPC), the use of personal protective equipment (PPE) and Covid-19 education.

An area for improvement was made in relation to adult safeguarding training.

Those consulted with indicated that they were generally satisfied with the care and support provided. Their feedback is detailed within the body of the report.

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
Total number of areas for improvement	0	1

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Mr Ronnie Cartwright, 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 24 February 2020

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 24 February 2020.

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 and Quality Improvement Plan (QIP) and written and verbal communication received since the previous care inspection.

Following a review of the information submitted to RQIA, the inspection took place remotely, using video technology, with the manager. The locality manager was also present for part of the inspection.

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

To ensure that the appropriate staff checks were in place before commencement of employment, we reviewed the following:

Recruitment records specifically relating to Access NI and NISCC registrations.

We also reviewed infection prevention and control (IPC) procedures to ensure that they were compliant with the 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 service users, relatives and staff, to feedback to the RQIA. Six service users and thirteen relatives' responses were received.

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

6.0 The inspection

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 29.1 Stated: Second time	<p>The registered person/ manager shall give notice to the RQIA without delay to the occurrence of -</p> <ul style="list-style-type: none"> c. any serious injury to a service user in the day care setting; f. any accident in the day care setting; <p>This includes incidents occurring within the service. These should be reported to RQIA and other relevant organisations, such as the HSCT professional/ keyworker, in accordance with legislation and procedures.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. RQIA were informed of a small number of notifiable incidents since the previous inspection.</p>	
Area for improvement 2 Ref: Regulation 17 (2,3) Stated: First time	<p>The registered person shall establish and maintain a system for-</p> <ul style="list-style-type: none"> • monitoring the matters set out in schedule 3 of the Day Care Setting Regulations and not less than annually; and • Improving the quality of care provided in the day care setting. <p>The registered manager shall supply to RQIA a report in respect of any review conducted by her for the purpose of the above and make a copy of the report available to service users.</p>	Met

	<p>This should be done in consultation with service users and other stakeholders</p>	
	<p>Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. A copy of the annual quality review report was submitted to RQIA with the returned QIP.</p>	
<p>Area for improvement 3 Ref: Regulation 28 (5) Stated: First time</p>	<p>The registered person shall maintain a copy of the monthly monitoring report required to be made under paragraph 4 of the Day Care Setting Regulations and make it available on request to RQIA and the registered manager.</p>	Met
	<p>Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. The manager advised that copies of the monthly quality monitoring reports are maintained in the day care setting. We reviewed the three most recent monthly quality monitoring reports and found them to satisfactory.</p>	
<p>Area for improvement 4 Ref: Regulation 26.4 (f) Stated: First time</p>	<p>The registered manager shall ensure by means of fire drills and practices at suitable intervals, the persons employed in the day care setting and, so far as practicable, service users, are aware of the procedure to be followed in case of fire, including the procedure for saving life.</p>	Met
	<p>Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. Review of fire drill records evidenced that the last fire drill was undertaken on 09 September 2020.</p>	

Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
<p>Area for improvement 1</p> <p>Ref: Standard 8.2</p> <p>Stated: Second time</p>	<p>The registered person shall ensure that management’s response to suggestions made or issues raised by service users is clearly stated.</p> <p>This includes suggestions made to the inspector by service users during this inspection. These were discussed with the manager which require a response in relation to name badges worn by staff that are easy to read; and keyworker to offer the option of privacy during one to one sessions with service users.</p>	<p>Met</p>
	<p>Action taken as confirmed during the inspection:</p> <p>The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. The manager advised that easy read staff name badges were provided to staff following the previous care inspection. The manager further advised that the identified service user was afforded privacy during one to one sessions with their keyworker.</p>	

6.1 What people told us about this service

The feedback received indicated that people were generally satisfied with the current care and support. Nineteen questionnaires were received with varying responses to satisfaction levels in relation to the four domains of safe, effective, compassionate and well led care. A relative outlined they were very dissatisfied with safe, effective, compassionate and well led care. No additional comments were provided. All questionnaire responses were shared with the manager following the inspection for further consideration and action, as appropriate.

During the inspection we spoke with the manager, two day care workers, one care assistant and two service users. Comments are detailed below.

Comments from staff included:

- “I have had IPC training and Covid awareness training.”
- “We have made lots of changes to ensure the service users’ safety in the centre following reopening. This included removing extra furniture, spacing furniture two metres apart and lots of PPE available.”
- “I am very passionate about the care of the service users and that they get the best possible care with positive outcomes.”
- “We have been provided with lots of information regarding Covid. We get a daily broadcast email from the Trust.”
- “PPE of a good quality and never any issues about supply. There is lots of extra cleaning undertaken in the day centre, things like door handles, table and chairs.”
- “Great team in the centre and the new manager has been very supportive to staff even though he has not been here long.”
- “All training is of a good standard and relevant to my role.”
- “We encourage and support the service users with hand hygiene. .”

Comments from service users’ included:

- “I am always asked what I want to do when I am here.”
- “Lots of changes have taken place since Covid-19 such as social distancing and we are reminded of the importance of hand hygiene.”
- “I love coming to the centre.”
- “The staff are kind, friendly, supportive and professional. They ask my opinion and respect my views. The day centre is extremely clean and the meals are excellent.”
- “The centre is always spotless. I see staff cleaning all the time.”
- “Staff are kind and respectful.”
- “We are offered choice every day.”
- “I have no problems and if I did I would feel comfortable talking to staff.”

