

Unannounced Care Inspection Report 26 January 2017



Dromore Day Centre

Type of service: Day Care Service
Address: 34-36 St Dymphna's Road, Dromore, BT78 3JQ
Tel no: 028 8289 8914
Inspector: Angela Graham

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of Dromore Day Centre took place on 26 January 2017 from 09.35 to 15.40 hours.

The inspection sought to assess progress with any issues raised during and since the last care inspection and to determine if the day care setting was delivering safe, effective and compassionate care and if the service was well led.

Is care safe?

On the day of the inspection Dromore Day Centre was found to be delivering safe care. There was positive feedback from all service users and one service user's representative, about the delivery of safe care in the day centre. Observations of care practices showed there was a culture of ensuring service users were safe and protected from harm. Staff were knowledgeable of their specific roles and responsibilities in relation to adult safeguarding.

A requirement has been made that the registered provider undertakes a review of the staffing levels to ensure the assessed needs of the service users are being met.

Is care effective?

On the day of the inspection it was established that the care in Dromore Day Centre was effective. Observations of staff interactions with service users and discussions with a total of five service users and one service user's representative evidenced this. There were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users.

Staff demonstrated a high level of commitment to ensure service users received the right care at the right time. Staff spoken with understood their role, function and responsibilities. Staff also confirmed that if they had any concerns, they could raise these with the senior day care worker.

A requirement has been made that the registered provider submits a revised Statement of Purpose, along with a variation application for consideration.

A requirement has been made that the registered person, where appropriate, shall ensure that a written care plan is prepared in consultation with the service user or the service user's representative as to how the service user's needs in respect of his/her day care are to be met.

A recommendation has been made that the registered manager undertakes an environmental audit in relation to dementia care.

A recommendation has been made that the recording of the minutes of service users meeting are improved upon.

Is care compassionate?

On the day of the inspection Dromore Day Centre was found to be delivering compassionate care.

The inspection of records, observations of practice and discussions with staff, service users and one service user’s representative confirmed that service users were being treated with compassion, dignity and respect. Furthermore they were encouraged by staff to be involved in decisions affecting their care and support.

Staff were observed responding to service users’ needs and requests promptly and professionally. Discussion with service users and one service user’s representative and observation provided evidence that service users were listened to, valued and communicated with in an appropriate manner.

A recommendation has been made that the registered provider should ensure that a report is prepared that identifies the methods used to obtain the views and opinions of service users, and which incorporates the comments made and issues raised by service users and any actions to be taken in response. A copy of this report should be made available to service users.

Is the service well led?

On the day of the inspection there was evidence of effective leadership and management in Dromore Day Centre and a culture focused on the needs of service users. Staff confirmed that they were well supported in their roles and that good training is provided.

A requirement has been made that the registered provider maintains a copy of the monthly monitoring report in the day care setting and makes the report available on request to the Regulation and Improvement Authority.

A recommendation has been stated for the second time in regard to the provision of a computer and internet access within the day care centre.

This inspection was underpinned by The Day Care Setting Regulations (Northern Ireland) 2007, the Day Care Settings Minimum Standards 2012.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	4	4

Details of the Quality Improvement Plan (QIP) within this report were discussed with Pamela Hackett, Senior Day Care Worker as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action did not result from the findings of this inspection.

1.2 Actions/enforcement taken following the most recent premises inspection

Other than those actions detailed in the QIP there were no further actions required to be taken following the most recent inspection on 15/12/16.

2.0 Service details

Registered organisation/registered person: Western Health and Social Care Trust	Registered Manager: Ann Meehan
Person in charge of the service at the time of inspection: Pamela Hackett, Senior Day Care Worker	Date manager registered: 29 October 2010

3.0 Methods/processes

Prior to inspection the following records were analysed:

- The registration details of the day centre
- Written and verbal communication received since the previous care inspection
- The previous care inspection report and quality improvement plan (QIP).

