

Inspection Report

Name of Service: Lakeland Community Care
Provider: Lakeland Community Care Ltd
Date of Inspection: 13 December 2024

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider:	Lakeland Community Care Ltd
Responsible Individual/Responsible Person:	Mr Patrick McGurn
Registered Manager:	Mr Patrick McGurn
Service Profile	
Lakeland Community Care is a day care setting that is registered to provide care and day time activities for up to 38 service users. The service meets the needs of adults over 65 and/or with a physical disability or living with mild dementia. The day care setting is open Wednesday and Friday and is managed by Lakeland Community Care Ltd.	

2.0 Inspection summary

An unannounced inspection took place on 13 December 2024, between 9.50 a.m. and 2.30 p.m. by a care Inspector.

The inspection was undertaken to evidence how the day care setting is performing in relation to the regulations and standards; and to determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that safe, effective and compassionate care was delivered to service users attending the day care setting and that the service was well led. However, improvements were required to ensure the effectiveness and oversight of certain aspects of the day care setting, specifically in relation to care plans, risk assessments and the assessment of need.

It was evident that staff promoted the dignity, independence and well-being of service users.

Service users said that they enjoyed coming to the day care setting. Refer to Section 3.2 for more details.

We wish to thank the manager, staff, relative and service users for their support and cooperation during the inspection.

3.0 The inspection

3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the day care setting was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this day care setting. 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.

Throughout the inspection process inspectors will seek the views of those attending and working within the day care setting; and review/examine a sample of records to evidence how the day care setting is performing in relation to the regulations and standards.

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 staff survey.

3.2 What people told us about the service and their quality of life

We spoke to a number of service users, a relative and staff to seek their views of attending and working within the day care setting.

Service users spoke positively about their experience of attending the day care setting; they said they enjoyed attending the day care setting and that the staff were brilliant. Two comments included the following statements; "Staff are so kind and genuinely care about how we are" and "This is a very happy place to be and everything is 100%". Observations of staff interacting with service users was noted to be person centred, respectful and caring.

Staff spoke very positively in regard to the care delivery in the day care setting. One told us that they enjoyed working in the day care setting and that service users were safe and well looked after. Staff indicated that they were very well supported by the manager and that the training provided was good.

We spoke with a relative who was keen to express praise and gratitude for the care provided and the kindness and support received from staff.

The information provided indicated that those we spoke with did not have any concerns in relation to the day care setting.

We did not receive any responses from the questionnaires or staff electronic survey.

3.3 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 18 August 2023 by a care inspector. A Quality Improvement Plan (QIP) was issued. This was approved by the care inspector and was validated during this inspection.

Areas for improvement from the last inspection on 18 August 2023		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for Improvement 1 Ref: Regulation 16 (1) (2) Stated: Second time	The Registered Person shall ensure that the risk assessments and care plans are reflective of the International Dysphagia Diet Standardisation Initiative (IDDSI), as indicated on the Speech and Language Therapist (SALT) care plan.	Carried forward to the next inspection
	Action taken as confirmed during the inspection: The person in charge advised that no service users currently have SALT recommendations in place. Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Action required to ensure compliance with the Day Care Settings Minimum Standards (revised), 2021		Validation of compliance
Area for Improvement 1 Ref: Standard 21.4 Stated: First time	The Registered Person shall ensure that all staff undertake training in relation to the Deprivation of Liberty Safeguards (DoLS), as relevant to their roles and responsibilities.	Met
	Action taken as confirmed during the inspection: Review of training records evidenced that DoLS training specific to Northern Ireland had been completed.	

3.4 Inspection findings

3.4.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of service users.

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.

There was evidence that all newly appointed staff had completed a structured orientation and induction which also included shadowing of a more experienced staff member.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken. The review of training records evidence that staff had completed appropriate training to meet the needs of the service users.

There was evidence of effective systems in place to manage staffing. Sufficient staff were on duty to support the service users. Staff said there was good teamwork and that they felt well supported in their role by the manager. Staff said that there were enough staff to meet the needs of the service users. It was observed that staff responded to requests for assistance promptly in a caring and compassionate manner. It was evident that staff had a good understanding of the needs, likes and dislikes of individual service users.

Staff meetings were facilitated on a regular basis and a record of the matters discussed was retained.

Staff meet daily to discuss the plan for the day and to discuss the needs of the service users.

Observation of the delivery of care and support evidenced that service users' needs were met in a safe, effective and compassionate manner. There was a relaxed and welcoming atmosphere in the day care setting.

3.4.2 Care Delivery

Staff interactions with service users were observed to be polite, friendly, warm and supportive and the atmosphere was calm, relaxed, pleasant and friendly. Staff were knowledgeable of individual service users' needs, their daily routine, wishes and preferences.

Staff were also observed offering service users support to engage in the activities they choose to participate in. Service users were observed to be enjoying participating in a Christmas arts and crafts fair and staff supported them to actively engage in this activity.

