

# Inspection Report

22 April 2024



## Bardan Cottage Bessbrook

Type of service: Day Care Setting  
Address: 29 Convent Hill, Bessbrook, Newry, BT35 7AW  
Telephone number: 07980762294

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Assurance, Challenge and Improvement in Health and Social Care

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## 1.0 Service information

<b>Organisation/Registered Provider:</b> LG Care Limited	<b>Registered Manager:</b> Mrs Louise Harte
<b>Responsible Individual:</b> Mr Liam Lavery	<b>Date registered:</b> 11 February 2022
<b>Person in charge at the time of inspection:</b> Mrs Louise Harte	
<b>Brief description of the accommodation/how the service operates:</b> Barden Cottage Bessbrook, provides day care services for service users residing in the Southern Health and social Care Trust (SHSCT) area.	

## 2.0 Inspection summary

An unannounced inspection was undertaken on 22 April 2024 between 9.20 a.m. and 1.20 p.m. The inspection was conducted 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 reviewed.

An area for improvement was identified, this related to recruitment.

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

Barden Cottage Bessbrook uses the term 'clients' to describe the people to whom they provide care and support. For the purposes of the inspection report, the term 'service user' is used, in keeping with the relevant regulations.

## 3.0 How we inspect.

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure

compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

In preparation for this inspection, a range of information about the service was reviewed. This included registration information, and any other written or verbal information received from service users, relatives, staff or the Commissioning Trust.

As a public-sector body RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care services, we are committed to ensuring that the rights of people who receive services are protected. This means we will be seeking assurances from providers that they take all reasonable steps to promote people's rights. Users of day care settings have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted.

#### 4.0 What did people tell us about the service?

During the inspection we spoke with a number of service users, relatives and staff members.

The information provided indicated that service users and relatives had no concerns in relation to the day care setting. Staff had indicated some concerns; these concerns were discussed with the manager at inspection for their consideration. These concerns did not include any aspect of the care of service users.

Comments received included:

##### **Service users' comments:**

- "I enjoy coming here."
- "The food is really good."
- "I like playing the games."

##### **Service users' relatives' comments:**

- "I would be completely lost without this service."
- "The care and communication is faultless."
- "The food, activities and standard of personal care is excellent."
- "They keep me informed about everything I need to know in a timely manner."
- "I have no concerns about this service."

##### **Staff comments:**

- "The clients are cared for very well."
- "There are plenty of activities for the clients."
- "I have no concerns about the care of service users."
- "I love this job, this is the best job I ever had."
- "I feel very supported in my job, if I have any issues, I will speak with the manager."

**HSC Trust representatives' comments:**

- “If I had a family member who needed day service support- this is the facility I would recommend.”
- “The staff here without exception interact in a very positive manner with the clients.”

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

- “My father loves going to Barden Cottage in Bessbrook where he is very well looked after by the staff.”
- “The staff know me very well and organised a cake for my 90<sup>th</sup> birthday.”

There were no responses to the electronic survey.

**5.0 The inspection****5.1 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 22 May 2023 by a care inspector. No areas for improvement were identified.

**5.2 Inspection findings****5.2.1 Are there systems in place for identifying and addressing risks?**

The day care setting's provision for the welfare, care and protection of service users was reviewed. The day care setting's annual Adult Safeguarding Position report had been formulated and 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.

Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided.

Staff were provided with training appropriate to the requirements of their role. Where service users required the use of specialised equipment to assist them with moving, this was included within the day care setting's mandatory training programme. The timing of the provision of training was discussed with the manager. This will be reviewed at future inspections.

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.

All staff had been provided with training in relation to medicines management.

The Mental Capacity Act (MCA) (2016) 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. Staff had completed appropriate Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. A resource folder was available for staff to reference. 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. Where a service user was experiencing a deprivation of liberty, their care records contained the necessary forms.

### **5.2.2 What are the arrangements for promoting service user involvement?**

From reviewing service users' care records it was good to note that service users had an input into devising their own plan of care. The service users' care plans contained details about their likes and dislikes and the level of support they may require.

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 day care setting had completed an annual review in relation to their practice which incorporated service users' feedback.

### **5.2.3 Is there a system in place for identifying service users Dysphagia needs in partnership with the Speech and Language Therapist (SALT)?**

A number of service users were assessed by SALT with recommendations provided and some required their food and fluids to be of a specific consistency. A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents.

### **5.2.4 What systems are in place for staff recruitment and are they robust?**

A review of the day care setting's staff recruitment records confirmed that criminal record checks (AccessNI), were completed and verified before staff members commenced employment and had direct engagement with service users. Pre-employment checks did not consistently contain full employment histories. An area for improvement has been identified.

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.

### 5.2.5 What are the arrangements for staff induction and are they in accordance with NISCC Induction Standards for social care staff?

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, induction programme. The manager agreed to review the induction documentation to include a record of the work shadowing period.

### 5.2.6 What are the arrangements to ensure robust managerial oversight and governance?

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, 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.

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 along with current certificates of public and employers' liability insurance.

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.

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.

## 6.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007.

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	1	0

The area for improvement and details of the QIP were discussed with Mrs Louise Harte, Registered 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>	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 21(3)(d) Schedule 2  <b>Stated:</b> First time	The registered person shall ensure that full and satisfactory information is available in respect to all matters in schedule 2, this relates specifically to full employment histories not being obtained.  Ref: 5.2.4
<b>To be completed by:</b> Immediately from the date of inspection	<b>Response by registered person detailing the actions taken:</b> The registered manager will fully comply with Schedule 2 and full employment histories with all new staff.

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



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