

Inspection Report

19 November 2021



Creggan Day Centre

Type of service: Day Care Setting
Address: Fanad Drive, Derry, BT48 9QE
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

<p>Organisation/Registered Provider: Western Health and Social Care Trust (WHSCT)</p> <p>Responsible Individual: Dr Anne Kilgallen</p>	<p>Registered Manager: Fidelma Heaney (Acting)</p> <p>Date registered: Application received</p>
<p>Person in charge at the time of inspection: Day Care Worker</p>	
<p>Brief description of the accommodation/how the service operates: Creggan day centre is a day care setting with up to 35 places that provides care and day time activities to service users with enduring mental health needs and service users living with dementia. The day care setting is open Monday to Friday and is managed by the WHSCT.</p>	

2.0 Inspection summary

An unannounced care inspection took place on 19 November 2021 from 9.40 a.m. to 2.35 p.m.

This inspection focused on staff registrations with the Northern Ireland Social Care Council (NISCC), adult safeguarding, notifications, complaints and whistleblowing, Deprivation of Liberty Safeguards (DoLS), restrictive practice, dysphagia arrangements, monthly quality monitoring and Covid-19 guidance.

This inspection also sought to assess progress with any issues raised in the previous quality improvement plan (QIP).

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

There were no areas for improvement identified during this inspection.

Good practice was identified in relation to staff training and the monitoring of care staffs' registrations with NISCC. 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.

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 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.

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

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

The inspection also focused on reviewing a range of relevant documents, policies and procedures relating to the day care setting's governance and management arrangements. This included checking how staffs' registrations with NISCC, were monitored.

We discussed any complaints and incidents during the inspection with the day care worker 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.

Five areas for improvement identified at the last care inspection were reviewed and an assessment of compliance was recorded as met.

Information was provided to staff, service users and/or their relatives on how feedback could be provided to RQIA about the quality of services in the day care setting. This included service user/relative questionnaires and a staff poster. Ten responses were received and the respondents were very satisfied that care was safe, effective, compassionate and well led. No staff responses were received within the timescale requested.

The findings of the inspection were provided to the day care worker 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. We spoke with six service users and three staff.

Staff told us that they felt supported in their role and that the manager was very approachable. Staff also said that there was great teamwork.

Comments received during the inspection process included:**Service users' comments:**

- "This is a fantastic day centre and I really look forward to Fridays when I attend."
- "I get to choose what I want to get involved in here."
- "I could not talk highly enough of the service and the staff."
- "The centre is always clean and staff are always cleaning since Covid-19 including tables, chairs and door handles."
- "I have got good information from staff about Covid-19 and how to stay safe."
- "Staff are happy to help and support you in any way that they can."
- "We get a cup of tea and a scone when we get in."

Staff comments:

- "We have no restrictions in the centre and the ladies and gentlemen are free to go where they choose in the centre."
- "Great team and all work well together."
- "Care and support is person centred and discussed with the service users."
- "Dysphagia is scheduled to be discussed at our next reflective practice meeting."
- "Good training provided and appropriate to the setting."
- "I have done infection prevention and control training and DoLS training Level 2 and 3. My mandatory training is up to date."
- "Policies are available to us and new policies are also discussed at team meetings."

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 Creggan Day Centre was undertaken on 10 September 2020 by a care inspector; five areas for improvement were identified. A QIP was issued. This was approved by the care inspector and was validated during this inspection.

Areas for improvement from the last inspection on 10 September 2020		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for Improvement 1	The registered person shall make adequate arrangements regarding the weekly testing of the fire alarm system to ensure compliance with BS5839.	Met
Ref: Regulation 26 (4) (d) Stated: First time	Action taken as confirmed during the inspection: The returned quality improvement plan and	

	discussion with the day care worker confirmed that this area for improvement had been addressed. Review of fire alarm weekly testing records evidenced that this area for improvement had been satisfactorily addressed.	
Area for Improvement 2 Ref: Regulation 26 (4) (a) Stated: First time	<p>The registered person shall provide details of the action taken to address the significant findings highlighted in the fire risk assessment dated 4 December 2019.</p> <p>Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the day care worker confirmed that this area for improvement had been addressed. Review of the fire risk assessment and evidence provided post inspection confirmed that the outstanding significant findings had been addressed</p>	Met
Area for Improvement 3 Ref: Regulation 26 (4) (f) Stated: First time	<p>The registered person shall ensure, by means of fire drills and practices at suitable intervals, that the persons employed in the day care setting and, so far as practicable, service users, are aware of the procedure to be followed in case of fire, including the procedure for saving life.</p> <p>Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the day care worker confirmed that this area for improvement had been addressed. Review of fire drill records confirmed that the last fire drill was undertaken on 25 May 2021.</p>	Met
Area for Improvement 4 Ref: Regulation 28 Stated: First time	<p>The registered person must ensure that the monthly monitoring visits are in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.</p> <p>Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the day care worker confirmed that this area for improvement had been addressed. Monthly quality monitoring reports were available in the day care setting. Review</p>	Met

	of a sample of these reports evidenced that they were in line with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007.	
Area for Improvement 5 Ref: Regulation 13 (7) Stated: First time	<p>The registered person shall make suitable arrangements to minimise the risk of infection and toxic conditions and the spread of infection in the day care setting.</p> <p>This requirement relates to the torn/worn couches and armchairs identified on the day of inspection.</p> <p>Action taken as confirmed during the inspection: The returned quality improvement plan and discussion with the day care worker confirmed that this area for improvement had been addressed. A range of seating had been purchased following the last care inspection.</p>	Met

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).