Specific methods/processes used in this inspection include the following:

- Discussion with the senior day care worker
- Discussion with two care staff
- Discussion with five service users
- Discussion with one service user's representative
- Examination of records
- File audits
- Evaluation and feedback.

The senior day care worker was provided with five questionnaires to distribute to service users; five staff members and five relatives for their completion. The questionnaires asked for service user, staff and relatives views regarding the service, and requesting their return to RQIA. Two staff, three relatives and four service users' questionnaires were returned to RQIA. The content of the questionnaires is discussed in the main body of the report.

The following records were examined during the inspection:

- Accident/untoward incident record
- Staff roster
- Staff supervision and appraisal records
- Elements of three service users' care records
- Sample of policies and procedures
- Sample of quality assurance audits
- Staff training information
- Minutes of three staff meetings
- Minutes of three service user meetings
- Three monthly monitoring reports.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 15/12/16

The most recent inspection of the day care setting was an announced premises inspection. The completed QIP was returned and approved by the specialist inspector. This QIP will be validated by the specialist inspector at the next premises inspection.

4.2 Review of recommendations from the last care inspection dated 22/01/16

Last type care inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 39 Stated: First time	Should the Dromore Day Centre remain in operation in the long term, the provider should ensure that it is properly equipped with computer, internet access, photocopier/printer and cordless phones.	Partially Met
	Action taken as confirmed during the inspection: The senior day care worker informed the inspector that a computer and internet access had not been provided. The senior day care worker confirmed that these issues were raised with senior management within the Western Health and Social Care Trust. A photocopier/printer and cordless phone had been provided following the previous inspection. This recommendation has not been fully addressed and has been stated for a second time in this report.	
Recommendation 2 Ref: Standard 15.3 Stated: First time	It is recommended that, in the absence of a review meeting organised by the referral agent, the day centre manager should hold a review of each service user's placement at least annually and include all of the available relevant people. The referral agent should be invited to attend the review, or to contribute in writing, when attendance is not possible.	Met
	Action taken as confirmed during the inspection: The senior day care worker confirmed that the identified care review had been undertaken following the previous care inspection.	

Recommendation 3 Ref: Standard 17.11 Stated: First time	A quality survey of service users and their carers was completed in late 2014. If the Dromore Day Centre continues in operation in the coming financial year, it is recommended that a quality surveys should be completed at the earliest possible time and annually thereafter.	Met
	Action taken as confirmed during the inspection: The senior day care worker confirmed that a quality assurance questionnaire was undertaken on 18 February 2016.	

4.3 Is care safe?

The senior day care worker confirmed the planned daily staffing levels for the day care centre, and that these levels were subject to regular review to ensure the assessed needs of the service users were met. A review of the staffing roster for weeks commencing 10 January 2017 until 26 January 2017 evidenced that the planned staffing levels were adhered to.

Review of the minutes of the service users meeting of 24 January 2017 identified an issue raised by a service user in regard to personal care not being delivered as prescribed in the service user's care plan. Discussion with the senior day care worker confirmed that the prescribed care had not been delivered on a number of occasions due to staff changes following staff sickness. A requirement has been made that a review of staffing levels be undertaken to ensure the assessed needs of the service users are being met.

Discussion with the senior day care worker confirmed that staff were recruited in line with Regulation 21, Schedule 2 of The Day Care Setting Regulations (Northern Ireland) 2007 and that records were retained at the organisation's personnel department.

The senior day care worker and staff confirmed that competency and capability assessments were undertaken for any person who is given the responsibility of being in charge of the centre for any period in the absence of the senior day care worker. Records of competency and capability assessments were retained and examined during the inspection.

Review of a sample of staff training records and discussion with staff concluded staff had received mandatory and other training relevant to their roles and responsibilities since the previous care inspection.

Review of a sample of records pertaining to accidents, incidents and notifications forwarded to RQIA confirmed that these were appropriately managed.

