

Inspection Report

5 November 2021



GlenOaks Day Centre

Type of service: Day Care Service
Address: Glen Road, Londonderry, BT48 0BX
Telephone number: 028 7126 6593

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Western HSC Trust	Registered Manager: Mr John McConnellogue
Responsible Individual: Dr Anne Kilgallen	Date registered: Registration pending
Person in charge at the time of inspection: Mr John McConnellogue	
Brief description of the accommodation/how the service operates: This is a Day Care Setting with 30 places that provides care and day time activities for people living with physical and mental difficulties.	

2.0 Inspection summary

An unannounced care inspection took place on 5 November 2021 between 10 am and 1.30 pm by a care inspector.

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

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

An area for improvement was identified during this inspection relating to adult safeguarding training. However, the manager submitted evidence to RQIA on 12 November 2021 that the area for improvement had been met. Therefore a Quality Improvement Plan was not issued.

Good practice was also 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, 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 and the NMC were monitored.

During the inspection we discussed any complaints that had been received and any incidents which had occurred with the manager 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 manager 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 there were no concerns in relation to the day care setting. All confirmed that they were very satisfied with the standard of care and support provided. The inspector spoke with a number of service users and staff, including the manager.

Service users' comments:

- "It is brilliant here, there is no need to be checking on them here as they are all doing their jobs well."
- "It's very good."
- "I like it here, the staff always help me."

Staff' comments:

- "No worries, it is a great place."
- "It is very good, no problems at all."

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

Comments included:

- "Everything is great, I enjoy the day centre."

- “Very happy with the care.”

No staff responses were received via the electronic survey.

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 GlenOaks was undertaken on 5 September 2019 by a care inspector; no areas for improvement were identified. An inspection was not undertaken in the 2020-2021 inspection years, due to the impact of the first surge of Covid-19.

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. However, the review of the training records identified that the transport staff had not undertaken safeguarding training. However, the manager submitted evidence to RQIA on 12 November 2021 that the area for improvement had been met. Therefore a Quality Improvement Plan was not issued.

Discussion with the manager, confirmed that no matters had been raised to them under the whistleblowing procedures.

The day care setting has a system for retaining a record of referrals made in relation to adult safeguarding matters. Records viewed and discussions with the manager indicated that no referrals had been made. Discussions with the manager 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.

Service users who spoke to us stated that they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns in relation to safety or the care being provided. 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.

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

The manager and staff 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. There were no service users who were subject to DoLS on the day of the inspection. Review of staff training records confirmed that a number of staff had not completed DoLS training. This was discussed with the manager, who agreed to address the matter. The manager provided written confirmation to RQIA on 12 November 2021 which indicated that all the training had been completed. We were satisfied that this had been addressed.

On entering the day care setting the inspector's temperature was obtained by the staff, who advised that this is completed on all persons entering the day care setting in line with current Covid-19 guidelines.

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. Other infection prevention and control 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.

Observations of the environment concluded that it was fresh smelling and clean throughout.

There was a good system in place to share information relating to Covid-19 and IPC practices. Staff were observed adhering to guidance and were knowledgeable about IPC practices.

5.2.2 Are there robust systems in place for staff recruitment?

There was a process in place to ensure that new staff are recruited in accordance with the regulations and minimum standards and this was verified in the review of records.

As detailed in section 5.1, a review of the records confirmed that all support workers are appropriately registered with NISCC. Information regarding registration details and renewal dates for staff are monitored by the manager; this system was reviewed and found to be in compliance with Regulations and Standards. Advice was given in relation to undertaking checks on a monthly basis. In addition, the manager was advised to add any NMC registrants to the monthly checks. RQIA was satisfied that all the nurses were registered with the NMC on the day of the inspection.

5.2.3 Is there a system in place for identifying service users Dysphagia needs in partnership with the Speech and Language Therapist (SALT)?

The manager 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

consistency was included in the care plan. However, one risk assessment had not been updated since 2018. The risk assessment in the second care record was not in place.

This meant that we were not assured as to the information contained in the care plan. This was discussed with the manager who was able to evidence the efforts made to obtain the risk assessments. The manager confirmed to RQIA by email on 12 November 2021, that the required risk assessments had been received. Whilst we were satisfied in this regard, RQIA will review the risk assessments at future inspection, to ensure the risk assessments continue to be updated.

New standards for thickening food and fluids were introduced in August 2018. This was called the International Dysphagia Diet Standardisation Initiative (IDDSI). A number of staff had yet to complete training in Dysphagia. Following the inspection, the manager confirmed to RQIA, by email on 12 November 2021, that the identified staff had completed their Dysphagia training. We were satisfied that this had been addressed.

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 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

There were no areas for improvement identified during this inspection, and a Quality Improvement Plan (QIP) is not required or included, as part of this inspection report.



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