Discussions with the day care worker demonstrated that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting adult safeguarding concerns.

It was confirmed that staff were required to complete adult safeguarding training during their induction programme and regular updates thereafter.

Discussion with the day care worker established that there had not been any suspected, alleged or actual incidents of abuse since the previous care inspection. The day care worker and staff further confirmed that there was a clear pathway for staff to follow in regard to referring any safeguarding concerns to appropriate professionals and established that they were aware of their roles and responsibilities in relation to reporting adult safeguarding concerns and maintaining safeguarding records.

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 had provided service users with information in relation to keeping themselves safe and the details of the process for reporting any concerns.

Service users and staff advised that there was enough staff to ensure the safety of the people who used the service.

The day care setting's governance arrangements in place for identifying, managing and where possible, eliminating unnecessary risk to service users' health, welfare and safety was reviewed during the inspection. This indicated that an effective incident/accident reporting policy and system was in place. Staff are required to record any incidents and accidents in a centralised electronic record, which is then reviewed and audited by the manager and the WHSCT governance department. Discussion with the day care worker confirmed that no incidents/accidents had occurred in the day care setting since the last care inspection.

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

Appropriate checks had been made to ensure that care staff maintained their registration with NISCC.

There were systems in place to ensure staff were trained and supported to do their job. For example, staff received regular training in a range of topics including fire safety, adult safeguarding and first aid. Staff confirmed that they were provided with relevant training to enable them to carry out their roles and responsibilities effectively.

Staff confirmed they had completed specialised training to ensure they were aware of the Department of Health's (DoH) DoLS and restrictive practices. Staff knew where to access information regarding DoLS and demonstrated their knowledge of what constituted a restrictive practice. The day care worker confirmed that no restrictive practices were used in the day care setting.

On entering the day care setting the inspector's temperature and contact tracing details were obtained by the day care worker 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 and there was evidence of Infection Prevention and Control measures (IPC) in place such as Personal Protective Equipment (PPE) which was available for staff. Other IPC measures were in place, which included supplies of liquid soap and hand towels mounted on the wall and foot pedal operated bins. Wall mounted 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 (putting on) and doffing (taking off) PPE.

The day care worker told us that systems and processes were in place to ensure the management of risks associated with Covid-19 infection. We discussed the provision of mandatory training specific to IPC measures with staff. Staff confirmed that they had undertaken IPC training and that the training provided them with the necessary skills and knowledge to care for and support service users. A review of staff training records confirmed

that staff had received training in IPC and Covid-19 awareness including the donning and doffing of PPE. The day care worker confirmed that management were monitoring progress with overall mandatory training to ensure full compliance.

Staff described how they wore PPE for activities that brought them within two metres of service users. The staff members spoken with reported that there was an appropriate supply of PPE and sufficient bins available to allow the safe disposal of PPE.

An inspection of the environment was undertaken and confirmed that it was appropriately warm, had suitable lighting and furniture and no mal odour was noted.

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 during discussions.

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

Discussions with staff and review of service user care records reflected the multi-disciplinary input and the collaborative working undertaken to ensure service users' health and social care needs were met within the day care setting. There was evidence that day care staff made referrals to the multi-disciplinary team and these interventions were proactive, timely and appropriate. Staff were also implementing the specific recommendations of the SALT to ensure the care received in the setting was safe and effective.

It was noted that one service users had been assessed by SALT in relation to dysphagia needs and specific recommendations made with regard to their individual needs in respect of food and fluids. Staff spoken with demonstrated a good knowledge of service users' wishes, preferences and assessed needs and how to modify food and fluids. It was positive to note that a number of staff had undertaken dysphagia training and training dates for the remainder of staff were scheduled, within a two week period, from the date of the inspection.

5.2.3 Are there robust systems in place for staff recruitment?

The day care worker advised that there were no newly recruited staff to the day care setting and that the staff team had all worked in the day care setting for a number of years. The day care worker confirmed that recruitment was managed in accordance with the regulations and minimum standards, before staff members commence employment and direct engagement with service users.

A review of records confirmed all staff working in the day care setting were registered with NISCC. Information regarding registration details and renewal dates was monitored by the manager; this system was reviewed and found to be in compliance with regulations and minimum standards. The day care worker confirmed that all staff were aware that they were not permitted to work if their professional registration was to lapse.

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.

The day care worker told us that the centre does not use volunteers or voluntary workers.

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 by a monitoring officer. A sample of reports viewed provided evidence that the monitoring process included engagement with service users, service users' representatives and staff, also that the conduct of the day care setting was examined and that action plans for improvement were developed, if necessary.

Quality monitoring reports also included review of service user care records; accident/incidents; safeguarding matters; complaints; compliments; staff recruitment and training, and staffing arrangements.

There was a process for recording complaints in accordance with the day care setting's policy and procedures. The day care worker confirmed that no complaints were received since the date of the last inspection.

Discussion with staff confirmed that they knew how to receive and deal with complaints and ensure that the manager was made aware of any complaints.

Discussions with the day care worker and staff described positive working relationships in which issues and concerns could be freely discussed; staff reported they were confident that they would be listened to. In addition, staff confirmed that they felt supported by management.

There was a system in place to ensure that staff received supervision and appraisal in accordance with the day care settings policies and procedures.

It was established during discussions with the day care worker 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 and discussions held with staff and service users, RQIA was satisfied that this service was providing safe and effective care in a caring and compassionate manner; and that the service was well led.

There were no areas for improvement identified during this inspection.

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

7.0 Quality Improvement Plan/Areas for Improvement

	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 the day care worker, as part of the inspection process and can be found in the main body of the report.



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