The staff on duty on the day of inspection discussed the needs of the service users they were looking after. They gave a clear description of their needs and how those needs will be met. They knew who may need additional time to manage and support their behaviour; and gave examples of how they respond in a safe way to calm and redirect service users. Overall the staff described their aim was for service users to enjoy their time in the day service by undertaking stimulating activities and for service users to feel comfortable and safe in the group environment. The staff confirmed if they had any concerns regarding safe practice they would discuss this with their colleagues and/or the management team; whom they advised were accessible and supportive. Staff confirmed service users are encouraged to give their views,

opinions and preferences. In summary the discussion with staff confirmed they were proactively promoting safe care for service users in this setting.

The senior day care worker and staff spoken with clearly demonstrated knowledge of their specific roles and responsibilities in relation to adult safeguarding. The senior day care worker stated that there were no current or ongoing safeguarding concerns.

Discussion with staff confirmed that they had attended safeguarding vulnerable adults training.

A review of the day centre's environment was undertaken and the day centre was found to be warm, fresh smelling and clean throughout. There was evidence that hand hygiene was promoted through notices, handwashing supplies and facilities. There were no obvious hazards to the health and safety of service users, visitors or staff. Fire exits and corridors were observed to be clear of clutter and obstruction.

Four service users completed questionnaires for this inspection. These service users confirmed they felt safe in the setting; they could talk to staff if they were unhappy or had any issues or concerns, they could tell someone if they were worried about someone being treated badly, the setting is comfortable and they knew what to do if the fire alarm sounded.

Three relatives returned questionnaires to RQIA post inspection. They identified they were very satisfied with the safe care in Domore Day Centre. They stated their relative is safe and protected from harm, they could talk to staff, the environment is suitable to meet their relative's needs and they would report concerns to the manager.

Two staff members returned questionnaires. Staff confirmed the care was safe, they had received training in safeguarding vulnerable adults, there are risk assessments and care plans in place for service users, they would report poor practice and they receive support to fulfil their roles and responsibilities.

Areas for improvement

One area for quality improvement was identified during the inspection regarding this domain. The registered provider should undertake a review of the staffing levels to ensure the assessed needs of the service users are being met.

Number of requirements	0	Number of recommendations	1
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4.4 Is care effective?

The inspector reviewed elements of three care records. Review of one of the care records identified that the service user had a diagnosis of dementia however a care plan had not been developed in this regard. A requirement has been made to address this issue.

Review of two service users' care records identified the service users had a diagnosis of dementia. Discussion with the senior day care worker confirmed that there were four service users attending the day centre with a diagnosis of dementia. These service users had been diagnosed with dementia prior to commencing day care. The senior day care worker provided the inspector with an assurance that the service could meet and respond to these service users' needs. Dromore Day Centre's RQIA registration letter and Statement of Purpose does not include dementia care. The registered person must ensure the day care setting operates within their RQIA registration and their Statement of Purpose.

The Statement of Purpose did not fully comply with Regulations 4(1). The following was not included in the Statement of Purpose:

- The range of needs that the day care setting is intended to meet and the number which can be accommodated.

A requirement has been made that the registered provider submits a revised Statement of Purpose, along with a variation application for consideration.

The inspector reviewed the environment in regard to the day centre accommodating service users with a diagnosis of dementia. Consideration should be given to providing an enabling environment including encouraging independence and social interaction and promoting safety. A recommendation has been made that the registered manager undertakes an environmental audit in relation to dementia care.

Service users and/or their representatives were encouraged and enabled to be involved in the assessment, care planning and review process. Care recording for every five attendances was being maintained.

Review of elements of three service users' care records confirmed annual reviews of the individual's day care placement had taken place in the previous year.

It was observed during this inspection that records were stored safely and securely in line with data protection.

The senior day care worker confirmed that there were arrangements in place to monitor, audit and review the effectiveness and quality of care delivered to service users at appropriate intervals.

Records were made available for inspection concerning audits of the environment, hand hygiene and care records and evidenced that actions identified for improvement had been completed.

