



The Regulation and  
Quality Improvement  
Authority

# Inspection Report

**Name of Service:** Killadeas Day Centre  
**Provider:** Western Health and Social Care Trust  
**Date of Inspection:** 10 January 2025

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

## 1.0 Service information

<b>Organisation/Registered Provider:</b>	Western Health and Social Care Trust (WHSCT)
<b>Responsible Individual/Responsible Person:</b>	Mr Neil Guckian
<b>Registered Manager:</b>	Mr Niall Campbell
<b>Service Profile</b> This is a day care setting that provides care and day time activities for up to 20 service users with a learning disability. The day care setting is open Monday to Friday and is managed by the Western Health and Social Care Trust (WHSCT).	

## 2.0 Inspection summary

An unannounced inspection was undertaken on 10 January 2025 between 11.00 a.m. and 2.45 p.m. 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 was also examined.

There were no areas for improvement identified during this inspection.

Good practice was identified in relation to service user involvement. There were good governance and management arrangements in place.

## 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 service 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 service. This included any previous areas for improvement issued, registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning trust.

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

Throughout the inspection the RQIA inspector will seek to speak with service users, their relatives or visitors and staff for their opinions on the quality of the care and support, their experiences of using, visiting or working in this service.

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

We spoke to a range of service users, relatives and staff to seek their views of working within, and visiting Killadeas Day Care, Tir Navar.

The information provided indicated that there were no concerns in relation to the day care setting.

#### Service User comments:

- "I like it."
- "I like to come here."
- "Staff are good I come here 4 days a week. It is good."
- "I like coming here."
- "It is good."

#### Relatives' comments:

- "I love it and my relative loves it –I love the way it is run – everything is very, very good – very organised – there is a wonderful manager – they are 100% - runs it properly. I can go to her with anything. I would recommend anyone go."
- "I must say I am very happy. My relative looks out for the bus, they communicate regularly with us and we know what she is doing there. They are very approachable and do a lot of things that are geared to her level. The staff are lovely. I would be lost without them."
- "I must say they are very good here – my relative loves it and I know they will come to me if they are worried but I have no worries at all - he has settled here so well - they are great."

#### HSC staff comments:

- "Communication between Tir Navar and myself is always very good, they link in to keep me aware of any changes regarding individuals I support. Care plans and Risk assessments are reviewed and updated in a timely manner. The care and support I have observed during my visits to Tir Navar has been exceptional and staff are very in tune with service users' needs."
- "There is excellent communication between the staff with the service users' families and care providers. The staff are very in tune with the service users' needs and proactive to share any changes they observe or concerns."

- “The structure and management of the day seems excellent and the great care and compassion towards the service users is very evident. I would be very happy if I had a family member attending Tir Navar.”
- “Staff are very dedicated to attending to each individual’s needs. The management are skilled and knowledgeable about working with people with a learning disability and will seek nursing advice or indeed just update us on anything -all of this information sharing is invaluable. Very well managed unit.”
- “Tir Navar is one of my favourite Day Centres to visit, on arrival there I am always met with professionalism and compassion by the staff and clients attending, it is a very welcoming environment.”

Returned questionnaires indicated that the respondents were satisfied/very satisfied with the care and support provided. Written comments included:

- “I like the different activities at the centre. Happy with how staff treat me and talk to me.”
- “Staff are very good to me.”
- “All is good and nice manager.”
- “I really like going to Derrygonnelly Day Unit at Tir Navar.”

No staff responded 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 2 May 2023 by a care inspector. No areas for improvement were identified.

## **3.4 Inspection findings**

### **3.4.1 Adult Safeguarding**

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 person in charge 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 in normal business hours and out of hours. 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 person in charge was aware of the need to retain records of any referrals made to the HSC Trust in relation to adult safeguarding and there were no adult safeguarding referrals made since the last inspection.

Service users said they had no concerns regarding their safety. The day care setting had provided service users with information about keeping themselves safe and the details of the process for reporting any concerns.

The person in charge was aware that RQIA must be informed of any safeguarding incident that is reported to the Police Service of Northern Ireland (PSNI).

### **3.4.2 Mental Capacity and Restrictive Practice**

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. There were arrangements in place to ensure that service users who required high levels of supervision or monitoring and restriction had had their capacity considered and, where appropriate, assessed in conjunction with the HSC Trust representative.

A register containing the relevant documentation relating service users who were subject to DoLs was compiled and reviewed regularly to ensure a proportionate outcomes-based approach.

### **3.4.3 Staff Recruitment and Induction**

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. 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. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

There were no volunteers deployed within the day care setting.

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 and written records were retained by the day care setting of the person's capability and competency in relation to their job role.

### 3.4.4 Staff Training

Staff were provided with training appropriate to the requirements of their role and this was recorded on an electronic training matrix. Training to assist any service users with moving and handling needs was included within the day care setting's mandatory training programme.

The person in charge reported that none of the service users currently required the use of specialised 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 person in charge advised that no service users required their oral medicine to be administered with a syringe. They were aware that should this be required, a competency assessment would be undertaken before staff undertook this task. A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents.

### 3.4.5 Care Records and Service User Input

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.

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. Service users were provided with easy read reports which supported them to fully participate in all aspects of their care. The service users' care plans contained details about their likes and dislikes and the level of support they may require. Care and support plans are kept under regular review and services users and /or their relatives participate, where appropriate, in the review of the care provided on an annual basis, or when changes occur.

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. The agenda was displayed on the wall and included the following matters for discussion: exercising, menu-planning, community walking group, visiting other centres and staffing updates.

A number of service users were assessed by Speech and Language Therapy (SALT) with recommendations provided and some required their food and fluids to be of a specific consistency. Staff implemented the specific recommendations of the SALT to ensure the care received in the setting was safe and effective. Discussions with staff and review of service users' care records reflected the multi-disciplinary input and the collaborative working undertaken to ensure service users' health and social care needs were met within the day care setting.

Staff demonstrated a good knowledge of service users' wishes, preferences and assessed needs. These were recorded within care plans along with associated SALT dietary requirements. Staff were familiar with how food and fluids should be modified.

### **3.4.6 Governance and Management Arrangements**

There was evidence of effective systems in place to manage staffing and there was sufficient staff on duty to support the service users.

There were monthly monitoring arrangements in place in compliance with the day care setting regulations and standards. 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, 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.

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 were received since the last inspection. Advice was given in relation to how complaints are managed and recorded and of the need to ensure that service users and relatives are signposted to the complaints policy and process should any complaints arise.

There was a system in place for managing instances where a service user did not attend the day centre as planned. This included a system for signing in and out the service users who attend. There was also a checklist for staff to complete noting service users who are taken out of the centre for an outing. A discussion took place with the person in charge regarding the need to add the date on the top of this sheet and to delegate responsibility to individual staff members to check all service users have been returned safely. It was agreed that this would be implemented immediately.

## **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 Leanne Muldoon, senior support worker, as part of the inspection process and can be found in the main body of the report.



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