



The Regulation and
Quality Improvement
Authority

Inspection Report

Name of Service: Station Road Resource Centre

Provider: Southern HSC Trust

Date of Inspection: 29 April 2025

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation:	Southern HSC Trust (SHSCT)
Responsible Individual:	Mr Colm McCafferty
Registered Manager:	Mr Melvyn Purdy (registration pending)
Service Profile:	
Station Road Resource Centre provides a service to service users with a physical disability residing within the Armagh catchment area. A small number of the service users who attend have a learning disability.	

2.0 Inspection summary

An unannounced inspection took place on 29 April 2025, between 9.30 am and 1 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 assess progress with the area for improvement identified, by RQIA, during the last care inspection on 13 September 2023; and 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.

It was evident that staff were knowledgeable and well trained to deliver safe and effective care.

Service users said that they were very satisfied with the care and support provided by Station Road Resource Centre staff.

As a result of this inspection the previous area for improvement identified was assessed as having been addressed by the provider and no new areas for improvement were identified.

Details and examples of the inspection findings can be found in the main body of the report.

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 Quality Improvement Plan 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 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.

3.2 What people told us about the service

Through active listening, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

Service users told us that the care is 'brilliant' and that the staff are 'professional' and 'caring'. One comment included 'I enjoy coming here and (the) staff know exactly what my needs are'. Another commented that there is a 'great choice of activities and the meals are satisfactory'. One service user stated that they 'love' attending the day care setting and that they feel like they 'should have come here years ago'. One service user made a specific comment regarding the building; this was relayed to the manager for review and action, as appropriate.

Staff told us that they had no concerns and that they felt well supported. Staff described working in Station Road Resource Centre as a 'lovely place to work' and that they felt that the staff 'work well as a team and go over and above to keep a wide range of activities available to service users, working with them to make their day to day experiences in the centre enjoyable'.

3.3 Inspection findings

3.3.1 Staffing Arrangements (recruitment and selection, induction and training)

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.

Whilst the Inspector's observation of the delivery of care evidenced that the service users' needs were met by the number and skills of the staff on duty, one service user commented in relation to the staffing levels, saying that there 'weren't enough staff' and that it 'put too much responsibility on (the two) staff on duty'. This comment was relayed to the person in charge, who advised that recruitment for the day care setting was ongoing and the needs of the service users were continually reviewed.

There was a system in place to manage the recruitment of day care workers; this included ensuring that all pre-employment checks, including criminal record checks (AccessNI), are completed and verified before day care workers commence employment and have direct engagement with service users.

A review of the records confirmed that all staff were appropriately registered with the Northern Ireland Social Care Council (NISCC). Information regarding registration details, renewal and revalidation dates was monitored by the management team; this system was reviewed and found to be in compliance with regulations and standards.

There was a system in place to ensure that any new staff complete a structured orientation and induction, to ensure they are competent to carry out the duties of their job.

Records of all staff training were retained and were noted to be up to date. Day care workers spoken with confirmed that got sufficient training for their roles. However, the records reviewed identified that transport drivers had not consistently completed training in respect of adult safeguarding. Following the inspection, it was confirmed to RQIA that this training had been completed.

All staff received regular supervision. Procedures were in place for appraising staff performance and staff told us they felt supported in their roles.

3.3.2 Care Delivery

There was a communication system in place, which included information about any changes to the service users care that the staff needed to assist them in their roles. Regular staff meetings were held and minutes maintained of the meetings for staff, unable to attend, to read for information sharing.

Service users' needs were met through a range of individual and group activities such as gardening, armchair yoga, decoupage, board games, kurling and boccia.

Staff interactions with service users were observed to be friendly and supportive.

Good nutrition and a positive dining experience are important to the health and social wellbeing of service users. Service users may need a range of support with meals; this may include simple encouragement through to full assistance from staff and their diet modified.

The dining experience was an opportunity for service users to socialise and the atmosphere was calm, relaxed and unhurried. The service users said that they enjoy the meals and their dining experience. Advice was given in relation to raising staff awareness of the need for a Safety Pause to be held prior to serving the meals. This is important to consider those service users who required a modified diet.

3.3.2 Management of Care Records

Service users' needs were assessed when they were first referred to the day care setting and before they first attended the day care setting. 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.

Where a service user needed a specific type of diet, Speech and Language Therapy (SALT) care plans were in place; it was good to note that this was accurately reflected in the overall care plan.

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.

3.3.3 Quality of Management Systems

The management arrangements of the day care setting have changed since the last inspection. Mr Melvyn Purdy has applied to be the registered manager of the day care setting and he has also applied to be the manager of a number of other registered day care settings within the SHSCT. The registration application is being considered.

Those consulted with commented positively about the management team and said they felt well supported.

The day care setting was visited each month by a representative of the registered provider to consult with service users and staff and to examine all areas of the running of the day care setting. The reports of these visits were completed in detail.

No complaints had been received since the date of the last inspection.

Review of incident records identified that they were managed appropriately.

The annual quality report was in the process of being completed; this will be reviewed at a future inspection.

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 day care setting's adult safeguarding policy. A specific individual was identified as the day care setting's ASC.

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

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 and free of clutter.

Review of records confirmed that environmental and safety checks were carried out, as required on a regular basis, to ensure the day care setting was safe to attend. For example, electrical installation checks and water temperature checks.

A fire risk assessment had been completed on 7 March 2023. 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.

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 Mr Melvyn Purdy, Manager, 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