

# Unannounced Care Inspection Report 17 February 2020



## Larne Adult Centre

**Type of Service: Day care**  
**Address: 72 Ballymena Road, Larne, BT40 2SG**  
**Tel No: 028 2827 0950**  
**Inspector: Corrie Visser**

[www.rqia.org.uk](http://www.rqia.org.uk)

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 service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

**1.0 What we look for**



**2.0 Profile of service**

Larne Adult Centre is a day care setting with 84 places. It provides care and day time activities for people with learning disabilities with additional needs such as sensory impairment, mental health needs, dementia, behaviours which require support, challenging behaviours, complex physical health needs and autistic disorder. The day care setting is open Monday to Friday and is managed by the Northern Health and Social Care Trust (NHSCT).

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Anthony Baxter  <b>Responsible Individual:</b> Dr Anthony Baxter Stevens	<b>Registered Manager:</b> Mrs Linda Montgomery
<b>Person in charge at the time of inspection:</b> Senior Day Care Worker	<b>Date manager registered:</b> 25 May 2018

### 4.0 Inspection summary

An unannounced inspection took place on 17 February 2020 from 10.30 to 12.20 hours.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, Day Care Setting Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

The inspection determined if the agency was delivering safe, effective and compassionate care and if the service was well led.

All service users, relatives and staff spoken with stated they were very happy with the care and support provided.

No areas requiring improvement were identified during the inspection.

Evidence of good practice was found in relation to the process for completing Access NI checks and managing staff registrations with the Northern Ireland Social Care Council (NISCC) and the Nursing and Midwifery Council (NMC).

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

### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

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

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

## 4.2 Action/enforcement taken following the most recent care inspection dated 15 May 2018

No further actions were required to be taken following the most recent inspection on 15 May 2018.

## 5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this day care service. This included the previous inspection report, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service. We also spoke with healthcare professionals involved with the service.

We reviewed that the appropriate staff checks were in place before staff are supplied to work with service users.

We reviewed the following records:

- Recruitment records specifically relating to Access NI and NISCC/NMC registration.

Questionnaires were provided to give service users and those who visit them the opportunity to contact us after the inspection with their views. A poster was provided for staff detailing how they could provide feedback via an electronic questionnaire. Seven staff responses were received, however one was incomplete and one completed in error. Analysis and comments are included within the report.

In addition, ten questionnaires were provided for distribution to the service users and their representatives; three responses were returned; analysis and comments are included within the report.

RQIA information leaflets 'How can I raise a concern about an independent health and social care service' were also provided to be displayed appropriately in the setting.

During the inspection the inspector met with a number of service users, in addition we spoke to with 12 service users, four staff and two service users' relatives.

The inspector would like to thank the person in charge, service users, service user's relatives and staff for their support and co-operation throughout the inspection process.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

## 6.0 The inspection

There were no areas for improvement made as a result of the last care inspection.

## 6.1 Inspection findings

The agency's staff recruitment processes were noted to be managed in conjunction with the organisation's Human Resources department. The inspector reviewed confirmation of Access NI checks for four staff members before they were provided with a start date for employment. Discussions with the person in charge identified that they were knowledgeable in relation to safe recruitment practices in accordance with Regulation 13, Schedule 3 of the Day Care Setting Regulations (Northern Ireland) 2007 and Standard 11 of the Day Care Settings Minimum Standards, 2012. They had knowledge of the requirement to ensure that Access NI checks were completed for staff employed.

The day care setting has a system in place to ensure all staff are registered with the Northern Ireland Social Care Council (NISCC) and that registration of each staff member is maintained. A review of 45 records confirmed that all staff were currently registered with NISCC/NMC as required. The inspector noted that the manager had a system in place for monitoring registration status of staff with the relevant regulatory body on a monthly basis. Staff were aware that they are not permitted to work if their NISCC/NMC registration had lapsed.

### Service users' comments included:

- "Everyone is really amazing."
- "The staff on the bus are really good with me."
- "I do a lot of bits and bobs."
- "I feel safe, absolutely."
- "I have friends in here."
- "If the fire alarm goes off, I grab my coat and leave."
- "I can speak to staff if I am worried about anything."
- "I like going out so I can get a nice lunch."
- "We performed five songs at the Titanic on Friday."
- "I enjoyed the valentine disco."
- "We have choir practice on Tuesday."
- "We say where we want to go and are listened to."

The inspector spoke to four staff members, who were knowledgeable in relation to their responsibility in reporting concerns. The staff members spoken with were confident that management would listen to them and address concerns raised by them. Some comments received are detailed below:

- "It's a great place to work."
- "I love it here."
- "We have a great team."
- "The service we provide is second to none."
- "Top notch."
- "We are encouraged to bring forward new ideas."
- "Adult safeguarding is brought up through team meetings and done through eLearning."
- "We go through RQIA reports as a team and pick up areas needing improvements and we work on it."
- "We report everything, no matter how small."
- "The management are very approachable and there is an open door policy."
- "We know our service users and if something isn't right, we can tell."
- "If we find any courses we would want to do, we are encouraged by management."

- “A purpose built building would be amazing.”
- “Great place to work, it’s like a family rather than a workplace.”

The inspector also spoke to two service users’ relatives and the comments included:

- “I don’t know what we would do without it.”
- “It is the only respite we get.”
- “The staff are so good.”
- “They always try and cater to our needs.”
- “Staff are very hands on.”
- “\*\*\*\* (service user) is listened to and given choices.”
- “We fundraise for the centre so they are able to buy equipment for the service users.”
- “Everything is great.”

Four service user/relative questionnaires were returned and all the respondents indicated that they were very satisfied that the delivery of care was safe, effective, compassionate and that the services were well led. Some relatives’ comments included on the questionnaires included:

- “We’re very satisfied with Larne Adult Centre.”
- “My daughter is very happy to go to the centre every day. To me that means everything.”
- “She is well cared for and the staff notify me if there is ever any concern.”
- “I feel they know her and she knows them and that combination gives our family a better quality of life.”

Seven responses were received from the electronic survey. One response was incomplete and a respondent communicated that they had completed the survey incorrectly and requested the responses be amended.

Six respondents indicated that they were very satisfied that the care being delivered was safe. Five respondents indicated that they were very satisfied that the care being delivered was compassionate and effective, and two indicated they were satisfied in these regards. Three respondents indicated that they were very satisfied that the care being delivered was well led and three indicated they were satisfied in these regards.

### Areas of good practice

Areas of good practice were identified in relation to the process for the completion of Access NI checks in conjunction with the human resources department and staff registration with NISCC.

### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

## 7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



The **Regulation** and  
**Quality Improvement**  
Authority

The Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT

**Tel** 028 9536 1111  
**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
 [@RQIANews](https://twitter.com/RQIANews)