

Inspection Report

21 May 2024



Crozier Lodge

Type of Service: Day Care Service

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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Southern HSC Trust	Registered Manager: Mr Anthony Sean Martin
Responsible Individual: Dr Maria O’Kane	Date registered: Acting
Person in charge at the time of inspection: Senior day care worker; manager was present from 11.00 a.m.	
Brief description of the accommodation/how the service operates: Crozier Lodge is a Day Care Setting with accommodation to provide 15 places for persons aged over 65 years and those living with dementia. The service provides care and day time activities tailored to the needs of service users. The day care setting is operational Monday to Friday each week.	

2.0 Inspection summary

An unannounced inspection was undertaken on 21 May 2024 between 10.00 a.m. and 1.45 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 and Dysphagia management were also reviewed.

There were no areas for improvement identified.

Good practice was identified in relation to service user involvement. There was evidence of good governance and management arrangements in place.

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 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. This included questionnaires and an electronic survey.

4.0 What did people tell us about the service?

During the inspection we spoke with a number of service users and staff members.

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

Comments received included:

Service users' comments:

- "I love it here, coming 10 years and would be lost without this place."
- "Food is great and staff are great."
- "No problems with here."
- "Lovely wee place."
- "I enjoy the knitting and the crocheting."
- "I enjoy the company."

Staff comments:

- "Love it here, great place."
- "I moved from another place and glad I made the move."
- "I feel well supported, the induction and training was good."
- "Service users are safe here and have choice."
- "Service users are well cared for; it is like a lifeline for some of them."
- "Service users can decide what they want to do here, but we encourage and support them to try new things."
- "I am well supported; we have an open door policy with the person in charge. It is a great place."
- "We get allocated time to complete our training. I love it here; I have no concerns or issues."

We observed a number of service users being supported by staff to participate in activities; service users appeared relaxed and comfortable in the environment. Staff demonstrated that they had a good understanding of the needs of the individual service users.

Returned questionnaires indicated that the respondents were satisfied with the care and support provided.

Responses received from the electronic staff survey indicated that those individuals thought care was safe, effective and compassionate and that the service was well led. Comments received included:

- “Crozier Lodge is a fantastic service that does its best with the physical environment as space is an issue at times. Staff think creatively about how to make the best use of the space available.”

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 care inspection of the day care setting was undertaken on 16 February 2023 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 outlined the procedure for staff in reporting concerns.

Discussions with the manager and the person in charge established that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting and managing adult safeguarding concerns.

Staff were required to complete adult safeguarding training during induction and every two years thereafter. Staff who spoke with the inspector had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns. They 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 day care setting retained records of any referrals made to the Health and Social Care (HSC) Trust in relation to adult safeguarding. A review of records and discussions with the manager confirmed that these had been managed appropriately.

Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided. The day care setting had provided service users with information about keeping themselves safe and the details of the process for reporting any concerns.

RQIA had been notified appropriately of any incidents that are required to be reported in accordance with the regulations. Information reviewed indicated that incidents that had occurred within the day care setting had been managed appropriately.

Staff were provided with Moving and Handling training appropriate to the requirements of their role. The person in charge reported that none of the service users currently required the use of specialised equipment. They were aware of how to source such training should it be required in the future. A review of care records identified that moving and handling risk assessments and care plans were up to date.

It was identified that care reviews had been undertaken in keeping with the day care setting's policies and procedures. There was also evidence of regular contact with service users and their representatives.

All staff had been provided with training in relation to medicines management. Staff support a small number of service users with medication administration. The person in charge advised that no service users required their medicine to be administered orally with a syringe. The person in charge was aware that should this be required, a competency assessment would be undertaken before staff undertook this task.

The day care setting's procedure for the storage, management and administration of medication was reviewed and found to be satisfactory.

Details of the person in charge on the day of inspection was clearly displayed along with the menu and daily activities.

All areas used by service users were noted to be warm and comfortable.

It was noted that a fire risk assessment of the day care setting had been completed on 21 July 2020 and is due to be updated in July 2024. An action plan was provided. Staff had completed fire safety training and participated in fire evacuation drills as required. In addition, it was noted that new staff completed a fire safety induction. There was evidence to indicate that required fire safety checks had been completed. Fire doors were observed to be unobstructed during the inspection.

The day care setting had Personal Emergency Evacuation Plans (PEEPs) in place for each individual service user.

Hazardous substances were observed to be stored appropriately and in accordance with Control of Substances Hazardous to Health (COSHH) guidance.

A review of the environment found it to be well decorated, clean, fresh and uncluttered; décor and furnishings in the rooms were matched to the needs of the service users. There was a calm and relaxed atmosphere throughout the day care setting. The dining area was clean and tidy.

