

Inspection Report

4 May 2023



Killadeas Day 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: Western HSC Trust	Registered Manager: Miss Patricia Griffith
Responsible Individual: Mr Neil Guickan	Date registered: 21/06/2013
Person in charge at the time of inspection: Miss Patricia Griffith	
Brief description of the accommodation/how the service operates: This is a day care setting that provides care and day time activities for up to 20 service users with a learning disability. The day care setting is open Monday to Friday and is managed by the Western Health and Social Care Trust (WHSCT).	

2.0 Inspection summary

An unannounced inspection was undertaken on 4 May 2023 between 09.30 a.m. and 12.30 p.m. The inspection was conducted by a care inspector.

The inspection examined the agency's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing, Deprivation of Liberty Safeguards (DoLS), Service user involvement, Restrictive practices, Dysphagia management and Covid-19 guidance was also reviewed.

It was positive to note that service users benefited from a well led service. There was a clear leadership and management structure in place which helped to ensure staff were knowledgeable about their role and responsibilities. The service was well organised and had a range of systems in place to support good communication.

Good practice was identified in relation to service user involvement. Staff we spoke with demonstrated strong caring values and a desire to provide service users with personalised care. Staff were familiar with the choices and preferences of individual service users and expressed a commitment to providing care in keeping with service users' care and support plans.

We noted some of the compliments received by the agency from various sources:

- “My relative is happy here and is always excited about going.”
- “The service is wonderful. I could not do without it.”
- “The service is excellent.”

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.

In preparation for this inspection, a range of information about the service was reviewed. This included any previous areas for improvement identified, registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning trust.

As a public-sector body RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care services, we are committed to ensuring that the rights of people who receive services are protected. This means we will be seeking assurances from providers that they take all reasonable steps to promote people’s rights. Users of day care settings have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted.

Information was provided to service users, relatives, staff and other stakeholders on how they could provide feedback on the quality of services; with questionnaires and an electronic staff survey.

4.0 What did people tell us about the service?

During the inspection we spoke with a number of staff members. Due to the communication difficulties of service users we observed them in their daily activity rooms working with staff in groups and on one to one basis.

The information provided by staff indicated that there were no concerns in relation to the day care setting.

Comments received included:

Staff comments:

- “Open door policy here with manager.”
- “Good staff communication.”
- “Good effective induction.”
- “Manager very approachable.”

- “Staff have been very supportive.”
- “I’m currently working through my training.”
- “We have good relationships with parents.”
- “I’m aware of my NISCC responsibilities.”
- “We provide a good range of activities including social outreach.”

During the inspection we provided a number of easy read questionnaires for service users to complete and share their views in regard to service quality and their lived experiences:



- Do you feel your care is safe?
- Is the care and support you get effective?
- Do you feel staff treat you with compassion?
- How do you feel your care is managed?

No service user questionnaires were returned prior to the issue of this report.

A number of staff questionnaires were returned prior to the issue of this report. The responses show good satisfaction levels.

Comments received:

- “This is an excellent service providing person centred care to all service users.”
- “I feel very well supported in my role within Lackaboy 2 from my manager but especially by my senior day care worker her professionalism is second to none and record keeping is extremely well done.”
- “The level of care given by my colleagues to our service users is fantastic and it’s a privilege and a joy working here.”

5.0 The inspection

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

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. An inspection was not undertaken in the 2021-2022 inspection year, due to the impact of the first surge of Covid-19.

The last care inspection of the day care setting was undertaken on 12 March 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's) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlined the procedure for staff if they needed to report any concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

Staff were required to complete adult safeguarding training during their induction and every two years thereafter. Staff who spoke with us had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns. Staff could also 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 manager retained records of any referrals made to the Health and Social Care (HSC) Trust in relation to adult safeguarding. No referrals had been made since the last inspection.

The manager had ensured that service users were provided with information about keeping themselves safe and the details of the process for reporting any concerns.

Staff were provided with training appropriate to the requirements of their roles. Where service users required the use of specialised equipment to assist them with moving and handling, this was included within the day care setting's mandatory training programme. A review of records confirmed that where the day care setting is unable to provide training in the use of specialised equipment, if required training will be requested from the HSC Trust.

It was positive to note that a number of care reviews were undertaken in keeping with the day care setting's policies and procedures. The outcomes for people using the service reflected the principles and values of promoting choice and control, independence and community inclusion.