Evidence was provided to verify systems were in place to ensure effective communication with service users, their representatives and key stakeholders. These included pre-admission information, multi-professional reviews, service users and staff meetings.

Discussion with the senior day care worker and staff confirmed that management operated an open door policy in regard to communication within the day care setting. Staff stated that there was effective teamwork; each staff member knew their role, function and responsibilities. Staff also confirmed that if they had any concerns, they could raise these with the senior day care worker. All grades of staff consulted clearly demonstrated the ability to communicate effectively with their colleagues and other health care professionals.

Discussion with the senior day care worker and review of records evidenced that service user meetings were held generally bi monthly. The minutes of the three most recent service users meetings were reviewed during this inspection. The meetings had taken place on: 24 January 2017; 1 November 2016 and 16 September 2016. The minutes of meetings reflected service users' views and opinions were sought and form the basis of all discussions. They contained the number of the service users who attended and a summary of the discussions. The minutes did not contain an agenda; the names of the services users in attendance; the names of the staff in attendance; detail if any action is needed with details of who is responsible for this. A recommendation has been made to address this issue.

There was information available to staff, service users and representatives in relation to advocacy arrangements.

Service users spoken with and observation of practices evidenced that staff were able to communicate effectively with service users.

Four service users' completed questionnaires. These service users confirmed they were getting the right care at the right time; staff were communicating well with them; their choices are listened to; they choose the activities they take part in; and they had been involved in the annual review of their day centre placement.

Three relatives returned questionnaires to RQIA post inspection. The relatives confirmed they were very satisfied with the effective care. They stated their relative gets the right care, at the right time, in the right place. They also confirmed they are satisfied with communication with staff, their awareness of their relative's needs, preferences and choices and that these are incorporated into the care they receive and that they are involved in their relative's annual review.

Two staff questionnaires confirmed service users are involved in their care plan, care plans inform the care provided, monitoring of quality is in place and that staff respond to service users in a timely manner.

Areas for improvement

Four areas for quality improvement were identified during the inspection regarding this domain. These matters concern:

1. The review of the statement of purpose to include range of needs that the day care setting is intended to meet and the number which can be accommodated.
2. Further development of care plans.
3. The recording of the minutes of service users meeting are improved upon.
4. An environmental audit in relation to dementia care is undertaken.

Number of requirements	2	Number of recommendations	2
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4.5 Is care compassionate?

Discussion with service users confirmed management and staff listen to them, offer them choices and involve them in decision making during their time in the day care setting.

An observation of the lunch time meal confirmed that service users were given a choice in regards to where they preferred to dine and fluid choices and the level of help and support requested. Staff treated service users with dignity and respect affording adequate time for service users to make decisions and choices, staff offered reassurance and assistance appropriately. Staff interactions with service users were observed to be compassionate, caring and timely.

Staff were aware of each service user's individual needs and were observed to respond positively and warmly. During discussion staff presented as knowledgeable and informed regarding each service user's needs.

Discussions with service users along with observations of practice during the inspection confirmed that service users were enabled and supported to engage and participate in meaningful activities.

The senior day care worker confirmed that service users were listened to, valued and communicated with, in an appropriate manner. Observation of practice confirmed that service users' needs were recognised and responded to in a prompt, courteous and supportive manner by staff.

There were systems in place to ensure that the views and opinions of service users were sought and taken into account in all matters affecting them.

Service users are consulted in an informal daily basis via discussions with staff. Service users are consulted on a formal basis via service users' meetings; the annual review of their day care placement and they receive an annual quality assurance survey about the quality of the day service in Dromore Day Centre. An annual quality assurance survey was completed in February 2016. The findings from the annual survey had been collated into an evaluation/summary report however actions taken in response to issues raised by service users were not recorded. A recommendation has been made to address this issue.

Service users spoken with during the inspection commented positively in regard to the care they received. Examples of some of the comments made by service users are listed below:

- "Staff are always good to me."
- "My dinner was lovely."
- "Great place to come."
- "This is a lovely day centre and staff are kind."
- "I like coming here."

