

# Inspection Report

**Name of Service: Strule-Erne Activity Centre**

**Provider: Strule-Erne Day Care**

**Date of Inspection: 17 December 2024**

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>	Strule-Erne Day Care
<b>Responsible Person:</b>	Mrs Mary Sharkey
<b>Registered Manager:</b>	Mrs Laura Kelly
<b>Service Profile</b>	
Strule-Erne Activity Centre is a day care setting with up to 25 places that provides care and day time activities to service users with a learning disability. The centre is open Tuesday, Wednesday and Thursday and is operated by Strule-Erne Day Care.	

## 2.0 Inspection summary

An unannounced inspection took place on 17 December 2024, between 10.20 a.m. and 4.17 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 determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that safe, effective and compassionate care was delivered to service users attending the day care setting and that the service was well led. However, improvements were required to ensure the effectiveness and oversight of certain aspects of the day care setting, specifically in relation to recruitment practices, staff induction, record keeping and the staff roster.

It was evident that staff promoted the dignity, independence and well-being of service users.

Service users said that they enjoyed coming to the day care setting. Refer to Section 3.2 for more details.

No areas for improvement were identified in the previous inspection.

We wish to thank the manager, staff and service users for their support and cooperation during the 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 service users, relatives, staff or the Commissioning Trust.

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

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 staff survey.

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

We spoke with a number of service users and staff to seek their views of attending and working within the day care setting.

Service users spoke positively about their experience of attending the day care setting; they said they enjoyed attending the day care setting and that the staff were great. Two comments included the following statements; "This is a good place to come" and "I have fun in the centre". Observations of staff interacting with service users was noted to be person centred, respectful and caring.

Staff spoke very positively in regard to the care delivery in the day care setting. One told us that they enjoyed working in the day care setting and that service users were safe and well looked after. Staff indicated that they were very well supported by the manager and that the training provided was good.

A returned questionnaire indicated that the respondent was very satisfied with the care and support provided.

The information provided indicated that those we spoke with did not have any concerns in relation to the day care setting.

We did not receive any responses from the staff electronic survey.

### 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.

A review of staff recruitment records evidenced that an Enhanced AccessNI pre-employment check had not been satisfactorily completed before a care staff member had commenced employment. The care staff member commenced employment on 15 October 2024 and an Enhanced AccessNI pre-employment check was received on 15 November 2024. An area for improvement has been identified.

A review of two recently recruited staff records evidenced that induction and orientation had not been completed for one care staff member. An area for improvement has been identified.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken. The review of training records evidence that staff had completed appropriate training to meet the needs of the service users.

There was evidence of effective systems in place to manage staffing. Sufficient staff were on duty to support the service users. Staff said there was good teamwork and that they felt well supported in their role by the manager. Staff said that there were enough staff to meet the needs of the service users. It was observed that staff responded to requests for assistance promptly in a caring and compassionate manner. It was evident that staff had a good understanding of the needs, likes and dislikes of individual service users.

A review of staff duty rosters evidenced that the activity therapist's hours of work were not consistently recorded on the duty roster. An area for improvement has been identified.

Staff meetings were facilitated on a regular basis and a record of the matters discussed was retained.

Staff meet daily to discuss the plan for the day and to discuss the needs of the service users.

Observation of the delivery of care and support evidenced that service users' needs were met in a safe, effective and compassionate manner. There was a relaxed and welcoming atmosphere in the day care setting.

#### 3.3.2 Care Delivery

Staff interactions with service users were observed to be polite, friendly, warm and supportive and the atmosphere was calm, relaxed and pleasant. Staff were knowledgeable of individual service users' needs, their daily routine, wishes and preferences.

Staff were also observed offering service users support to engage in the activities they choose to participate in. Service users were observed to be enjoying participating in baking and staff supported them to actively engage in this activity.

Services users were afforded privacy when being assisted to use the bathroom facilities.

Service users had good access to food and fluids throughout their day. The dining area was observed to be clean and warm. Service users were safely positioned for their meals and the mealtimes were observed to be well organised and supervised. Staff communicated well to ensure that every service user received their meals in accordance with their assessed needs; it was positive to note that one staff member is responsible for checking all meals before they are provided to service users. Food provided was observed to be well presented and service users were offered a choice.

