

Inspection Report

Name of Service: Crozier Lodge

Provider: Southern HSC Trust

Date of Inspection: 18 August 2025

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:	Southern HSC Trust (SHSCT)
Responsible Individual/Responsible Person:	Mr Steve Spoerry
Registered Manager:	Ms Paulina Konieczna
Service Profile:	
Crozier Lodge is a Day Care Setting which provides 15 places for persons aged over 65 years and those living with dementia. The service provides care and day time activities tailored to the needs of service users. The day care setting is operational Monday to Friday each week.	

2.0 Inspection summary

An unannounced inspection was conducted on 18 August 2025 between 10.20 a.m. and 4.10 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, service user involvement and dysphagia management was also examined.

The last care inspection of the day care setting was undertaken on 21 May 2024 by a care Inspector. No areas for improvement were identified. This inspection was undertaken to evidence how the day care setting is performing in relation to the regulations and standards and sought to determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

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.

It was established that staff promoted the dignity and well-being of service users and that staff were knowledgeable and well trained to deliver safe and effective care.

Service users said that the care and support provided by Crozier Lodge was a good experience. Refer to Section 3.2 for more details.

No areas for improvement were identified during this 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 registration information, and any other written or verbal information received from the service, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors seek the views of those attending, working in, and visiting the day care setting, and 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

Service users spoke positively about the staff within the day care setting, describing them as "helpful", "very caring" and "attentive." We were told that they felt staff were always "so considerate". Service users told us that the staff would aid and support them with their personal care and nutritional needs, and ultimately, "nothing is a bother to them". It was assuring to hear from service users that they felt listened to by staff. Several service users expressed their appreciation for the staff and all they do for them, for example, "the staff look after me very well and I appreciate them very much".

Feedback relating to the food supplied by the day care setting was positive with one service user telling us "the food is lovely. Sure, I'm spoilt".

Service users told us that the activities scheduled within the day care setting were enjoyable and make "life interesting". One service user advised that the activities "are good for my mental health and physical health". Knitting, bingo and the charity work completed for the children's cancer hospital were highlighted as being some of the service users' favourite activities.

Several of the service users explained how attendance provided meaning to their lives. They told us how important it was to them to have the opportunity to socialise and engage with others. They spoke about a sense of safety were they "feel at home" whilst attending the day care setting, which provides both "company and camaraderie". We were told that attendance was "the highlight of my week" and that the "help given to me in Crozier Lodge is outstanding and makes life worth living!" One service user, when asked about the day care setting stated, "I enjoy every minute of it! I'm 91, I hope to be here until I'm 100!"

The staff were very complimentary about Ms Paulina Konieczna, Registered Manager. They described her as an effective leader with high standards who is dedicated to ensuring continuous improvement across each of the services for which she has responsibility.

We were told about the efficient teamwork they felt was evident in the day care setting and advised us of the confidence they held in their colleagues.

One staff member told us how invaluable the support had been from colleagues in enhancing both their skills and confidence and how this had made professional progression possible.

In discussions with staff they demonstrated a comprehensive knowledge as to current needs and risks of service users and provided examples of recent referrals made to allied health professionals such as occupational health, physiotherapy and/or speech and language therapy (SALT). The staff also illustrated understanding of procedures to ensure adequate response to incidents, accidents or safeguarding concerns which may arise.

In speaking with staff, their passion for the work they do was evident, advising as to how needed the service is, and referring to the current waiting list for the day care setting. They spoke knowledgeably about the needs of the people they support and demonstrated awareness as to presenting risks and plans in place to mitigate against these. It was also positive to hear about the work being undertaken to maximise service provision, with staff having researched best practice relating to dementia to ensure external works to the garden will be as therapeutically rewarding as possible for service users once completed.

Staff spoke with great understanding about the people they support and extended this further to the experience of their carers. Interactions between service users and staff demonstrated a person-centred approach, sensitive to the needs of each individual. Observations of service user engagement throughout the day including morning tea and completion of a pre-admission visit were reflective of a compassionate and empathic team.

3.3 Inspection findings

3.3.1 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. There was evidence of robust systems in place to manage staffing.

The staff duty rota was clear and easy to follow, denoting employees' designation and hours of work scheduled. The rota was prepared in advance allowing time to acquire cover when needed.

Staff said there was good teamwork, they felt well supported in their role and that they were satisfied with the staffing levels. It was noted that there was enough staff in the day care setting to respond to the needs of the service users in a timely way, and to provide service users with a choice on how they wished to spend their day.

Observation of the delivery of care, review of documents and discussions with staff evidenced that the needs of attendees were known and staff sought to ensure these were met. The interactions observed between service users and staff were found to be caring and respectful.