Bathrooms were observed to be clean, tidy and fresh smelling. Handwashing facilities were available and information in place in regard to good hand hygiene processes.

The office area was observed to be well organised and information stored in a secure manner. There was a range of key information displayed for staff reference.

The Mental Capacity Act (MCA) provides a legal framework for making decisions on behalf of service users who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, service users make their own decisions and are helped to do so when needed. When service users lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. Staff who spoke with the inspector demonstrated their understanding that service users who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the MCA.

Staff had completed appropriate DoLS training appropriate to their job roles. The person in charge reported that none of the service users were subject to DoLS. The manager advised that there were no practices deemed to be restrictive;

5.2.2 What are the arrangements for promoting service user involvement?

From reviewing service users' care records and through discussions with service users, it was good to note that service users had an input into devising their own plan of care. The service users' care plans contained details about their likes and dislikes and the level of support they may require. Care and support plans are kept under regular review and service users and /or their relatives participate, where appropriate, in the review of the care provided on an annual basis, or when changes occur.

It was also positive to note that the day care setting facilitated monthly service user meetings which provided the opportunity for service users to discuss what they wanted from attending the day care setting and any activities they would like to become involved in. Some matters discussed included:

- Activities
- Transport
- Complaints
- Improvements

The day care setting had completed an annual review in relation to their practice which incorporated service user and their representatives' feedback. Comments received included:

- "When I came I had nothing to do, now I am out and about meeting people."
- "I get excellent support from all staff in the day centre. I receive great care and enjoy the company."
- "My mother loves the company and activities; it puts my mind at rest knowing she is safe, happy and occupied."
- "Crozier Lodge is beneficial for mum and she really enjoys attending. She speaks highly of the staff and staff go above and beyond."

The annual report was noted to be detailed and contained a range of information pertaining to the day care setting.

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 with recommendations provided and some required their food and fluids to be of a specific consistency. A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents.

Discussions with staff and review of service users' 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 staff made referrals to the multi-disciplinary team and these interventions were proactive, timely and appropriate. Staff also implemented the specific recommendations of the SALT to ensure the care received in the setting was safe and effective. It was positive to note that service users' care plans had been updated reflect the recommendations made by the SALT.

Staff demonstrated a good knowledge of service users' wishes, preferences and assessed needs. These were recorded within care plans along with associated SALT dietary requirements. Staff were familiar with how food and fluids should be modified.

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 (AccessNI), were completed and verified before staff members commenced employment and had direct engagement with service users.

It was noted that criminal record checks had been completed for ancillary staff and that they had completed adult safeguarding training.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC) or any other relevant regulatory body. There was evidence of a robust system in place for professional registrations to be monitored monthly by the manager; these are also reviewed as part of the day care setting's monthly monitoring process. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date. A spot check completed during the inspection indicated that staff were appropriately registered.

The person in charge advised that there were no volunteers working in the day care setting.

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 day care setting's

policies and procedures. There was a structured induction programme which also included shadowing of a more experienced staff member. Written records were retained by the day care setting of the person's capability and competency in relation to their job role. A review of the records pertaining to Regulation 20 of The Day Care Settings Regulations (Northern Ireland) 2007 and Standard 21 of The Day Care Settings Minimum Standards 2021 relating to staff also identified that they had been recruited, inducted and trained in line with the regulations.

The day care setting has maintained a comprehensive record for each member of staff of all training, including induction and professional development activities undertaken. Training compliance is reviewed as part of the day care setting's quality monitoring process.

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

There were monthly 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 monthly quality monitoring established that there was engagement with service users, service users' relatives, staff and HSC Trust representatives.

Comments included:

- "Lunch is lovely. Staff are great."
- "I enjoy my job and I am well supported."

The reports were noted to be completed in a comprehensive manner and included details of a review of a range of key matters such as service user care records; accident/incidents; safeguarding matters; staff recruitment and training, DoLS, and staffing arrangements.

The person in charge advised that no incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

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

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. It was noted that no complaints were received since the last inspection. It was good to note that a large number of compliments had been received, some comments included:

- "I attend Crozier Lodge and think it is just outstanding. It is good company and the food is outstanding."
- "Grateful for the company and the staff."

There was a system in place for managing instances where a service user did not attend the day care setting as planned. This included a system for recording those service users that attend.

It was discussed with the person in charge the need for transport staff or an identified person to check the vehicle at the end of each journey to ensure that no service users remained on the transport. They welcomed this advice and immediately implemented a system to record these checks.

We discussed the acting management arrangements which have been ongoing since April 2024; it was identified that there is a process in place to recruit a manager. RQIA will keep this matter under review.

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 Mr Anthony Sean Martin, manager and the senior day care worker, as part of the inspection process and can be found in the main body of the report.



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