

Inspection Report

16 June 2022



Glenmona Resource Centre

Type of service: Day Care Setting
Address: Cottage Wood, 21 High Street, Cushendall, BT44 0NB
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Northern HSC Trust	Registered Manager: Mrs Anne Heggarty
Responsible Individual: Ms Jennifer Welsh (Registration Pending)	Date registered: 16 December 2013
Person in charge at the time of inspection: Mrs Anne Heggarty	
Brief description of the accommodation/how the service operates: Glenmona Resource Centre is a Day Care Setting with maximum provision for 25 people per day. Care and day time activities are provided to service users with a range of needs including dementia, learning disability, physical disability and mental health.	

2.0 Inspection summary

An unannounced inspection was undertaken on 16 June 2022 between 09.00 a.m. and 12.00 p.m. The inspection was conducted by a care inspector.

The inspection examined the day care setting'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 Safeguarding DoLS, Service user involvement, Restrictive practices, Dysphagia 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 clear about their role and responsibilities. The service was well organised and had a range of systems in place to ensure its operation and to support good communication.

Good practice was identified in relation to service user involvement. Staff we spoke with demonstrated good caring values and a desire to provide service users with quality personalised care. Staff were familiar with the choices and preferences of individual service users and strove to deliver on these.

We noted some of the compliments received by the setting:

- "I like this place and everyone does their best."
- "I'm well looked after here by staff."
- "Staff take care of my dietary needs."

- “I really enjoy getting out of the house.”

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. This included easy read questionnaires and an electronic survey for staff.

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:

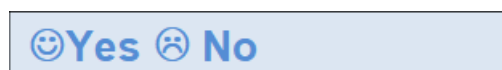
- “Good to be back.”
- “Good food selection.”
- “I have no complaints.”
- “Staff are good.”
- “A good selection of activities.”
- “We got used with PPE and masks.”

Staff comments:

- “I have a good positive experience of NISCC.”
- “All staff work well together.”
- “We provide a pleasant experience to service users.”
- “Good staff communication.”
- “We have an open door policy.”
- “The manager is very approachable, effective and helpful.”
- “We provide a wide variety of activities in a person centred way.”

During the inspection we provided a number of easy read questionnaires for those supported to comment on the following areas of service quality and their lived experiences:

- Do you feel safe when you are at the Centre?
- Does your care protect you from harm?
- Is care effective – does your care work well for you?
- Is care compassionate – is your care given kindly with dignity and respect?
- Is the service well led – does the manager run the Centre in a good way?



Returned questionnaires show that those supported thought care and support was either excellent or good. No staff questionnaires were received prior to the issue of this report.

Comments from SU:

- “The centre is very well staffed. There are always plenty of activities to get involved with.”
- “The centre is well located.”
- “I like coming to the centre.”
- “They offer support and structure to the day.”
- “I enjoy the games and activities.”
- “I have the chance to talk about issues or problems with staff.”
- “I enjoy the company and make friends.”
- “I love coming to the centre it helps me take part in different things.”
- “Staff are excellent and keep us safe during Covid.”
- “It’s good for my mental health.”
- “Long may it continue?”
- “Activities are good for me mentally.”

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 1 July 2021 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. The organisation had an identified Adult Safeguarding Champion (ASC).

Discussions with the manager 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 HSC Trust in relation to adult safeguarding. A review of records confirmed that no concerns had been received since the last inspection.

The day care setting had provided service users 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 role. Where service users may require the use of specialised equipment to assist them with moving/lifting, this is included within the day care setting's mandatory training programme. A review of records confirmed that where the day care setting was unable to provide training in the use of specialised equipment, this is identified by the setting before care delivery commences and training is requested from the HSC Trust. The manager reported that no service users currently required the use of specialised equipment.

Care reviews are undertaken in keeping with the day care setting's policies and procedures, the agency must be commended for the work completed to ensure recent annual reviews. We have highlighted some of the comments received from reviews:

- "I look forward to attending Glenmona."
- "I really enjoy the activities."
- "***** gets a lot out of Glenmona."
- "My *** is enjoying being back."
- "I enjoy getting out of the house."
- "I have no issues or concerns with the placement."

All staff had been provided with training in relation to medicines management. The manager advised that no service users required their medicine to be administered with a syringe. The person in charge was aware that should this be required, a competency assessment would have to be completed before staff could safely undertake this task.

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 Mental Capacity Act (MCA).

