

Inspection Report

Name of Service: Cookstown Day Centre

Provider: Northern HSC Trust

Date of Inspection: 18 February 2025

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

1.0 Service information

Organisation:	Northern HSC Trust
Responsible Individual Person:	Mrs Jennifer Welsh
Registered Manager:	Mrs Elizabeth Ann McLernon
Service Profile: Cookstown Day Centre is a Day Care Setting with a maximum of 30 places, which provides care and day time activities for persons who are living with physical disabilities, mental ill health issues and /or a learning disability and dementia.	

2.0 Inspection summary

An unannounced inspection took place on 18 February 2025 between 9.45 am. and 1.15 pm by a care Inspector.

The last care inspection of day care setting was undertaken on 17 July 2023 by a care inspector. No areas for improvement were identified. 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 care delivery was safe and effective; and that compassionate care was delivered to service users. The day care setting was found to be well led.

Service users were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. The service users spoke very highly of the staff and the manager. Refer to Section 3.2 for more details.

The inspection found that safe, effective and compassionate care was delivered to service users and that the day care setting was well led. Details and examples of the inspection findings can be found in the main body of the report.

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 registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors seek the views of those working and attending 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.

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

Through active listening to of the service users, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

Service users described how they looked forward to attending the day care setting and that they felt the staff were 'very good'. One service user described the ways in which the staff had brought them on and that they now felt like a different person as a result. The day care setting was described as being 'very welcoming' and that 'the staff are prepared to listen and offer help'.

Staff spoke very positively in regard to the care delivery in the day care setting. One told us that they felt 'very happy' in their job and that the day care setting was a 'fantastic' place to work.

3.3 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 agency's recruitment records identified that criminal records checks (AccessNI) had been consistently undertaken on all staff.

There was a system in place for all newly appointed staff to complete 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 agency's policies and procedures.

Staff compliance with training was monitored by the manager. There was a system in place to ensure that staff received supervision and appraisals in keeping with the Trusts' policy.

There was evidence of robust systems in place to manage staffing. Sufficient staff were on duty to help the service users. Staff said there was good teamwork and that they felt well supported in their role. It was observed that staff responded to requests for assistance promptly in a caring and compassionate manner.

Regular staff meetings were held and minutes maintained of the meetings for staff unable to attend.

Observation of the delivery of care evidenced that service users' needs were met by the number and skills of the staff on duty.

3.4.2 Care Delivery

Staff interactions with service users were observed to be polite, friendly, warm and supportive and the atmosphere was 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 in the activities they wanted to engage in.

Where a service user was at risk of falling, measures to reduce this risk were put in place. In addition, any incidents were reviewed monthly as part of the quality monitoring process.

Service users had good access to food and fluids throughout the day. Nutritional care plans were in line with the recommendations of the speech and language therapists. Service users were safely positioned for their meals and the mealtimes were well supervised.

There was a Safety Pause system in place to ensure that every service user received their meals in accordance with their assessed needs and preferences. This system included photographs of each service user and the information regarding their likes and dislikes. This is good practice and is commended.

Observation of the serving of meals identified that each service user donned a clothes protector, to prevent spillages on their clothes. Whilst the inspector acknowledges the rationale for using the clothes protector, discussion took place with the manager regarding the need for these to be used on an individual basis, rather than being given to every service user.

Service users were afforded privacy when being assisted to the bathroom.

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.

Activities included arts and crafts, puzzles, word games, music and gardening. There were photographs displayed in the day care setting of service users enjoying various activities.

3.4.3 Management of Care Records

Service users' needs were assessed when they first attended the day care setting. Following this initial assessment, they were assessed again after they had attended for ten days.

Care plans were developed to direct staff on how to meet service users' needs and included any advice or recommendations made by other healthcare professionals. It was good to note that the manager had used the 'This is Me' Booklet which had been developed by the Alzheimer's Society, to obtain more details around the service users' histories, likes and dislikes. This will ensure that the care plans will be person-centred as they develop.

Care records were well maintained, regularly reviewed and updated to ensure they continued to meet the service users' needs.

3.4.4 Quality and Management of the Environment

The day care setting was clean and tidy, suitably furnished, warm and comfortable.

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 and staff practice to ensure compliance.

A fire risk assessment had been completed on 18 October 2024 and 31 October 2024 and there was evidence of regular fire safety checks.

3.4.5 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Mrs Ann McLernon has been the Registered Manager since 16 October 2022. Staff commented positively about the manager and described them as approachable and always available to provide guidance.

The day care setting was visited each month by a representative of the registered provider to consult with service users, their relatives and staff and to examine all areas of the running of the agency. The reports of these visits were completed in detail.

The quality of care had also been reviewed on an annual basis.

There was a system in place for staff to sign a record after they checked the bus on returning to the day care setting.

Review of complaints records established that any matters raised had been managed appropriately. Advice was given in relation to amending the Service User Guide, to ensure the manager's name and contact details were more explicitly laid out in the complaints section.

Day care settings are required to have a person known as the Adult Safeguarding Champion (ASC), who has responsibility for implementing the regional protocol and the day care setting's adult safeguarding policy. In the Trust, this person is called the Designated Adult Protection Officer (DAPO). A Senior Manager within the Trust was identified as the day care setting's DAPO. It was established that good systems and processes were in place to manage the safeguarding and protection of adults at risk of harm.

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 would address their concerns.

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 Ann McLernon, Manager, as part of the inspection process and can be found in the main body of the report.



The Regulation and Quality Improvement Authority

James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA



Tel: 028 9536 1111



Email: info@rqia.org.uk



Web: www.rqia.org.uk



Twitter: @RQIANews