The inspector met with one service user's representative. The service user's representative spoke positively of the service, care delivered and the staff team. Examples of some of the comments made by the service user's representative are listed below:

- "Staff are genuine, caring and always welcoming."
- "My relative is very well looked after in the centre and he enjoys coming here."
- "I would have no hesitation in discussing any concerns with the manager or staff. I never have had to raise any concerns as I am happy with the care."

Consultation with service users regarding compassionate care and service users' questionnaires identified they were treated with respect and are involved in decisions affecting them, the staff are kind and caring, their privacy is respected; they have choices and are involved in decisions.

Three relatives returned questionnaires to RQIA post inspection. The relatives confirmed they were very satisfied their relative was treated with dignity and respect and involved in decisions affecting their care. Their relative is treated well and they are consulted regarding decisions.

Two staff questionnaires confirmed service users are treated with dignity and respect, encouraged to be independent; their views are sought and acted upon.

Areas for improvement

One area for quality improvement was identified during the inspection regarding this domain. The registered provider should ensure that a report is prepared that identifies the methods used to obtain the views and opinions of service users, which incorporates the comments made and issues raised by service users and any actions to be taken in response. A copy of this report should be made available to service users.

Number of requirements	0	Number of recommendations	1
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4.6 Is the service well led?

The senior day care worker confirmed that there were management and governance systems in place to meet the needs of service users.

A range of policies and procedures were in place to guide and inform staff. Policies were centrally indexed and retained in a manner which was easily accessible by staff. Staff confirmed that they had access to the day centre's policies and procedures.

In discussion service users were aware of the roles of the staff in the day care setting and whom they should speak to if they had a concern. Service users confirmed that they were confident that staff/management would manage any concern raised by them appropriately.

Discussion with staff confirmed they were familiar with organisational and management structure and with their lines of professional accountability. An organisational chart was displayed within the day care setting. Staff were able to describe their roles and responsibilities and were aware of their individual responsibility in relation to raising concerns.

Discussions with staff also confirmed that there were good working relationships and that management were responsive to any suggestions or concerns raised.

Discussion with the senior day care worker and staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. A schedule for annual staff appraisals and staff supervision was maintained and was available for inspection.

A review of the schedule confirmed that supervisions were completed for staff on a quarterly basis, or more frequently, and staff appraisals were completed annually. Discussion with staff confirmed that they had received supervision and appraisal accordingly.

Discussion with the senior day care worker confirmed that staff meetings were held at least quarterly, and records verified this. The last meeting was held on 6 December 2016 and minutes were available. The previous staff meeting had been undertaken on 4 October 2016. The senior day care worker confirmed that the minutes of staff meetings were made available for staff to consult.

The senior day care worker confirmed that no complaints were received since the previous care inspection on 22 January 2016. Review of the complaints record verified this. Compliments records were also recorded and maintained by staff.

Three monitoring reports were reviewed from September to November 2016. Discussion with the senior day care worker confirmed the most recent monitoring visit was undertaken on 13 December 2016 however the monitoring report was not available in the day centre on the day of the inspection. A requirement has been made to address this issue. The reports evidenced visits had taken place on 6 September, 11 October and 11 November 2016.

The certificate of registration issued by RQIA was displayed in a prominent position in the day care setting.

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

A recommendation has been stated for the second time in regard to the provision of a computer and internet access within the day care centre.

Four service users' questionnaires confirmed the service was managed well; they said they knew the manager and could talk to the manager if they had any concerns. The service users also confirmed staff had responded well to them and they are asked what they would like to do in the setting.

Three relatives' questionnaires confirmed they were very satisfied the service was managed well; staff and the manager are approachable, professional and caring. They were informed about the complaints process and they have a copy of the service user's guide.

Two staff questionnaires confirmed the service is managed well, the service is monitored, and communication between the staff and management is effective.

