

Inspection Report

Name of Service:	Millbrook Resource Centre
Provider:	Northern HSC Trust
Date of Inspection:	12 December 2024

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1.0 Service information

Organisation/Registered Provider:	Northern HSC Trust
Responsible Individual:	Ms Jennifer Welsh
Registered Manager:	Mrs Linda Dealey
Service Profile:	
Millbrook Resource Centre is a day care setting with a maximum of 75 places that provides care and day time activities for people aged over 18 years of age who have learning disabilities, physical disabilities and/or sensory impairments.	

2.0 Inspection summary

An unannounced inspection took place on 12 December 2024, from 9.30 a.m. to 3.30 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 assess progress with the areas for improvement identified, by RQIA, during the last care inspection on 16 October 2023; 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. However, improvements were required to ensure the effectiveness and oversight of certain aspects of the day care setting, including; recruitment practices and complaints oversight.

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

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 day care setting. 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.

Throughout the inspection process inspectors seek the views of those attending, visiting or working in 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

We spoke to a range of service users and staff to seek their views of attending and working within Millbrook Resource Centre.

Through actively 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 indicated that they enjoyed their experience of attending the day care setting; they said that they liked coming there. Staff spoke very positively in regard to the care delivery in the day care setting.

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

Returned questionnaires indicated that the respondents were very satisfied with the care and support provided. Written comments included that the service users liked 'making cards' and 'meeting new people'. One comment noted that 'the day centre makes me happy' and that 'the staff are nice'.

We did not receive any responses from online survey.

3.3 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 16 October 2023		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for improvement 1 Ref: Regulation 26 (4)(f)	The registered person shall ensure that all staff, including agency staff who attend the day care setting on an ongoing basis, attend a fire evacuation drill; records of all staff and service users attending must be retained.	Met
	Action taken as confirmed during the inspection: There was evidence that this area for improvement was met.	
Area for improvement 2 Ref: Regulation 16 (1)	The registered person shall ensure that care plans are detailed and up to date; this refers particularly to but not exclusively to, Care plans being reflective of the up to date SALT Assessment; and in relation to service users who may require periods of repositioning on specialist beds (Acheeva bed).	Met
	Action taken as confirmed during the inspection: There was evidence that this area for improvement was met.	

Action required to ensure compliance with the Day Care Settings Minimum Standards August (revised) 2021		Validation of compliance
Area for improvement 1 Ref: Standard 23.1	The registered person shall ensure that staffing arrangements are reviewed and monitored to ensure that staff are appropriately deployed over the lunch time period; spot checks on staff practice should be undertaken and records retained for inspection purposes.	Met
	Action taken as confirmed during the inspection: There was evidence that this area for improvement was met.	
Area for improvement 2 Ref: Standard 7.4	The registered person shall ensure that a proforma is developed for staff to record service user' repositioning on specialist beds, separate to the daily notes; this should enable effective auditing of such care delivery.	Met
	Action taken as confirmed during the inspection: There was evidence that this area for improvement was met.	
Area for improvement 3 Ref: Standard 3.1	The registered person shall ensure that all service users have service user agreements in place.	Met
	Action taken as confirmed during the inspection: There was evidence that this area for improvement was met.	

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 agency's recruitment records identified that criminal records checks (AccessNI) had not been consistently undertaken on all staff.

It was explained that this was due to the Trusts' policy and procedure in relation to Trust staff moving to other posts within the Trust. An area for improvement has been identified.

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. Trust mandatory training was recorded on a training matrix; advice was given in relation to retaining service-specific training on a separate matrix; this pertained to training elements, such as Autism Awareness. This will be reviewed at a future inspection.

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, to read for information sharing.

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

The manager described the use of room diaries and a centre diary, which aided in communication between staff.

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 in the activities they wanted to engage in.

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 afforded privacy when being assisted to the bathroom.

It was good to note that service users who had transitioned from Children's' services had updated care plans completed in a timely manner.