The day care setting had service user meetings on a regular basis which enabled the service users to discuss what they wanted to achieve from attending the day care setting and any activities they would like to become involved in.

An activities planner was displayed in the communal area; there was evidence of a well-structured plan with a wide range of activities available. Service users choose what activities they wish to participate in. Activities included arts and crafts, bingo, music and baking sessions.

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.

### **3.3.3 Management of Care Records**

From reviewing service users' care records and through discussions with service users, it was positive to note that service users had an input into devising their own plan of care. 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.

Service users, where possible, were encouraged and supported to be involved in planning their own care and the details of care plans were shared with their relatives, as appropriate.

### **3.3.4 Quality and Management of the Environment**

The day care setting was observed to be clean and tidy, suitably furnished, warm and comfortable, free of clutter and beautifully decorated for the festive period.

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.

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.

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 no change in the management of the day care setting since the last inspection. Staff commented positively about the manager and described them as supportive, approachable and always available to provide guidance.

There were monthly monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. 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 and staff. The reports included details of a review of service user care records; accident/incidents; complaints; safeguarding matters; and staffing arrangements including training.

A review of incident records evidenced that a number entries were not dated and/or signed. An area for improvement has been identified.

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

There were processes in place to review the quality of the service on an annual basis.

The day care setting's provision for the welfare, care and protection of service users was reviewed. There was a procedure in place for staff to report concerns. The organisation had an identified Adult Safeguarding Champion (ASC). The safeguarding champion was known to the staff team. The day care setting's annual Adult Safeguarding Position Report was reviewed and found to be satisfactory.

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. 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 day care setting's registration certificate was up to date and displayed appropriately along with current certificates of public and employers' liability insurance.

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

There was a system in place to ensure that complaints were managed in accordance with the day care settings policy and procedure. Records reviewed and discussion with the manager indicated that no complaints had been made since the previous inspection. Discussion with staff confirmed that they knew how to receive and respond to complaints sensitively and were aware of their responsibility to report all complaints to the manager or the person in charge.

#### 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	1	3

Areas for improvement and details of the Quality Improvement Plan were discussed with Mrs Laura Kelly, Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007</b>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 21 (1)(b) (2)(b) (3)(d)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of inspection</p>	<p>The Registered Person shall ensure that Enhanced AccessNI pre-employment checks are satisfactorily carried out for all staff before they commence employment.</p> <p>Ref: 3.3.1</p> <p><b>Response by registered person detailing the actions taken:</b> All staff will have enhanced Access NI pre employment checks carried out before they commence employment.</p>
<b>Action required to ensure compliance with the Day Care Settings Minimum Standards August (revised) 2021</b>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 21.1</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of inspection</p>	<p>The Registered Person shall ensure that all staff who are newly appointed complete a structured orientation and induction.</p> <p>Ref: 3.3.1</p> <p><b>Response by registered person detailing the actions taken:</b> This relates to an activity therapist who has worked in our service for many years and was not employed by us. They do not have any care or administration duties and is a position we have not had in our centre before. Induction for their role is now complete and all future staff not providing care will have a recorded induction.</p>
<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Standard 23.7</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of inspection</p>	<p>The Registered Person shall ensure a record is kept of staff working each day and the capacity in which they worked.</p> <p>This relates specifically to the activity therapist's hours of work.</p> <p>Ref: 3.3.1</p> <p><b>Response by registered person detailing the actions taken:</b> All care staff have been recorded on the rota. It was an oversight that the activity therapist was not included on the rota for a short period shortly after their employment commenced. All staff details are now on the rota.</p>

<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Standard 7.7</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate from the date of inspection</p>	<p>The Registered Person shall ensure that all records are legible, accurate, up to date, signed and dated by the person making the entry.</p> <p>Ref: 3.3.5</p>
	<p><b>Response by registered person detailing the actions taken:</b> All records are legible, accurate, up to date, signed and dated by the person making the entry. This relates to 2 x records made in the accident book and the fire drill record book, all staff are now aware that dates and their signature's are to be added.</p>

*\*Please ensure this document is completed in full and returned via the Web Portal\**



## 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](mailto:info@rqia.org.uk)



**Web:** [www.rqia.org.uk](http://www.rqia.org.uk)



**Twitter:** @RQIANews