

Inspection Report

Name of Service: Age NI
Provider: Age NI
Date of Inspection: 27 January 2025

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

1.0 Service information

Organisation/Registered Provider:	Age NI
Responsible Individual	Linda Robinson
Registered Manager:	Karen Graham
Service Profile – This is a day care setting which provides day care for service users living with dementia. The day care setting is operational on a Monday, Wednesday and Friday.	

2.0 Inspection summary

An unannounced inspection took place on 27 January 2025 between 10.00 a.m. and 1.00p.m. The inspection was conducted by a care inspector.

The inspection was undertaken to evidence how the day care setting is performing in relation to the regulations and standards and to determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

The inspection examined the centre's governance and management arrangements, reviewing areas such as, professional registrations, staff induction and training and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing, Deprivation of Liberty Safeguards (DoLS), Service user involvement, Restrictive practices and Dysphagia management was also reviewed.

The inspection did establish that care delivery was safe, effective and well led; and that compassionate care was delivered to service users. Details and examples of the inspection findings can be found in the main body of the report.

It was evident that staff promoted the dignity and well-being of service users and that they engaged service users in enjoyable, meaningful activities.

Service users said that they enjoyed being in the day care setting. One service user commented that staff were great. Service users unable to voice their opinions were observed to be comfortable in their surroundings and in their interactions with staff. Refer to Section 3.2 for more details.

This inspection resulted in no areas for improvement being identified. Good practice was identified in relation to service user involvement. There were good governance and management arrangements in place.

3.0 The inspection

3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the day care setting was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this day care setting. This included the registration information, and any or written or verbal information received from service users, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors will review a sample of records to evidence how the centre is performing in relation to the regulations and standards.

3.2 What people told us about the service and their quality of life

Throughout the inspection the RQIA inspector will seek to speak with service users, their relatives or visitors and staff for their opinions on the quality of the care and support, their experiences of living, visiting or working in this centre.

Through actively listening to a broad range of service users, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

The inspector spoke to a range of service users and staff to seek their views of visiting and working within the centre. The information provided indicated that there were no concerns in relation to the day care setting.

Service users spoke positively about their experiences attending the centre. They talked about being well looked after and enjoying meeting other people.

Staff said they believed service users enjoyed being in the centre and that they themselves loved working there.

There were no responses to the electronic survey and no questionnaires returned.

3.3 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 20 October 2023 by a care inspector. No areas for improvement were identified.

3.4 Inspection findings

3.4.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of service users. Since the last inspection there had been no new staff employed in the day care setting.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC) or any other relevant regulatory body. There was a system in place for professional registrations to be monitored by the manager. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date. Sufficient numbers of staff were on duty to support the three service users who attended on the day of inspection. There was a system in place for all newly appointed staff to complete 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.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken. The review of training records evidence that staff had completed appropriate training to meet the needs of the service users.

There were no volunteers deployed within the day care setting.

3.4.2 The 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. 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 had also completed Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. The manager reported that no service users were subject to DoLS. A resource folder was available for staff to reference.

A number of service users were assessed by Speech and Language Therapy (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.

The atmosphere in the centre was warm and friendly and staff were polite and attentive to service users. Where a service user was assessed at risk of falling, measures to reduce this risk were put in place. In addition, any incidents were reviewed monthly as part of the quality monitoring process. There was evidence that systems and processes were in place to promote infection prevention and control which included policies and procedures.

A fire risk assessment had been completed on 1 November 2024 and there was evidence of regular fire safety checks. During the inspection fire exits were observed to be clear of clutter and obstructions. All staff had attended a fire evacuation drill during the last year.

3.4.3 The arrangements for promoting service user involvement.

The day care setting was clean and bright and appeared welcoming, warm and comfortable. It had been decorated since the last inspection.

Care records were person centred and regularly reviewed to ensure they continued to meet the service users' needs. The service users' care plans contained details about their likes and dislikes and the level of support they may require. The day care setting had service user meetings on a monthly basis which enabled the service users to discuss what they would like to be involved in.

There was evidence throughout the centre of individual and group involvement in enjoyable tasks. On the day of inspection some service users were engaged in reminiscence activities and the staff were supporting them patiently and respectfully.

3.4.4 Quality of Management Systems

There were monitoring arrangements in place. A review of the reports of the day care setting's quality monitoring established that there was engagement with service users, service users' relatives, staff and HSC Trust representatives. The robust 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 (SAI) procedure.

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. No complaints were received since the last inspection.

There was also a system in place for managing instances where a service user did not attend the day centre as planned. This included a system for signing in and out service users who attend. The inspector also discussed transport arrangements and daily logs for service users and advised of the need for the escort on the journey to ensure and document that no service users remained on the transport at the end of the journey.

4.0 Quality Improvement Plan/Areas for Improvement

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



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