Services users were afforded privacy when being assisted to use the bathroom facilities.

Service users had good access to food and fluids throughout their day. The dining area was observed to be clean and warm. Service users were safely positioned for their meals and the mealtimes were observed to be well organised and supervised. Staff communicated well to ensure that every service user received their meals in accordance with their assessed needs; it was positive to note that one staff member is responsible for checking all meals before they are provided to service users. Food provided was observed to be well presented and service users were offered a choice.

The day care setting had service user meetings on a regular basis which enabled the service users to discuss what they wanted to achieve from attending the day care setting and any activities they would like to become involved in.

An activities planner was displayed in the communal area; there was evidence of a well-structured plan with a wide range of activities available. Service users choose what activities they wish to participate in. Activities included arts and crafts, chair exercises, music, knitting/crochet and relaxation sessions.

On the day of inspection, the service users were observed enjoying their Christmas party with live music provided for their enjoyment.

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.

3.4.3 Management of Care Records

The needs assessment for two service users did not contain important information in relation to their mobility needs. Review of these service users' care records highlighted that they lacked information in relation to their mobility needs which was documented within their NISAT assessment as provided by the commissioning HSCT. Review of care records identified that a falls risk assessment was not in place for two service users who were at risk of falls. Areas for improvement have been noted to address the shortfalls identified in relation to care records.

Service users, where possible, were encouraged and supported to be involved in planning their own care and the details of care plans were shared with their relatives, as appropriate.

3.4.4 Quality and Management of the Environment

The day care setting was observed to be clean and tidy, suitably furnished, warm and comfortable, free of clutter and beautifully decorated for the festive period.

There was evidence that fire safety checks had been completed as required. Staff had completed training in regard to fire safety and had participated in a fire evacuation drill. Throughout the inspection fire doors were observed to be unobstructed.

There was evidence that systems and processes were in place to manage infection prevention and control which included policies and procedures and regular monitoring of the environment.

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

3.4.5 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Staff commented positively about the manager and described them as supportive, approachable and always available to provide guidance.

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 and staff. The reports included details of a review of service user care records; accident/incidents; complaints; safeguarding matters; and staffing arrangements including training.

Discussion with the person in charge confirmed that there were no incidents since the previous inspection. Discussion with the person in charge also confirmed that there were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedures.

The day care setting's provision for the welfare, care and protection of service users was reviewed. There was a procedure in place for staff to report concerns.

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

Staff had a good understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns. Staff could describe their role in relation to reporting poor practice.

All staff had been provided with training in relation to medicines management; none of the service users require their medication to be administered.

The day care setting's registration certificate was up to date and displayed appropriately along with current certificates of public and employers' liability insurance.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC). There was a system in place for professional registrations to be monitored by the manager on a monthly basis. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

Staff told us that they would have no issue in raising any concerns regarding service users' safety, care practices or the environment and that they were confident that the manager or person in charge would address their concerns.

There was a system in place to ensure that complaints were managed in accordance with the day care settings policy and procedure. Records reviewed and discussion with the person in charge indicated that no complaints had been made since the previous inspection. Discussion with staff confirmed that they knew how to receive and respond to complaints sensitively and were aware of their responsibility to report all complaints to the manager or the person in charge.

4.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with Regulations and Standards.

	Regulations	Standards
Total number of Areas for Improvement	2*	1

* the total number of areas for improvement includes one which is carried forward for review at the next inspection.

Areas for improvement and details of the Quality Improvement Plan were discussed with the person in charge, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007	
Area for improvement 1 Ref: Regulation 16 (1)(2)(a)(b) Stated: First time To be completed by: Immediate and ongoing from date of inspection	<p>The Registered Person 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 their day care are to be met, the service user's plan is kept under review and falls risk assessments are completed, as appropriate.</p> <p>Ref: 3.4.3</p> <p>Response by registered person detailing the actions taken: Careplans are adjusted and audited as and when changes occur. Service User identified had not been in attendance prior to visit and the careplan has now been changed to include falls risk assessment.</p>
Area for improvement 2 Ref: Regulation 16 (1)(2) Stated: Second time To be completed by: Immediate from the date of inspection	<p>The Registered Person shall ensure that the risk assessments and care plans are reflective of the International Dysphagia Diet Standardisation Initiative (IDDSI), as indicated on the Speech and Language Therapist (SALT) care plan.</p> <p>Ref: 3.3</p> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.</p>
Action required to ensure compliance with the Day Care Settings Minimum Standards August (revised) 2021	
Area for improvement 1 Ref: Standard 4.4 Stated: First time To be completed by: Immediate and ongoing from date of inspection	<p>The Registered Person shall ensure assessments of need are kept under continual review, amended as changes occur and kept up to date to accurately reflect at all times the needs of the service user.</p> <p>Ref: 3.4.3</p> <p>Response by registered person detailing the actions taken: A robust system is in place to ensure that clients who's needs may change are updated in a timely manner.</p>

Please ensure this document is completed in full and returned via the Web Portal



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