It was identified that one staff member currently employed within the agency had done so without an enhanced AccessNI check having been completed. There was discussion with the Registered Manager following the inspection about the need for the provider organisation to be fully assured they have a robust system for criminal checks to be completed for staff. RQIA is aware of ongoing discussion between the Department of Health and HSC Trusts in respect of this, and will keep this matter under review.

Newly appointed staff had completed a structured orientation and induction to ensure they were competent to carry out the duties of their job.

Records of all staff training were retained and the manager maintained oversight of the training matrix to ensure compliance. This training included adult safeguarding, dysphagia and manual handling at a level appropriate to job roles. It was positive to note that training was provided in relation to epilepsy management and falls prevention. A small number of training was required to be booked, and confirmation was received following the inspection that this had been addressed.

There was evidence that all staff received regular supervision and there were clear procedures in place for appraising staff performance.

3.3.2 Care Delivery

There was a daily handover at the beginning of each shift, which included information about any changes to the service users' care that the staff needed to assist them in their roles. Staff were knowledgeable of individual service users' needs, their daily routines, wishes and preferences.

Regular staff meetings were held and minutes retained so that any staff unable to attend could read.

There was a system in place to ensure that the activities offered to service users were varied. On a day to day basis there was good communication to advise service users as to what was planned for the day ahead.

Service users' needs were met through a range of individual and group activities such as quizzes, problem solving, board games, logic exercises, chair based exercises, walking groups, light gardening, indoor bowls, target games, art and crafts, cookery, home management, health promotion, reminiscence, poetry/reading, creative writing, music and group outings.

It was also positive seeing that service users' were supported to utilise their skills to give back to others within the community, for example, crocheting items which they donate to a local children's' cancer hospital and making items for Christmas fairs to raise money for charity.

Staff interactions with service users were friendly and supportive. Staff were observed to be prompt in recognising service users' needs as well as actively supporting engagement and participation. It was positive to observe that staff initiated conversations with service users based upon particular interests of individual service users. The results appeared to create a sense of security for service users who were heard laughing during conversations.

Examination of care records and discussion with the Person in Charge confirmed that the risk of falls was well managed and referrals were made to other healthcare professionals as needed.

Good nutrition and a positive dining experience are important to the health and social wellbeing of service users. Service users were provided choice, with personalised nutritional needs considered. This included those on specific diets and/or with speech and language therapy recommendations in place.

3.3.3 Management of Care Records

Service users' needs were assessed when they were first referred to the day care setting and before care delivery commenced. Following this initial assessment, 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.

Review of records identified that service user consent was sought in relation to the staff contacting/requesting information from other healthcare professionals on their behalf. Service users were given the choice as to whether or not they wanted their photograph taken and used in any organisational promotional material or social media.

Service users care records were held confidentially in line with data protection regulations.

Care records were person-centred, well maintained, and regularly reviewed and updated to ensure they continued to meet the service users' needs. The Person in Charge did advise us as to challenges faced with respect to securing annual review dates with Trust' representatives. The service did however retain communications in relation to this and there were persistent efforts made by the agency to secure dates. This will again be reviewed at the next inspection.

A review of a sample of care records evidenced that service users, where possible, were involved in planning their own care and efforts had been made to ascertain service users' preferences and choices around how their support was provided.

3.3.4 Quality and Management of the Environment

The day care setting was observed to be clean and tidy, suitably furnished, warm, comfortable and free of clutter. Art work by service users as part of the activity programme was displayed throughout the centre. Photographic displays also evidenced engagement in activities and participation in social outings.

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 19 November 2024; the recommendations within the fire risk assessment had been actioned. 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.

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

3.3.5 Quality of Management Systems

There has been a change in the management of the day care setting since the last inspection. Ms Paulina Konieczna has been the Registered Manager in this day care setting since 8 July 2025. Ms Paulina Konieczna is also the registered manager for two other registered day care settings.

Those consulted with commented positively about the manager and described her as supportive, approachable and able to provide guidance.

Review of a sample of records evidenced that a robust system for reviewing the quality of care and staff practices was in place. 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 day care setting. The reports of these visits were completed in detail, however, it was noted there was a lack of professional feedback contained within the reports. This was highlighted to the Person in Charge and will be reviewed again during the next inspection.

There was a process in place to manage complaints.

Review of incident records identified that they were managed appropriately. There was evidence that incidents were audited on a regular basis, to establish any patterns/trends. It was good to note that these were reviewed in detail as part of the monthly quality monitoring process.

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. It was established that good systems and processes were in place to manage the safeguarding and protection of adults at risk of harm.

There was a protocol in place for staff to follow where service users did not attend as planned. There was also a clear protocol in place to check the bus transport after every journey to and from the day care setting, to ensure that every service user had safely exited the bus and evidence that this had been followed.

There was evidence that the manager responded to any concerns, raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services provided within the day care setting.

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 Fanchea Coleman, Person in Charge 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