Comments from relatives’ included:

- “We have found the day centre staff to be fantastic with our relative. The care and attention they give is exceptional. We have the upmost respect and admiration for all of the staff.”
- “Any communication I have had with staff has been friendly, helpful and very professional. I experienced a very warm atmosphere at the day centre on the previous occasions I visited.”

- “I find the staff to be courteous, helpful and professional.”
- “My relative is very happy at the day centre. Their needs are well catered for and they are treated with respect and compassion.”
- “I’m disappointed with the lack of transport arrangements.”
- “I have been reassured and impressed by the trust that I have personally observed my relative has in the staff keeping them safe in their care.”

6.2 Inspection findings

Recruitment

The manager confirmed that all staff appointments were made in compliance with relevant legislative requirements and trust policy and procedures. We reviewed documentation in staff files in relation to pre-employment checks which provided assurances that Access NI checks were completed prior to staff commencing employment.

A review of records confirmed all staff working in the day care setting are currently registered with NISCC. Information regarding registration details and renewal dates are monitored by the manager. 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. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

Governance and Management Arrangements

A complaints and compliments record was maintained in the day care setting. The manager confirmed that one complaint had been received since the date of the last inspection and that local resolution had been achieved. Discussion with staff confirmed that they knew how to receive and deal with complaints and ensure that the manager was made aware of any complaints. Samples of compliments were available for review and evidenced a high level of satisfaction with the service provided. Comments included “Thank you for the kindness and compassion shown to Xxxx.”

Discussions with the manager and staff described positive working relationships in which issues and concerns could be freely discussed; staff reported they were confident that they would be listened to. In addition, staff confirmed that they felt supported by management.

We discussed the monitoring arrangements in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. The regulation 28 quality monitoring visits had been undertaken monthly by an independent trust monitoring officer. We reviewed three quality monitoring reports completed in December 2020 and January and February 2021. The reports adhered to RQIA guidelines and evidenced engagement with service users, professionals and staff, with positive feedback recorded.

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

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

Discussion with staff established that they were aware of the roles and responsibilities in relation to reporting adult safeguarding concerns and maintaining safeguarding records. However, we identified that ancillary staff had not received training with regards to adult safeguarding. Adult safeguarding training was identified as an area for improvement.

Covid-19

The environment was observed during a virtual tour of the day care setting and there was evidence of IPC measures in place such as PPE which was available for staff. Other IPC measures were in place, which included wall mounted hand sanitisers 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.

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 discussed the provision of mandatory training specific to IPC measures with staff. Staff confirmed that they had undertaken IPC training and that the training provided them with the necessary skills and knowledge to care for and support service users. Staff training records confirmed that staff had received training in IPC and Covid-19 awareness including the donning (putting on) and doffing (taking off) of PPE. The manager confirmed that management were monitoring progress with overall mandatory training to ensure full compliance.

Staff described how they wore PPE for activities that brought them within two metres of service users. The staff members spoken with reported that there was an appropriate supply of PPE and sufficient bins available to allow the safe disposal of PPE. IPC and hand hygiene audits were undertaken and evidenced good compliance with best practice.

There were measures in place to support service users to maintain a two metre distance from other people. Changes to the routines of the day care setting had been made, to ensure this could be maintained. Changes had been made to activities such as, mealtimes, activities and social outings, to ensure that the service users could maintain the two metre distance from each other.

There was also a system in place to ensure that staff and service users had a daily wellness check recorded.

The manager, staff and service users confirmed enhanced cleaning was undertaken, to minimise the risk of cross contamination. This included the frequently touched points throughout the building.

The manager provided a list to RQIA, by email, of the information available in the day care setting in relation to Covid-19. This included information related to:

- PHA Guidance and use of PPE
- Working safely together – summary guide for staff
- NHSCT Adherence to Covid guidance

- PHA face coverings for HSC staff
- Donning and doffing of PPE for droplet precautions for Covid-19.

The procedures and guidance in place evidenced that:

- Robust 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
- All staff working in the service are able to demonstrate their knowledge of infection prevention and control practice commensurate to their role and function in the service.

From feedback, it was positive to note that staff were working well together to support the best outcomes for service users, in a caring and safe manner.

It was also noted that staff were committed to working in line with Covid-19 guidance to ensure that the impact of current measures, strikes the correct balance between keeping people safe and promoting a good quality of life, as confirmed in discussions with staff and service users. 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.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to recruitment practices, staff registrations with NISCC, communication between service users, staff and other key stakeholders, compliance with Covid-19 guidance, the use of personal protective equipment guidelines, Covid-19 education and management including IPC measures.

Areas for improvement

An area for improvement was made in relation to adult safeguarding training.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

An areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Mr Ronnie Cartwright, 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.

7.1 Areas for improvement

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

7.2 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>Area for improvement 1</p> <p>Ref: Standard 13.4</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing from the date of inspection.</p>	<p>The registered person shall ensure that all staff (including ancillary) have completed training on and can demonstrate knowledge of adult safeguarding.</p> <p>Ref: 6.2</p>
	<p>Response by registered person detailing the actions taken:</p> <p>Ancillary staff are line managed by other departments i.e. not the Day Centre Manager. Safeguarding Training has been discussed with the line managers of these departments and they are in agreement with ancillary staff attending this training. The Day Centre Manager has arranged training for ancillary staff which is due to take place in June 2021. A copy of this training record will be maintained within the Day Centre.</p>

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



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