



Unannounced Care Inspection Report 17 November 2020



Benbradagh

Type of Service: Day care
Address: Scroggy Road, Limavady, BT49 0NA
Tel No: 028 7776 1103
Inspector: Jim McBride

1.0 What we look for
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

This is a day care setting that provides care and day time activities for up to 79 service users with a learning disability. The day care setting is open Monday to Friday and service is provided over two adjacent sites in the same grounds.

3.0 Service details

Organisation/Registered Provider: WHSCT Responsible Individual: Anne Kilgallen	Registered Manager: Vanessa Carlin
Person in charge at the time of inspection: Vanessa Carlin	Date manager registered: 21/04/2020

4.0 Inspection summary

An announced inspection took place on 17 November 2020 from 09.30 to 12.00. 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.

To reduce any risk this inspection was carried out using an on-site inspection approach with socially distanced guidance in place during this announced inspection.

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 Workers Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017.

Evidence of good practice was found in relation to Access NI and staff registrations with the Northern Ireland Social Care Council (NISCC). Good practice was also found in relation to all current Covid-19 guidance and the use of PPE guidelines, Covid-19 education and management including infection prevention and control measures. Individual quality measures in place are completed by staff daily.

It was positive to note that staff had supported both service users and relatives throughout Covid-19 as the centre provided regular contact with service users. The centre must be commended for the comprehensive call log maintained by staff, which shows regular contact and comments from both service users and relatives during Covid-19.

The findings of this report will provide the centre manager with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Vanessa Carlin, 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 20 May 2019

No further actions were required to be taken following the most recent inspection on 20 May 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, any notifiable events written and verbal communication received since the previous care inspection.

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

We ensured that the appropriate staff checks were in place before staff work with service users and reviewed the following areas:

- Recruitment records specifically relating to Access NI and NISCC registration.
- Covid-19: guidance for Day care. Provided by RQIA for centres planning to reopen

RQIA provided information to service users, staff and other stakeholders that will support feedback on the quality of service delivery. This included 'Tell us' cards, Service user's questionnaires and a staff poster to enable the stakeholders to feedback to the RQIA. No responses were received; however discussions during the inspection with both service users and staff did show good satisfaction levels see comments below.

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

During the inspection we met with the manager and two staff who gave a comprehensive and knowledgeable overview of the service. We also had the opportunity to meet and observe a number of service users during this inspection.

Service user comments during inspection:

- "I enjoy the centre."
- "I enjoy all the activities."
- "It's good to be back."
- "No complaints."
- "Staff are good."
- "I have lots to do."
- "I enjoy my flower arranging."

Staff comments during inspection:

- "The manager has an open door and we have good communication."
- "Good staff team communication."
- "I had a good comprehensive induction."

- “We always offer choices to service users.”
- “Good training.”
- “We feel safe and secure with PPE and other guidance in place.”
- “I promote human rights and encourage independence.”
- “Good manager who is approachable.”

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

6.0 The inspection

There were no areas for improvement made as a result of the last care inspection.

6.1 Inspection findings

Staff recruitment:

The services staff recruitment processes were noted to be managed in conjunction with the organisation’s Human Resources (HR) Department, located at the organisation’s head office. Discussion with the person in charge identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 and Standard 11 relating to Access NI and NISCC. We reviewed documentation in staff files in relation to pre-employment checks which provided assurances that Access NI checks were completed before commencement of employment.

A review of six staff records confirmed that all staff are currently registered with NISCC. We noted that the manager had a system in place each month for monitoring registration status of staff with NISCC and confirmed that, all staff are aware that they are not permitted to work if their NISCC registration had lapsed.

On the day of the inspection it was noted that no incidents had taken place since the previous inspection on the 20 May 2019.

The agency maintains and implements a policy relating to complaints. On the day of the inspection it was noted that the agency had not received any complaints since the previous inspection 20 May 2019.

Service quality:

A number of quality monitoring reports were available for review and we noted some of the comments made by service users, staff, relatives and HSC trust staff:

Service user’s comments:

- “I love the room I’m in now.”
- “Staff are good and helpful.”
- “I enjoy being back to the centre.”

Staff comments:

- “Good care and support.”

- “Management are very approachable.”
- “Glad to get service users back to a routine.”

Relative’s comments:

- “We are happy with the care and support.”
- “Staff can’t do enough for *****.”
- “This is a very good service.”

HSC Trust staff comments:

- “Flexible and responsive staff.”
- “The standard of care is good.”
- “I’m happy with the input from staff to the clients.”

Care planning and review:

We reviewed six care plans in place for individual service users. These fully described the care and support required for individuals and included:

- Referral information
- Care plan
- Individual action plans
- Risk assessments
- Reviews

Annual review comments:

- “I’m happy in the centre.”
- “Staff support me on a daily basis.”
- “I enjoy the activities.”
- “I very happy here.”

Areas of good practice

Areas of good practice were identified in relation to the completion of checks with Access NI in conjunction with HR Department and staff registrations with NISCC. Quality monitoring reports show clear evidence of satisfaction levels.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

Covid-19

We spoke with the staff who were aware and knowledgeable in relation to their responsibility related to Covid-19. Staff stated they were aware of the guidance in relation to use of Personal Protective Equipment (PPE) for activities that brought them within two metres of service users.

Staff were also aware of the need to replace PPE between service users and how to appropriately dispose of used PPE.

We reviewed the current practices relating to the following areas of guidance and good practice pertaining to Covid-19.

- Dissemination of information to staff
- Monitor staff practice
- IPC policies and procedures
- Infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19.
- Temperature monitored twice daily In line with guidance
- Used PPE storage and disposal
- Staff training and guidance on, Infection prevention and control and the use of PPE equipment, in line with guidance.

We reviewed records relating to Infection prevention and control policies which were in-line with the Covid -19 guidance. Policies and guidance were available to all staff in hard copy within the centres office and staff confirmed they were familiar with the procedures.

We reviewed templates that indicated that service users and staff have their temperatures monitored in accordance with the guidance. Monitoring records also involved asking about and looking out for the following symptoms, fever of 37.8C or above, cough, loss of or change in sense of smell or taste.

Hand sanitisers have been placed in different areas throughout the centre for service users, staff and visitors to use to ensure and promote good hand hygiene.

There was evidence that clear guidance with regards to IPC, donning (putting on) and doffing (taking off) of PPE. There was evidence that staff had completed training with regards to IPC. Training records reviewed verified this. Staff spoken with, confirmed their training and were knowledgeable in this area.

The staff on duty demonstrated that they had a good understanding of the donning and doffing procedures and were observed to be using PPE appropriately. The staff discussed the procedures that both they and senior staff spot check the use of PPE by staff during the day. Spot checks on staff practice are undertaken to ensure they are fully compliant with current guidance.

The procedures and guidance in place show 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.

It was positive to note that staff were working well together to support the best outcomes for service users, in a sensitive manner, whilst being caring and compassionate to both service users and their relatives. This was supported by observations and discussions with service users and comments received during monthly quality monitoring.

It was 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. Staff are 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 within the centre.

Areas of good practice

- Dissemination of information to staff
- Monitor staff practice
- IPC policies and procedures
- Infection prevention and control policies and procedures have been updated to address all current guidance in relation to Covid-19.
- Staff training and guidance.
- Reopening preparation and guidance.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

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



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