

Inspection Report

Name of Service: Grove Wellbeing Day Centre

Provider: Belfast Health and Social Care Trust

Date of Inspection: 16 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:	Belfast Health and Social Care Trust (BHSCT)
Responsible Individual:	Mrs Maureen Edwards
Registered Manager:	Mrs Roberta Milligan
Service Profile: This is a Day Care Setting registered to provide care and daytime activities for people who are over 65 years of age who have a physical or sensory impairment and those who are living with dementia or have mental ill health.	

2.0 Inspection summary

An unannounced inspection took place on 16 December 2024 between 9.10 a.m. and 12:40 p.m. This 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.

The inspection was undertaken to evidence how the day care setting is performing in relation to the regulations and standards.

No areas for improvement were identified.

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.

To prepare for this inspection we reviewed information held by RQIA about this day care setting. This included the previous areas for improvement issued, registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning Trust.

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.

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

We spoke to a range of service users to seek their views of the day care setting. The information provided indicated that there were no concerns.

Service users spoke positively about their experience of the day care setting; one told us they loved coming to the day centre, the staff are brilliant and there are plenty of activities.

A service user's relative spoke very positively in regard to the care delivery and management support in the day care setting. They told us that their dad was very well cared for, that communication is really good, they remarked that the staff were brilliant and that they felt they would be completely lost without the service.

There were no questionnaires returned and no responses to the 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 December 2023 by a care inspector. No areas for improvement were identified.

3.4 Inspection findings

3.4.1 Staffing Arrangements

A review of the day care setting's staff recruitment records confirmed that no new staff had been recruited since the last inspection.

All pre-employment checks, including criminal record checks (AccessNI), were completed and verified before staff from recruitment agencies had direct engagement with service users. There was a robust, structured, induction programme.

The day care setting had a policy and procedure for volunteers which clearly specified their role and responsibilities. The manager confirmed that volunteers did not undertake any personal care duties. The review of the volunteer files confirmed that AccessNI checks had been completed.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken.

3.4.2 The 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 adult safeguarding policy and procedures were reflective of the Department of Health's (DoH) regional policy and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

Staff were required to complete adult safeguarding training during induction and every two years thereafter. 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.

Staff were provided with training appropriate to the requirements of their role.

The manager reported that none of the service users currently required the use of specialised mobility 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.

All staff had been provided with training in relation to medicines management. The manager advised that no service users required oral medicine to be administered with a syringe. The manager was aware that should this be required; a competency assessment would be completed before staff undertook 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 had completed appropriate Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. The manager reported that none of the service users were subject to DoLS.

A number of service users were assessed by a Speech and Language Therapist (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.

The fire risk assessment and staff fire training were found to be in date. During the inspection fire exits were observed to be clear of clutter and obstructions. Daily, weekly and monthly fire checks had been undertaken and Personal Evacuation Emergency Plans (PEEPS) were found to be in date.

3.4.3 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 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, in line with the commissioning trust's requirements.

The day care setting had undertaken an evaluation of the service and produced a report which included feedback from service users with recommendations and actions.

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 day centre and any activities they would like to become involved in.

3.4.4 The arrangements to ensure robust managerial oversight and governance

There were monitoring arrangements in place. 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.

The Annual Quality Report was reviewed and was satisfactory.

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

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. Where complaints were received since the last inspection, these were appropriately managed and were reviewed as part of the day care setting's monthly quality monitoring process.

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

4.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Roberta Milligan, Manager and Mr Thomas Mc Corry, Assistant Service Manager, as part of the inspection process and can be found in the main body of the report.



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