

# Inspection Report

**Name of Service:** Age NI  
**Provider:** Age NI  
**Date of Inspection:** 24 February 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>	Age NI
<b>Responsible Individual/Responsible Person:</b>	Ms Linda Robinson
<b>Registered Manager:</b>	Mrs Sharon Fitzpatrick
<b>Service Profile –</b>  This is a day care setting with 10 places that provides care and day time activities for people living with dementia. The day care setting is open Monday, Tuesday and Wednesday and operates from premises in Ballyclare. The service is commissioned by the Northern Health and Social Care Trust (NHSCT).	

## 2.0 Inspection summary

An unannounced inspection took place on 24 February 2025 between 10.10 am and 3.00 pm 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 effective and 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; specifically in relation to the recording of safeguarding matters, staff training and competencies, availability of an up to date fire risk assessment and improvements to the environment.

In response to this, RQIA invited the Responsible Individual and Head of Care to a meeting to provide detailed feedback on the inspection findings and to discuss how identified deficits are to be addressed.

Full details, including areas for improvement identified, can be found in the main body of the report and in the quality improvement plan (QIP) in section 4.

We would like to thank the manager, service users, relatives and staff 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 Age NI 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 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 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.

Information was provided to service users, relatives, staff and other stakeholders on how they could provide feedback on the quality of services. This included user friendly questionnaires and an electronic survey for staff.

#### 3.2 What people told us about the service

We spoke to a range of service users, relatives and staff to seek their views of attending, visiting and working within the day care setting.

Service users indicated they had no worries in relation to the service provided by Age NI. They told us they were very happy with everything and commented on the friendship and company that the setting offered them. Service users stated that they were well supported by staff.

Service users' relatives spoke very positively about the day care setting. One called the service 'fantastic' and another told us that as a family, they are very happy with all aspects of the care provided.

Staff told us how much they enjoyed their job

The information provided indicated that those we spoke with had no concerns in relation to the care and support provided within the day care setting.

Returned questionnaires indicated that the respondents were very satisfied with the care and support provided. One service user's relative told us that they believed their relative would deteriorate more quickly without the service. Another commented on the high skill level of the staff and their relative's enjoyment of the activities and socialising.

No responses were received to the electronic survey.

### 3.3 Inspection findings

#### 3.3.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through staff induction, regular staff training and ensuring that the number and skill of staff on duty each day matches the needs of the service users.

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) or the Nursing and Midwifery Council (NMC) or any other relevant regulatory body. There was a system in place for professional registrations to be monitored by the manager.

There was evidence that all newly appointed staff had completed a structured orientation and induction which included shadowing of a more experienced staff member. Written records were retained by the day care setting of the person's capability and competency in relation to their job role.

There were no volunteers providing support within the day care setting.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken. However, it was noted that one staff member had not completed training on the Administration of Medicine since commencing employment within the day care setting. This staff member provided regular support with medication to one service user. An area for improvement has been identified.

There was evidence of effective systems in place to manage staffing. Sufficient staff were on duty to support the service users. Discussion took place with the manager regarding ensuring a record was retained that staff on the roster actually worked these shifts. This will be reviewed at the next inspection.

#### 3.3.2 Care Delivery

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

Staff were observed service users support to engage in activities of their choice. Activities offered included chair exercises, bingo, table top games, newspaper discussions and quizzes.

Service users were safely positioned for their meals and mealtimes were observed to be well organised and supervised. Food was well presented and service users were offered a choice.

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 care setting and any activities they would like to become involved in. Some matters discussed included recent bad weather, new members and complaints.

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

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.

Service users care records were held confidentially.

Care records were person centred, well maintained, regularly reviewed and updated to ensure they continued to meet the service users' needs. Staff recorded regular evaluations about the care and support provided. Service users, where possible, were involved in planning their own care and the details of care plans were shared with service users' relatives, as appropriate.

The organisation had an identified Adult Safeguarding Champion (ASC). The day care setting's annual Adult Safeguarding Position report had been formulated and was reviewed and found to be satisfactory. It was positive to note there was a resource file available to staff in regard to adult protection matters.

It was noted however, that there was no safeguarding log in place. Consequently, the manager had limited oversight of any potentially open or ongoing safeguarding referrals within the day care setting. This also meant they had no mechanism to review any potential trends around adult safeguarding referrals. An area for improvement has been identified.

### 3.3.4 Quality and Management of the Environment

The day care setting was observed to be clean, tidy, warm, comfortable and free of clutter. The name of the person in charge on the day of inspection was clearly displayed along with the menu and activity choice.

Some interior paintwork in the activity room and kitchen was in poor condition. An area for improvement has been identified.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that the last full evacuation drill was undertaken on 16 July 2024. Staff had completed fire training.

The only Fire Risk Assessment available for review within the day care setting on the day of inspection was dated 2018. An area for improvement has been identified.

Contents of the first aid box were examined and found to be in date.

### 3.3.4 Quality of Management Systems

There have been acting management arrangements in place since 21 September 2023. The provider is currently recruiting for a permanent manager for the day care setting. RQIA will keep this matter under review.

It was noted that competency assessments had not been undertaken on the staff left in charge in the absence of the manager. This has the potential to impact the safety and wellbeing of service users. An area for improvement has been identified.

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.

The Annual Quality Report was reviewed and was satisfactory.

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

There was a system in place for managing instances where a service user did not attend the day care setting as planned.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure.

## 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
<b>Total number of Areas for Improvement</b>	3	2

Areas for improvement and details of the Quality Improvement Plan were discussed with the 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	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 14(3)  <b>Stated:</b> First time  <b>To be completed by:</b> 31 March 2025	The Registered Person shall ensure that every staff member receives training commensurate to their role to ensure the safety of service users. This relates specifically to Administration of Medication training  Ref: 3.3.1
	<b>Response by registered person detailing the actions taken:</b> All staff have completed all mandatory training which included Administration of Medication.
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 13(1)(a)  <b>Stated:</b> First time  <b>To be completed by:</b> 30 April 2025	The registered person shall ensure that the day care setting is conducted so as to promote and make proper provision for the care and welfare of service users.  This relates specifically to the presence of a Safeguarding Lo  Ref: 3.3.3
	<b>Response by registered person detailing the actions taken:</b> Safeguarding log in place.
<b>Area for improvement 3</b>  <b>Ref:</b> Regulation 26(4)(a)  <b>Stated:</b> First time  <b>To be completed by:</b> 30 April 2025	The Registered Person shall have in place a current written risk assessment and fire management plan which is revised and actioned when necessary or whenever the fire risk has changed.  This relates specifically to an up to date fire risk assessment being available on inspection.  Ref: 3.3.4
	<b>Response by registered person detailing the actions taken:</b> Current Fire risk assessment available and actions completed.
Action required to ensure compliance with The Day Care Settings Minimum Standards (revised) 2021	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 25.1  <b>Stated:</b> First time	The Registered Person shall ensure that the day care setting is decorated to an acceptable standard for the service users.  Ref: 3.3.4

<b>To be completed by:</b> 31 August 2025	<b>Response by registered person detailing the actions taken:</b> Landlord has visited and plan in place for redecoration of centre.
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 23.3  <b>Stated:</b> First time	The Registered Person shall ensure competency assessments are undertaken on staff in charge in the absence of the manager.  Ref: 3.3.5
<b>To be completed by:</b> 31 March 2025	<b>Response by registered person detailing the actions taken:</b> Competency assessments have been completed for all staff who undertake charge in absence of manager.

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





The Regulation and  
Quality Improvement  
Authority

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