It was positive to note that service users were supported to have maximum choice and control of their lives 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 appropriate Deprivation of Liberty Safeguards DoLS training raining appropriate to their job roles. The manager reported that none of the current service users were subject to 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 evacuation drill was undertaken on the 17 December 2021. Fire risk assessments for the centre were available for the inspection and had been completed in 16 November 2021 and due for review November 2022. Staff fire training was completed the 3 May 2022. Fire exits were observed to be clear of clutter and obstruction.

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 activities. The service users' care plans contained details about their likes and dislikes and the level of support they may require.

We found an effective quality assurance survey took place regularly; we reviewed the results and outcomes that were satisfactory. The service delivered had also been regularly reviewed through a range of internal and external audits.

The setting regularly sought a range of feedback from service users, which was consistently positive.

It was also positive to note that the day care setting had service user meetings on a regular basis which enabled the service users to discuss what they wanted from attending the setting and any activities they would like to become involved in. Some matters discussed included:

- Meals

- Covid-19
- Transport
- Vaccinations
- Activities
- Staffing.

Some service users comments included:

- “We are happy to continue with masks.”
- “I’m very happy with the food.”
- “The rooms all look well.”

The day care setting had completed a quality survey with service users and sought feedback on a number of areas including:

- Transport
- Environment
- Staff team
- Activities
- Food
- Covid-19

We noted a selection of the comments received:

- “I am happy to have the transport provided, otherwise I couldn’t attend here.”
- “Always on time and very polite and helpful”
- “Drivers are quiet when driving.”
- “I’m glad to be able to come here because I get my dinner and tea”
- “The Centre is very essential. Good for keeping the body and mind exercised.”
- “I am happy and contented to be attending here”
- “Very pleased with everything.”
- “Centre looks good.”
- “They’re all very good – very helpful”
- “No problems with the Care Team”
- “I am happy with the Care Team. They are very approachable and likeable.”
- “Staff are very good to me.”
- “The staff have the patience of Job!”
- “Everyone is here to help and encourage you.”
- “Staff take time to help me with all my personal needs.”
- “I enjoy doing the activities in the Centre.”
- “I look forward to coming here each day.”
- “I enjoy all the activities.”
- “Food is excellent and well prepared.”
- “Food is quite good.”
- “I look forward to receiving a good dinner each day.”
- “Staff are very particular with regards to wearing facemasks.”
- “Always feel safe and staff do a great job.”
- “Encouraged to wear face masks.”
- “We all try to keep each other safe and happy.”

- “I enjoy coming to the Day Centre, I feel very welcome.”
- “Staff are very helpful and I feel it is well run.”

The day care setting had completed an annual review in relation to their practice which incorporated service user and their representatives’ feedback (Regulation 17).

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

New standards for thickening food and fluids were introduced in August 2018. This was called the International Dysphagia Diet Standardisation Initiative (IDDSI). No service users have been assessed by SALT or recommendations provided.

A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents. Swallowing awareness was also completed by staff during First-Aid training. Staff demonstrated a good knowledge of service users’ wishes, preferences and assessed needs.

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 with the Northern Ireland Social Care Council (NISCC) or any other relevant regulatory body.

There was a system in place for professional registrations to be monitored by the manager. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date. 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 robust, structured, three day 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 had maintained a record for each member of staff of all training, including induction and professional development activities undertaken. The records included the names and signatures of those attending the training event, the date(s) of the training and the content of the training programme. Staff were supported by a system of induction, training and supervision to ensure they were effective in their role.

All NISCC registrants must maintain their registration for as long as they are in practice. This includes renewing their registration and completing Post Registration Training and Learning.

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 quality monitoring established that there was engagement with service users, service users' relatives, staff and HSC Trust representatives. The reports included details of a review of service user care records; accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements. We noted some of the comments received during quality monitoring:

Service users:

- "I enjoy the food and staff are nice."
- "I have no concerns."
- "I enjoy the company."
- "Everyone is very kind."

Staff:

- "Happy with current arrangement."
- "No concerns."
- "I have settled well."
- "I enjoy my role."

Relatives:

- "Staff could not do better."
- "Staff are approachable."
- "Good service in Glenmona."

HSC Staff:

- "Good quality of care and friendliness of staff."
- "Glenmona is a good service."
- "No issues or areas of concern."

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

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. No complaints had been received since the last inspection.

6.0 Conclusion

RQIA was satisfied that this day care setting was providing services in a safe, effective, caring and compassionate manner and the service was well led by the manager/management team.

7.0 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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