

# Unannounced Care Inspection Report

## 3 June 2021



## Lisanally Resource Centre

**Type of Service: Day Care Setting**  
**Address: 84 Lisanally Lane, Armagh, BT61 7HF**  
**Tel No: 028 3752 8800**

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

## 1.0 Service information

<b>Organisation/Registered Provider:</b> Southern Health and Social Care Trust  <b>Responsible Individual:</b> Mr Shane Devlin	<b>Registered Manager:</b> Mr Martin Stevenson
<b>Person in charge at the time of inspection:</b> Mr Martin Stevenson	<b>Date registered:</b> 7 October 2010
<b>Brief description of the accommodation/how the service operates:</b> Lisanally Resource Centre is a day care setting with accommodation to provide 25 places for older people and persons with dementia. The service provides care and therapeutic activities, Monday to Friday each week.	

## 2.0 Inspection Summary

An unannounced care inspection took place on 3 June 2021 between 9.40 am and 3.50pm.

This inspection focused on the Northern Ireland Social Care Council (NISCC) registrations, adult safeguarding, notifications, complaints and whistleblowing, Deprivation of Liberty Safeguards (DoLS), restrictive practice, 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.

Good practice was identified in relation to appropriate checks being undertaken before staff commenced employment in the day care setting. Good practice was also found in relation to system in place of disseminating Covid-19 related information to staff. There were good governance and management oversight systems in place.

An area for improvement was made in relation to staff duty rosters.

## 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, and to address any deficits identified during our inspections.

The inspection focused on reviewing a range of relevant documents, policies and procedures relating to the day care settings governance and management arrangements. This included checking how care staffs' registrations with the Northern Ireland Social Care Council (NISCC) were monitored by the day care setting.

We discussed any complaints and incidents during the inspection 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 a staff electronic survey to enable them to provide feedback to the RQIA. Two service user/relatives responses were received within the timescale requested and the respondents were very satisfied that care was safe, effective, compassionate and well led.

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 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 six service users and seven staff including the manager. One staff member made a suggestion in relation the provision of a specific activity. All staff feedback was shared with the manager at inspection feedback and with the head of service following the inspection for further consideration and action, as appropriate.

##### **Service users' comments:**

- "Staff are very kind and respectful; I am happy here and look forward to coming."
- "I am offered choice of lots of things here. Staff always listen to me and respect my choices."
- "Lots of changes in the centre since Covid; staff always wear their PPE, social distancing and lots of cleaning done."
- "Staff ask my views about things such as activities, choice of music and meals."
- "Centre is always spotless."
- "Care here is great."
- "I would feel happy talking to staff if something was bothering me and I know staff would listen to me."
- "I like coming to the centre and I am very glad to be back."

##### **Staff comments:**

- "Lots of information provided about Covid, we have a Covid file in the office and we can read updates at any time."
- "I think the care and support here is excellent."
- "I have done donning and doffing training as part of my infection prevention and control training and I have done Covid awareness training."
- "I am very well supported by the manager and we can contact him at any stage if he is in another centre."

- “Good training provided and the training is monitored by the manager.”
- “Lots of PPE available to staff and I feel safe at work.”
- “I have wonderful respect for the manager and I could talk to him openly, he is very fair.”
- “I have undertaken dysphagia awareness training.”

## 5.0 The inspection

### 5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last inspection of the service was undertaken on 8 July 2019 by a care inspector; one area for improvement was identified.

#### 5.1.2 Review of areas for improvement from the last care inspection dated 8 July 2019

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
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 26 (2) (a)  <b>Stated:</b> First time	The registered person shall ensure the fire risk assessment is reviewed within the stated timeframes. The date of the review should be detailed in the returned QIP.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> The returned quality improvement plan and discussion with the manager confirmed that this area for improvement had been addressed. Evidence was provided that a fire risk assessment had been undertaken on 25 July 2019.	

## 5.2 Inspection findings

### 5.2.1 Are there systems in place for identifying and addressing risks?

The day care settings provision for the welfare, care and protection of service users was reviewed. The organisation's policy and procedures reflect information contained within the Department of Health's (DOH) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlines the procedure for staff in reporting concerns. The organisation has an identified Adult Safeguarding Champion (ASC).

