

# Unannounced Care Inspection Report 10 March 2020



## Inniscoole Day Centre

**Type of Service: Day Care Service**

**Address: Innis Avenue, Rathcoole, Newtownabbey, BT37 9ET**

**Tel No: 028 9085 4333**

**Inspector: Fionnuala Breslin**

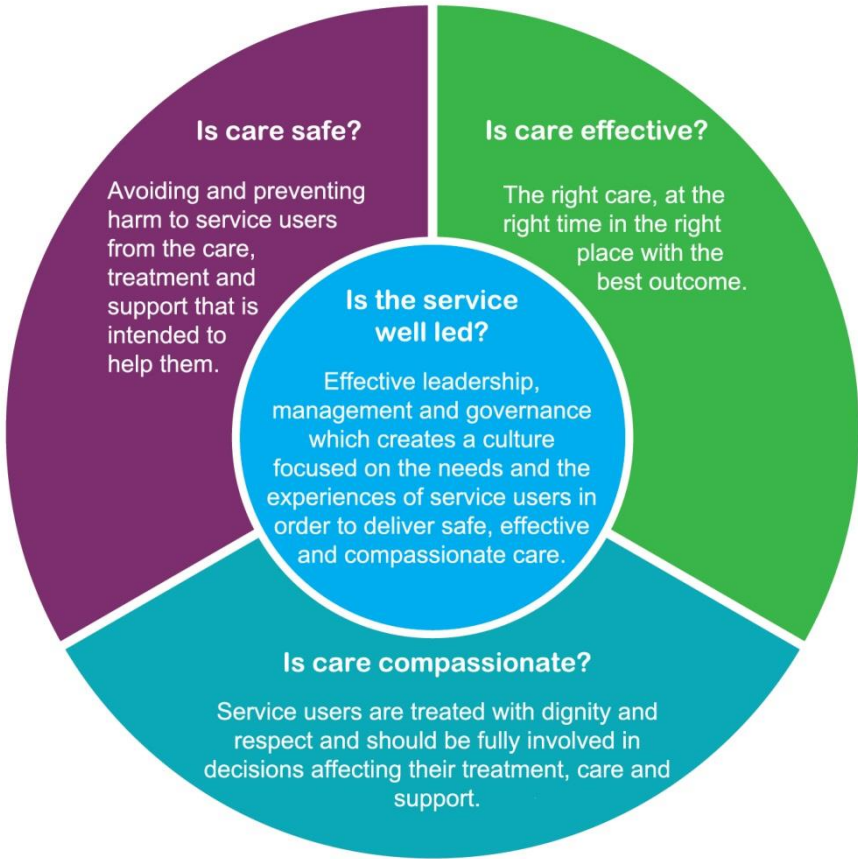
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Assurance, Challenge and Improvement in Health and Social Care

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**

Inniscoole Day Centre has places approved for 75 people in all adult ages. Service users may have assessed needs in one or more categories of disability, infirmity, dementia, illness, sensory impairment or addiction. Programmes are arranged throughout each week to meet the needs of people in their allocated groups.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Northern HSC Trust  <b>Responsible Individual:</b> Dr Anthony Baxter Stevens	<b>Registered Manager:</b> Mrs Louanne Bakker
<b>Person in charge at the time of inspection:</b> Mrs Louanne Bakker	<b>Date manager registered:</b> 5 February 2019
<b>Number of registered places:</b> 75	

### 4.0 Inspection summary

An unannounced inspection took place on 10 March 2020 from 11.00 hours to 14.10 hours.

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, and The Northern Ireland Social Care Council (Social Care Worker Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the day centre was delivering safe, effective and compassionate care and if the service was well led.

There were no new areas for improvement identified. One area for improvement stated in the last inspection on 19 March 2019 had been partially met and is therefore restated following this inspection.

Evidence of good practice was found in relation to checks recruitment checks and NISCC registrations audits; meaningful activities and involvement of the wider community; service user involvement and person centred care. There was evidence of good leadership and a highly motivated team approach.

#### 4.1 Inspection outcome

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

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

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

## 4.2 Action/enforcement taken following the most recent care inspection dated 19 March 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 19 March 2019.

## 5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this day care service. This included the previous inspection report, the returned QIP, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service. We also spoke with a Health and Social Care Trust (HSCT) professional involved with the service.

We ensured that the appropriate staff checks were in place before staff work with service users. Recruitment records specifically relating to Access NI and NISCC registration were reviewed.

Ten questionnaires were provided to give service users and their representatives the opportunity to contact us after the inspection with their views; two responses were returned within the timeframe for inclusion within this report. A poster was provided for staff detailing how they could complete an electronic questionnaire; no responses were received.

RQIA information leaflets 'How can I raise a concern about an independent health and social care service' were also provided to be displayed in the centre.

The inspector met with 13 service users, three staff, and one visiting professional during the inspection.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met or not met.