We noted some comments from recent reviews:

- "My family are appreciative of the staff and the service."
- "Day care gives my relative the opportunity to socialise and take part in activities."
- "A good relationship with staff."
- "My relative receives sufficient care and support."
- "My relative appears happy and relaxed and is in good form."

It was positive to note that service users were supported to exercise choice and control in regard to decision making and staff supported them in the least restrictive way

possible and in their best interests; the policies and systems in the setting supported this practice. Service users had the support of a team of staff who were suitably skilled and experienced to meet their assessed needs.

Staff had completed Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. The manager reported that two of the current service users were subject to (DoLS) arrangements. The care plans reviewed reflected the (DoLS) arrangements.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that the last full fire evacuation drill was undertaken on the 16 February 2023, all staff included. Fire risk assessments for the centre were completed on the 7 December 2022. Staff fire training has been completed on the 17 February 2023. During the inspection fire exits were observed to be clear of clutter and obstructions.

5.2.2 What are the arrangements for promoting service user involvement?

From reviewing service users' care records and in discussion with staff, it was good to note that service users and families had an input into devising individual activities. The service users' care plans contained details about their likes and dislikes and the level of support they may require.

Care records were written in a respectful way, supporting people to express their views and be involved in making decisions about their care, respecting and promoting people's privacy, dignity and independence. The quality of service provision had also been regularly reviewed through a range of internal and external audits.

It was also positive to note that the day care setting held service user meetings which supported the service users to look at what they wanted to achieve from attending the setting and any activities they would like to become involved in.

Care and support plans were kept under regular review and service users and /or their relatives participated, where appropriate, in the review of the care provided on an annual basis, or when changes occurred.

The setting had completed a comprehensive annual report that was satisfactory. We noted some of the comments reviewed from relatives and staff:

Relatives:

- "Very happy with all, excellent"
- "The service is wonderful; I could not manage without it"
- "All very satisfactory, thank you"
- "I am completely confident that my relative is safe in the centre".

Staff:

- “Due to the needs of the service users in the unit staff use their observational skills to observe service users’ levels of participation and enjoyment when offering various activities”
- “Staff continuously observe service users whilst they are offered and supported to participate in activities.
- “Staff may alter the activity if the service users are not showing an interest”.

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

A number of service users were assessed by SALT and the documentation in place was satisfactory. A review of training records confirmed that staff had completed training on Dysphagia and in relation to how to respond to choking incidents. Swallowing awareness training was also completed by staff during First-Aid training.

5.2.4 What systems are in place for staff recruitment and are they robust?

A review of the day care setting’s staff recruitment records confirmed that all pre-employment checks, including criminal record checks (Access NI), were completed and verified before staff members commenced employment and had direct engagement with service users.

Checks were made to ensure that staff were appropriately registered relevant professional regulatory bodies such as NISCC or The Nursing and Midwifery Council (NMC).

There was a robust system in place for staff professional registrations to be monitored by the manager. Staff spoken with confirmed that they were aware of their responsibilities to keep their professional registrations up to date.

5.2.5 What are the arrangements for staff induction and are they in accordance with NISCC Induction Standards for social care staff?

There was evidence that all newly appointed staff had completed a structured orientation and induction, having regard to NISCC’s Induction Standards for new workers in social care, to ensure they were competent to carry out the duties of their job in line with the agency’s policies and procedures. There was a structured, three-day induction programme which also included shadowing of a more experienced staff member. Written records were retained by the agency of the person’s capability and competency in relation to their job role.

A record is maintained for each member of staff of all training, including induction and professional development activities undertaken.

5.2.6 What are the arrangements to ensure robust managerial oversight and governance?

There were monthly quality monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. A review of the reports of the day care setting's quality monitoring established that there was engagement and observations with service users, relatives, HSC and staff. The reports included details of a review of service users' care records; accident/incidents; safeguarding matters; staff recruitment, training and staffing arrangements.

Comments noted within monthly monitoring reports included:

Staff:

- "Care provided is excellent."
- "We meet the needs of service users."
- "The service users are well catered for."

Relatives:

- "It's a wonderful service."
- "They are just great."
- "Day care is vital."

HSC Staff:

- "No issues, quality care is provided."
- "Staff communication is good."
- "Staff are professional and prompt with information."

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAIs) or Significant Event Audits (SEAs) procedures.

There was a system in place to ensure that complaints were managed in accordance with the agency's policy and procedures. No complaints had been received since the last inspection.

The day care setting's registration certificate was up to date and displayed appropriately.

6.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with the Manager as part of the inspection process and can be found in the main body of the report.



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