Areas for improvement

Two areas for quality improvement were identified during the inspection regarding this domain. These matters concern:

1. The registered provider should ensure that a copy of the monthly monitoring report is available in the day centre.
2. The registered provider should ensure that the day care centre is properly equipped with a computer and internet access.

Number of requirements	1	Number of recommendations	1
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5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Pamela Hackett, Senior Day Care Worker, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the day care setting. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on The Day Care Setting Regulations (Northern Ireland) 2007.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Day Care Settings Minimum Standards 2012. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions to be taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to day.care@rqia.org.uk for assessment by the inspector.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan	
Statutory requirements	
Requirement 1 Ref: Regulation 4 (1) Stated: First time To be completed by: 31 March 2017	<p>The registered provider must submit a revised Statement of Purpose that includes all relevant information as specified in Schedule 1 of The Day Care Setting Regulations (Northern Ireland) 2007, along with a variation application for consideration.</p> <p>Response by registered provider detailing the actions taken: This will be included with variation of notification to include Dementia and sent to RQIA for consideration.</p>
Requirement 2 Ref: Regulation 28 (5) (a) Stated: First time To be completed by: 28 February 2017	<p>The registered provider shall maintain a copy of the monthly monitoring report in the day care setting and make it available on request to the Regulation and Improvement Authority.</p> <p>Response by registered provider detailing the actions taken: This has been completed and forwarded to Inspector.</p>
Requirement 3 Ref: Regulation 20 (1) (a) Stated: First time To be completed by: 28 February 2017	<p>The registered person shall, having regard to the size of the day care setting, the statement of purpose and the number and needs of service user ensure that at all times suitably qualified, competent and experienced persons are working in the day care setting in such numbers as are appropriate for the care of service users.</p> <p>Response by registered provider detailing the actions taken: Staffing levels will be monitored, staff from other centres or Agency Staff will be employed to ensure we do not fall below minimum standards.</p>
Requirement 4 Ref: Regulation 16 (1) Stated: First time To be completed by: 28 February 2017	<p>The registered person, where appropriate, shall ensure that a written care plan is prepared in consultation with the service user or the service user's representative as to how the service user's needs in respect of his/her day care are to be met.</p> <p>Response by registered provider detailing the actions taken: This requirement has now been implemented.</p>
Recommendations	
Recommendation 1 Ref: Standard 8.3 Stated: First time To be completed by: 31 March 2017	<p>The registered provider should ensure that the minutes of service users' meetings include:</p> <ul style="list-style-type: none"> • The names of those attending; • An agenda; • The outcomes of action taken since the previous meeting; • A summary of discussions; • The action to be taken on service users' comments and

	suggestions and the name/s of the person/s responsible for taking action on any matters arising.
	Response by registered provider detailing the actions taken: This recommendation has been implemented and is available for inspection.
Recommendation 2	The registered provider should undertake an environmental audit in relation to dementia care.
Ref: Standard E7	
Stated: First time	Response by registered provider detailing the actions taken: This recommendation has been organised by delegated provider to take place on 28 th March 2017 by Trust Dementia Team.
To be completed by: 30 April 2017	
Recommendation 3	The registered provider should ensure that a report is prepared that identifies the methods used to obtain the views and opinions of service users, which incorporates the comments made and issues raised by service users and any actions to be taken in response. A copy of this report is made available to service users.
Ref: Standard 8.5	
Stated: First time	
To be completed by: 31 March 2017	Response by registered provider detailing the actions taken: This has now been completed and made available to clients and is available for inspection.
Recommendation 4	Should the Dromore Day Centre remain in operation in the long term, the provider should ensure that it is properly equipped with a computer and internet access.
Ref: Standard 39	
Stated: Second time	
To be completed by: 30 April 2017	Response by registered provider detailing the actions taken: Delegated Provider has been in trust with the Trust ICT department in regards to installing computer access points and internet access.

Please ensure this document is completed in full and returned to day.care@rqia.org.uk from the authorised email address



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