The inspector would like to thank the manager, service users, visiting professional 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 The inspection

Areas of Improvement from the last Inspection		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 18 (2) (b)  <b>Stated:</b> First time	The registered person shall ensure the flooring in the centre is in good repair and conducive to the needs of the service users including those service users who have a sensory impairment and/or physical disability.	<b>Partially met</b>

<p><b>To be completed by:</b> 1 June 2019</p>	<p><b>Action taken as confirmed during the inspection:</b> The inspector confirmed that preliminary work required to carry out completion of replacing carpets throughout the centre had taken place. However, at the time of inspection, the old carpet remained in place. The manager evidenced that the job requisition was submitted and contractors had visited and measured the floors throughout the centre. Although there was no definite plan for work to commence in place the inspector was assured that this is in progress.</p>	
<p><b>Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012</b></p>		<p><b>Validation of compliance</b></p>
<p><b>Area for improvement 1</b>  <b>Ref:</b> Standard 13.2  <b>Stated:</b> First time  <b>To be completed by:</b> 1 May 2019</p>	<p>The registered person shall ensure that information is available for service users and displayed in the centre regarding the adult safeguarding arrangements. The information should include the first point of contact in the centre and contact details.</p> <p><b>Action taken as confirmed during the inspection:</b> The inspector confirmed that this information was available and up to date at the time of inspection. A poster was in place with the relevant details in regards to adult safeguarding arrangements including the first point of contact in the centre and contact details for the trust adult safeguarding champion.</p>	<p><b>Met</b></p>

## 6.1 Inspection findings

Discussion with the manager and a review of records of six staff members confirmed that there was a system in place to ensure that relevant pre-employment checks with Access NI had been undertaken prior to employment. There was also a system in place to ensure that staff members were registered with NISCC and this was monitored on a regular basis. A spot-check was completed by the manager with the inspector and the six staff members checked were confirmed as registered.

Activities on the day of inspection included an intergenerational group involving 14 year old local school children, service users (65+) and an artist from the Arts Council. They were in the process of creating a mural. All participants appeared very animated and seemed to be actively enjoying the experience.

The manager informed the inspector that other groups were being held at the centre with the involvement of resources and extended community participation. These programmes were

short-term ranging from 6-12 weeks and were focused on supporting people with dementia, mental health conditions, and the promotion of good health and wellbeing. The day centre accepted direct referrals from the community support social work and mental health teams.

Those consulted with commented positively to questions specifically directed at how the care and support provided was safe, effective, compassionate and well led. Comments are detailed below:

Service users said:

- “Members of staff here are very good and very helpful.”
- “I can’t see where I’m going and the staff here help me to get around, I feel safe with them.”
- “Yes I do feel safe and I like the company.”
- “I have no concerns I am very happy coming here.”
- “I feel very safe here.”
- “I always look forward to coming here.”
- “I enjoy listening to tapes, and different things.”
- “I like the quizzes, I enjoy taking part.”
- “I enjoy every minute of it.”
- “The food is good.”
- “There is a great variety of activities here. There is art, reminiscence, music, baking and two big outings a year we all look forward to.”
- “We are always welcomed by staff with a smile.”
- “The staff are very kind nothing is a bother to them.”
- “I absolutely love coming here the staff are marvellous.”
- “The staff are very friendly.”
- “The care is compassionate from the time we get on the bus with the driver and in the centre, I couldn’t fault it.”
- “The place is well run and I couldn’t think of any faults.”
- “If I had a concern I would go to ‘named three different support workers’.”
- “The manager is doing a very good job here.”

Staff said:

- “There are always plenty of staff on duty.”
- “My mandatory training is up to date we have closure days for face to face training and we do eLearning on the computer.”
- “Fire safety training is coming up soon we do this yearly.”
- “We don’t have any locked doors, there is one restrictive practice and it is documented in the care plan and is in the person’s best interest, the last review was recently.”
- “I am a fairly new member of staff and the care here is outstanding. We complete progress reports at least every fifth day.”
- “If I had any concerns I would go straight to the manager.”
- “The training I have received has helped me to remind me what to do and keeps me refreshed so I always know what I should be doing.”
- “My induction was very thorough and informative. I shadowed a member of staff for two weeks and I have completed a NISCC induction workbook.”
- “We have service users with dysphagia and they all have speech and language therapist recommendations, there is a file and we are all very careful to follow the recommendations precisely.”
- “I get supervision from the manager every three months and I have had an annual appraisal.”



A visiting professional, a Community Support -Worker with the social work team, made the following comments:

- “Staff members are very amenable toward and really compassionate with service users. They are very supportive and have always managed to place the service users I have referred into the groups requested.”
- “Reviews are very professional and I am given a copy of the preparation for review.”
- “The staff link in with me and provide me with the relevant background information that helps me to carry out the review.”
- “The care I have witnessed is very compassionate and person centred.”
- “The sharing of information about the service user is on a need to know basis and the service user is consulted regarding information shared.”
- “The service user is the main focus of the review the day centre team helps support me to carry out the reviews.”
- “I have quite a few service users referred to this centre and I visit frequently as I am based here. The day centre staff always keep me informed of any changes in the service user’s needs or if they are unwell so that I can follow up in the community.”

The returned questionnaires from two relatives indicated that that they were ‘very satisfied’ that the care was safe, effective and compassionate; and that the service was well led.

### Areas of good practice

Evidence of good practice was found in relation to Access NI checks and NISCC registrations audits; meaningful activities and involvement of the wider community; service user involvement and person centred care. There was evidence of good leadership and a highly motivated team approach.

### Areas for improvement

One area requiring improvement was identified regarding the existing carpet which needs to be replaced and this has been restated.

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

## 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Louanne Bakker, 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

Areas for improvement have been identified where action is required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007 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.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007.</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 18. 2 (b)  <b>Stated:</b> Second time  <b>To be completed by:</b> 1 August 2020	The registered person shall ensure the flooring in the centre is in good repair and conducive to the needs of the service users including those service users who have a sensory impairment and/or physical disability.  Ref: 6.0  <b>Response by registered person detailing the actions taken:</b>

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





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