

Inspection Report

15 November 2021



Fortwilliam Centre

Type of service: Day Care Setting.
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Belfast HSC Trust	Registered Manager: Mr Adrian Brennan
Responsible Individual: Dr Catherine Jack	Date registered: 9 February 2018
Person in charge at the time of inspection: Mr Adrian Brennan	
Brief description of the accommodation/how the service operates: This is a Day Care Setting with 45 places that provides day care services for adults who have a learning disability. Some of the people who use the service also have assessed needs related to a physical disability or mental illness.	

2.0 Inspection summary

An unannounced inspection was undertaken on 15 November 2021 between 09.10 a.m. and 12.10 p.m. by the care inspector. This inspection focused 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, Covid-19 practice and guidance.

Prior to inspection we reviewed the information held by RQIA in relation to the day care setting. This included the previous inspection report and any written and verbal communication received since the previous care inspection.

Good practice was identified in relation to appropriate checks being undertaken before staff were supplied to the setting. Good practice was also found in relation to the system in place for disseminating Covid-19 related information to staff. We noted that the setting had in place a comprehensive staff spot check system completed monthly. The setting must be commended for this and their diligence relating to the following:

- Individual Screening checks
- Use of PPE
- Hand hygiene
- Environment
- Group activity rooms

There were good governance and management oversight systems in place. On entering the setting the inspector's contact tracing details were obtained by staff who advised that this is completed for 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 PPE which was available for staff.

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

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 practices 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:

- discussions with service users and staff to find out their views on the service
- reviewing a range of relevant documents and policies and procedures relating to the day care setting's governance and management arrangements.

4.0 What people told us about the service

We spoke to service users and staff including the manager. We provided a number of questionnaires to service users and/or relatives to facilitate them to provide comments on the quality of service provision. Staff were also provided with an electronic survey. We observed a variety of activities and good communication between staff and service users. Service users present were observed involved in a range of activities including one to one work with staff.

The returned questionnaires showed good satisfaction levels.

Comments:

- "I like coming to the centre and seeing my friends."
- "It's very good here."

A number of staff comments were received from the electronic survey prior to the issue of this report. Respondents state they were satisfied or very satisfied with the standard of care and support. We noted some of the comments received from staff:

- "Fortwilliam is a caring and supportive environment for service users and staff"
- "I have worked in Fortwilliam for over XX years. It is a lovely homely centre where service Users, staff and carers are treated with respect and dignity. The staff and management work as a team and are all there to support each other. The service users and carers see us as their extended family, which is lovely for us. I have seen many changes over the years but the heart of Fortwilliam is still warmth, friendship and respect."

Comments received during the inspection process:

Service user comments:

- “I enjoy my activities.”
- “Staff are good.”
- “My keyworker is nice.”
- “I feel safe and secure here.”
- “I’m happy to be back at the centre.”

Staff comments:

- “A good comprehensive induction.”
- “We always promote choice and independence.”
- “Managers are supportive.”
- “We have an open door policy.”
- “Staff communicate well with each other.”

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 to Fortwilliam Centre was undertaken on 19 October 2020 by a care inspector; no areas for improvement were identified.

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 outlines the procedure for staff in reporting concerns. The organisation had 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 noted that staff were required to complete adult safeguarding training during their induction programme and annual updates thereafter. All training records reviewed were in place and satisfactory.

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 agency's policy and procedure with regard to whistleblowing.

The setting had a system for recording referrals made to the HSC Trusts adult safeguarding team in relation to adult safeguarding. Records viewed and discussions with the manager indicated that no adult safeguarding referrals had been made since the last inspection.

The day care setting had 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 a number of incidents reported were dealt with through the settings reporting procedures and all records were satisfactory.

All staff had completed DoLS training appropriate to their job roles; records reviewed clarified training. Discussion with staff clarified their knowledge of the subject. No current arrangements are required relating to DoLS, this was verified by the manager.

Staff demonstrated that they had 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. It was good to note that the setting had created an easy read document within the service user's guide outlining the (MCA).

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 Question with regards care- Dysphagia and SALT arrangements.

The manager confirmed that the setting had received specific recommendations from the Speech and Language Therapist (SALT) in relation to service users' dysphagia needs to ensure the care received in the service was safe and effective. A number of assessments were reviewed and were satisfactory. It was noted that staff had completed relevant training.

A number of service users required supervision when eating and drinking due to having swallowing difficulties; some of whom required their food and drinks to be of a specific consistency. Staff spoken with demonstrated a good knowledge of service users' wishes, preferences and assessed needs; and how to modify food and fluids.

5.2.3 Are their robust systems in place for staff recruitment?

The review of the day care setting's staff recruitment records confirmed that recruitment was managed in accordance with the regulations and minimum standards; required pre-employment checks were completed before staff members' commenced employment and direct engagement with service users. Records viewed evidenced that criminal record checks (Access NI) had been completed for staff.

A review of the records confirmed that all staff provided were appropriately registered with the NISCC. Information regarding registration details and renewal dates were monitored by the manager; this system was reviewed and found to be in compliance with regulations and

standards. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

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. Reports relating to the agency's monthly monitoring were reviewed. The process included engagement with service users, relatives, staff, and HSCT staff. The reports included details of the review of service user care records, accident/incidents, safeguarding matters, complaints, staff training and staffing arrangements.

We noted some of the comments made by service users; relatives, HSC Trust and staff during regular monthly quality monitoring:

Service users:

- "I enjoy coming to the centre and I'm glad to be back."
- "I would talk to staff if I had any issues."
- "I'm happy with the level of care and support."

Staff:

- "Good support from colleagues and management."
- "Training is readily available."
- "Clients are well supported and cared for."

Relatives:

- "Staff are very supportive and at the end of the phone."
- "Staff kept in touch with us during the closure."
- "My *** is in a safe and caring environment."

HSC Trust Staff:

- "Staff are friendly, supportive and welcoming."
- "There's a high standard of care in the centre."
- "Staff are professional in their manner and always supportive."

It was positive to note that an action plan was generated to address any identified areas for improvement and these were followed up on subsequent months, to ensure that matters had been actioned.

There was a process for recording complaints in accordance with the day care setting's policy and procedures. It was noted that one complaint had been received since the last inspection. This was actioned through the BHSC policies and was closed off to the satisfaction of the complainant.

Staff described their role in relation to reporting poor practice and their understanding of the setting's 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 (SAIs)/Significant Event Analyses (SEAs) or Early Alerts (EAs).

The annual provider report as required by Regulation 17 was available for review. The report was comprehensive and gave a positive overview of the day care setting.

It was positive to note that a number of care reviews had been completed in line with Covid restricted services and the day care setting must be commended for their actions. We noted some of the comments from service users and relatives during this review:

- “I would tell staff if I needed to be cared for differently.”
- “I’m glad to be back at the centre.”
- “I can talk easily to staff.”
- “I’m happy with the centre and the support offered by staff

6.0 Conclusion

Based on the inspection findings and discussions held, RQIA is 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.

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

7.0 Quality Improvement Plan/Areas for Improvement

No areas for improvement have been identified during the inspection.

	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 Mr A Brennan, registered manager, as part of the inspection process and can be found in the main body of the report.



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