The NHSCT had recently introduced a new Information System for electronically recording patients' information. Given that this system was relatively new and that the manager was aware of the issues, RQIA will afford the day care setting time to familiarise itself with the uploading of supplementary charts, such as repositioning records, fluid charts, toileting charts; care plan updates; and other documents requiring signatures by service users/representatives. These matters will be followed up at a future inspection.

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. It was good to note that the service users were involved in updating the Interactive Whiteboard with information on the date, the Weather and the daily Menu.

The service users' art work also formed parts of the seasonal displays throughout the building. Recent activities included attending Millbrook's 30-year anniversary and attending Curtis Magee's famous fan-fare, where they enjoyed dancing. Service users went to the North Coast Alpaca Farm and a number went to Curry's Fun Fair in Portrush. It was also good to note that service users were involved in growing produce from pumpkins to pickles.

Millbrook recently started up a Makaton group which gave the service users the chance to learn and sign their favourite songs, nursery rhymes and phrases.

Millbrook also published a quarterly Newsletter which was packed full of photographs of all the great activities the service users enjoyed. The service users also enjoyed a Celebrity Visit from James Martin, actor.

The variety of activities provided within the day care setting is commended.

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 24 September 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 Linda Dealey has been the Registered Manager since 13 April 2016. Staff commented positively about the manager and described them in positive terms.

Review of a sample of records evidenced that there was a robust system in place for reviewing the quality of care and staff practices. Advice was given in relation to completing the section regarding RQIA's Quality Improvement Plan continuously from the last inspection through to the next inspection.

Additionally, advice was given in relation to including stakeholder feedback into the annual quality report. This will be reviewed at a future inspection.

Review of complaints records identified one complaint which should have been reported through to the Adult Protection Gateway Team (APGT). Following the inspection, the manager confirmed to RQIA that this had been completed.

Discussion with the manager established that representatives of the Trust had met with the complainant; however, there were no notes of the meeting retained. Additionally, there was no record of the response provided to the complainant. An area for improvement has been identified.

It was noted that a room within the day care setting had been designated as a room to be utilised by a service user. Whilst there was reasonable explanation for the change in use, a variation application to vary the registration of the day care setting should have been submitted to RQIA. Following the inspection, this was submitted by the manger and is pending approval by RQIA.

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.

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	0

Areas for improvement and details of the Quality Improvement Plan were discussed with Mrs Linda Dealey, Manager, 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	
<p>Area for improvement 1</p> <p>Ref: Regulation 24 (4)</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the date of the inspection</p>	<p>The Registered Person shall ensure that all records pertaining to complaints are retained and available for inspection, including notes of any meetings, acknowledgements and responses to complaints.</p> <p>Ref: 3.4.5</p> <hr/> <p>Response by registered person detailing the actions taken: This specific complaint mentioned above has now been acknowledged. It is held in the complaints file which comprises of meeting notes and the summary of the outcome of complaint. This complaint response led to a satisfactory outcome.</p> <p>The registered manager will log all records pertaining to complaints and ensure these are managed in a timely manner with an acknowledgement. A record will capture all actions including minutes of meeting, outcomes, response and person responsible for any actions. Complaints will be reviewed and considered within monthly quality monitoring.</p>
<p>Area for improvement 2</p> <p>Ref: Regulation 21 (3)(d)</p> <p>Stated: First time</p> <p>To be completed by: Immediate from the date of the inspection</p>	<p>The registered person shall ensure that criminal records checks (AccessNI) are undertaken prior to employment and direct engagement with service users; this includes all staff regardless of whether or not they have transferred internally within the Trust.</p> <p>Ref: 3.4.1</p> <hr/> <p>Response by registered person detailing the actions taken: HSC employers are currently in discussion with RQIA and the Department of Health regarding the requirement to undertake criminal records checks for those staff transferring internally as this may be contrary to AccessNI legislation and Departmental direction to employers in 2018.</p> <p>HR have now provided confirmation to the registered manager of this setting that they will proceed with Access NI check.</p>

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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