The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: Drumross Adult Centre

Provider: Northern Health and Social Care Trust

Date of Inspection: 1 December 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:	Northern Health and Social Care Trust (NHSCT)
Responsible Individual/Responsible Person:	Ms. Suzanne Pullins
Registered Manager:	Ms. Glenda Garrett
Service Profile – Drumross Adult Centre is a day care setting located in Newtownabbey and registered for a maximum of 80 places. It provides care and day time activities for adults living with a learning disability. Service users may also have a physical disability, sensory needs, autism, mental health needs or require support with behaviours which may challenge. The setting is open Monday to Saturday and is operated by NHSCT.	

2.0 Inspection summary

An unannounced inspection took place on 1 December 2025, between 10 am and 5 pm. It was carried out 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 9 January 2025; 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 that effective and compassionate care was delivered to service users. As a result of this inspection both areas for improvement previously identified were assessed as having been addressed by the provider. Full details, including a new area for improvement identified, can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

Service users said that the care and support provided by the day care setting was a positive experience. Service users who were unable to voice their opinions were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Refer to Section 3.2 for more details.

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

The inspector would like to thank the manager, service users, relatives and staff for their help and support in completion of 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 the 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 will seek the views of those living, working and visiting the home; and review/examine a sample of records to evidence how the home 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, relatives and staff to seek their views of regarding the care and support offered by Drumross Adult Centre.

Service users expressed how they loved attending the day care setting and praised the staff and the variety of activities on offer to them.

A relative informed us that their loved one enjoys attending the day care setting and 'does things with the staff that they wouldn't do at home'.

Staff described how they had no issues with the care and support offered and told us that 'all is good'.

The information provided indicated that those spoken with had no concerns in relation to the day care setting.

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 systems in place to manage staffing. Staff confirmed that they felt there were enough staff in place to meet the service users' care and support needs.

Review of the 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.

It was noted, however, that recruitment records reviewed did not contain a full employment history for staff and/or gaps in employment history had not been explored. This has been identified as an area for improvement.

Newly appointed staff, including those supplied by recruitment agencies, had completed a structured orientation and induction, to ensure they were competent to carry out the roles and responsibilities of their job.

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 management team.

Records of all staff training were retained and were noted to be up to date. Review of a sample of staff training records concluded staff had received mandatory and other training relevant to their roles and responsibilities since the previous care inspection such as first aid, epilepsy management and dysphagia. Staff confirmed that they got sufficient training for their roles. One staff member told us about an additional qualification they had recently achieved; a relative commended the high level of staff knowledge and skills.

Drumross Adult Centre continues to have significant reliance on agency workers. RQIA acknowledges the ongoing attempts by the provider to recruit into these roles. Staff reported to us that these agency staff have been working in the day care setting 'a long time and fit well into the staff team'.

Regular staff meetings were held and minutes maintained of the meetings for staff, unable to attend, to read for information sharing.

3.3.2 Care Delivery

All staff interactions with service users were observed to be friendly and supportive. Staff were skilled in communicating with service users; they were respectful, understanding and sensitive to service users' needs.

There was a system in place to ensure that the activities offered to service users were varied and tailored towards their individual needs and preferences. Service users were well informed of planned activities and of their opportunity to be involved and looked forward to attending the planned events; one service user told us how much they enjoyed arts and crafts and attending the local leisure centre.

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.

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.

3.3.3 Management of Care Records

Service users' needs were assessed when they were first referred to the agency / 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 and regularly reviewed and updated to ensure they continued to meet the service users' needs. 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.

Staff had completed appropriate Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. 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 details of DoLs assessments completed and agreed outcomes developed in conjunction with the HSC Trust representative. A central register was in place to enable tracking of any DoLS due for review.

It was noted that the day care setting's Restrictive Practice Register required a small number of updates. Confirmation was received from the manager after the inspection that this had been actioned.

The day care setting retained records of any referrals made to the HSC Trust in relation to adult safeguarding. A review of records confirmed that these had been managed appropriately.

Review of records identified that the care plans were reflective of the recommendations outlined within the Speech and Language Therapy (SLT) Care Plan.

3.3.4 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Ms. Glenda Garrett has been the manager in this day care setting since 1 January 2024. She is also acting manager of another registered day care setting. The manager has submitted an application to RQIA for registration as manager for both day care settings. This application will be reviewed in due course.

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

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; an area for improvement previously identified in this regard had been addressed by the provider.

The Annual Quality Report was reviewed and was satisfactory.

RQIA had been notified appropriately in keeping with the regulations. Incidents had been managed appropriately. It was good to note that these were reviewed in detail as part of the monthly quality monitoring process.

RQIA is aware of one Serious Adverse Incidents (SAIs) that has been investigated by NHSCT. The SAI report had just been issued prior to this inspection. The recommendations contained in the report will be reviewed at the next inspection to ensure that these are embedded into practice.

Discussions with the manager established that they were knowledgeable in matters relating to adult safeguarding and the process for reporting and managing adult safeguarding concerns.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. Where complaints were received since the last inspection, these were appropriately managed and were reviewed as part of the day care setting's monthly quality monitoring process.

3.3.5 Quality and Management of the Environment

The day care setting was observed to be clean and tidy, suitably furnished, warm and comfortable and free of clutter.

Records examined identified that a number of safety checks had been undertaken, including fire evacuation drills. Staff fire training was up to date. During the inspection fire exits were observed to be clear of clutter and obstructions.

It was positive to note that the day care setting was awaiting delivery of some specialised equipment that will enhance service user care.

4.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with Regulations.

	Regulations	Standards
Total number of Areas for Improvement	1	0

The area 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 Domiciliary Care Agencies Regulations (Northern Ireland) 2007

Area for improvement 1 **Ref:** Regulation 21(3)(d) Schedule 2 **Stated:** First time **To be completed by:** Immediate and ongoing from date of inspection	The Registered Person shall ensure that recruitment records include a full employment history, together with a satisfactory written explanation of any gaps in employment. Ref: 3.3.1
	Response by registered person detailing the actions taken: A comprehensive audit has been completed across all staff personnel files to ensure full compliance with required standards. Monitoring processes have been strengthened, with targeted audits of two personnel files now being conducted each month. All future recruitment processes will include verification of any gaps in employment, and candidates will only proceed once a satisfactory explanation has been obtained in accordance with regulatory standards.

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The Regulation and Quality Improvement Authority

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