Discussions with the manager demonstrated that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting adult safeguarding concerns. Staff could describe the process for reporting concerns.

It was identified that staff are required to complete adult safeguarding training during their induction programme and required updates thereafter.

Staff indicated that they had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidents of abuse. They could describe their role in relation to reporting poor practice and their understanding of the day care setting's policy and procedure with regard to whistleblowing.

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 with regards to adult safeguarding since the last inspection. 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. The day care setting has provided service users with information in relation to keeping themselves safe and the details of the process for reporting any concerns.

There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately. It was noted that no incidents had been reported since the last inspection.

Staff were provided with training appropriate to the requirements of their role. This included Deprivation of Liberty Safeguards (DoLS) training. Those spoken with demonstrated that they have an understanding that people who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the Mental Capacity Act.

Review of staff duty rosters identified that a member of care staff, undertaking bus guide duties, had not been rostered on the staff duty rosters. An area for improvement has been made in this regard.

There was a good system in place in relation to the dissemination of information relating to Covid-19 and infection prevention and control (IPC) practices. Staff were observed adhering to guidance and were knowledgeable during discussions.

## **5.2.2 Are their robust systems in place for staff recruitment?**

The review of the day care settings staff recruitment records confirmed that recruitment was managed in accordance with the regulations and minimum standards, before staff members commence employment and direct engagement with service users. Records viewed evidenced that criminal record checks (AccessNI) had been completed for staff.

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; this system was reviewed and found to be in compliance with regulations and minimum standards. 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.

### **5.2.3 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 monthly by a senior manager. A sample of reports viewed for April and May 2021 provided evidence that the monitoring process included engagement with service users, service users' representatives and staff; and the review on the conduct of the agency and development of action points.

There is a process for recording complaints in accordance with the day care settings policy and procedures. It was noted that no complaints had been received since the last inspection. This was supported during the inspector discussions with service users.

It was noted that a number of service users have been assessed by the Speech and Language Therapist (SALT) in relation to Dysphagia needs and specific recommendations made. Staff were implementing the recommendations to ensure the care received was safe and effective for each individual service user.

It was identified that all staff, including catering staff, had undertaken dysphagia awareness training. The discussions with staff and review of service user care records indicated that they had a good understanding of the needs of individual service users with regards to swallowing difficulties and any modifications to their food and fluid intake.

There was a system in place to ensure that support workers received supervision and training in accordance with the agency's policies and procedures.

Staff described their role in relation to reporting poor practice and their understanding of the centres policy and procedure on whistleblowing.

It was established during discussions with the manager that the centre had not been involved in any Serious Adverse Incidents (SAI's)/Significant Event Analysis's (SEA's) or Early Alert's (EA's).

## **6.0 Conclusion**

Based on the inspection findings and discussions held with the manager, staff and service users, RQIA are satisfied that this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the manager/management team.

As a result of this inspection one area for improvement was identified in relation to staff duty rosters.

## **7.0 Quality Improvement Plan/Areas for Improvement**

An area for improvement for improvement has been identified where action is required to ensure compliance with the Day Care Settings Minimum Standards, 2012.

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	0	1

An area for improvement for improvement and details of the Quality Improvement Plan were discussed with Mr Martin Stevenson, Manager and a Senior Day Care Worker, as part of the inspection process. The timescales for completion commence from the date of inspection.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 23.7  <b>Stated:</b> First time  <b>To be completed by:</b> Immediate and ongoing from the date of inspection	The registered person shall ensure that a record is kept of staff working each day and the capacity in which they worked.  Ref: 5.2.1
	<b>Response by registered person detailing the actions taken:</b> The Registered Manager has reviewed the record kept of staff working each day to ensure that this now includes the capacity in which they worked. This new record was implemented 04-06-2021 and will be kept under review.





The Regulation and Quality Improvement Authority

7th Floor, Victoria House  
15-27 Gloucester Street  
Belfast  
BT1 4LS

**Tel** 028 9536 1111  
**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
 [@RQIANews](https://twitter.com/RQIANews)

Assurance, Challenge and Improvement in Health and Social Care