

Inspection Report

Name of Service: Edgcumbe Training and Resource Centre

Provider: Belfast Health and Social Care Trust

Date of Inspection: 25 September 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:	Belfast Health and Social Care Trust (BHSCT)
Responsible Individual:	Ms. Maureen Edwards
Registered Manager:	Mrs. Dorothy Forsythe
Service Profile – This is a day care setting located in Belfast that provides care and day time activities for people living with a learning disability. The care is commissioned by the BHSCT.	

2.0 Inspection summary

An unannounced inspection took place on 25 September 2025, between 9.55 am and 3.20 pm. It was carried out by two care Inspectors.

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 6 August 2024; 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 and that the day care setting was well led. Details and examples of the inspection findings can be found in the main body of the report.

Service users said that the care and support provided was a good experience. Refer to Section 3.2 for more details.

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

Edgumbe Training and Resource Centre uses the term 'students' 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.

The inspectors would like to thank the manager, service users, relatives and staff for their help and support in the 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 service 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 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 attending and working in the service; and review/examine a sample of records to evidence how the service 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 attending and working within the service.

Service users told us that they liked attending the day care setting, the activities offered and seeing their friends.

A relative described the setting as 'fantastic' and the standard of care as 'excellent'.

Staff commented on the good team working in place and said they had 'no issues' in relation to the care and support provided.

3.3.1 The Inspection

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 robust systems in place to manage staffing.

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).

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.

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 which also included shadowing of a more experienced staff member.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken; this included staff that were supplied by agencies.

There were no volunteers working in the day care setting.

Due to operational issues, there has been a recent reduction in the full complement of bus drivers allocated to the day care setting. This has impacted on the workload of the management team in terms of organising journeys to and from the day care setting. It has also impacted the length of service users' journeys and their programmes within the day care setting. Staff and service users both fed back to us their frustrations around the reduced transport provision. RQIA acknowledges that BHSCT is proactively taking steps to improve the situation but will keep this matter under review.

3.3.2 Care Delivery

It was apparent that service users were familiar with staff as they appeared relaxed and comfortable in their surroundings and interactions. There was genuine warmth in the engagement by staff with service users and staff spoken with were knowledgeable regarding service users likes, dislikes and individual preferences.

We observed on numerous occasions, staff offering service users' choice regarding the activity they wished to do or where they wished to go. Staff were also observed responding sensitively and in a timely manner to the non-verbal cues of service users with limited verbal communication.

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. The day care setting had provided service users with information about keeping themselves safe and the details of the process for reporting any concerns. Service users told us repeatedly how safe that staff, including ancillary staff, made them feel.

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. Some matters discussed included:

- How to keep safe
- Safety pause at mealtimes
- Transport

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. The details of care plans were shared and signed by service users and/or their representatives as appropriate.

A review of care records evidenced that moving and handling and dysphagia risk assessments and care plans were up to date.

There were arrangements in place to ensure that service users who required high levels of supervision or monitoring and restriction had their capacity considered and, where appropriate, assessed. Where a service user was experiencing a deprivation of liberty, the care records contained details of assessments completed and agreed outcomes developed in conjunction with the HSC Trust representative. Any service user subject to authorised Deprivation of Liberty Safeguards (DoLS) had their care plan reviewed by an HSC professional annually to ensure that they were not used disproportionately or for longer than is necessary. Any changes to the DoLS were communicated to the manager and updated documents shared and stored within the service users care records. A central register was in place to enable tracking of any DoLS due for review.

Discussion took place with the manager with regards to lack of detail in the care and support plans of action to be taken by staff in the event a service user does not comply with any conditions of their DoLS. The manager welcomed this advice and agreed to implement this after the 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 the day care setting's adult safeguarding policy. In the Trust, this person is called the Designated Adult Protection Officer (DAPO). A specific individual was identified as the day care setting's DAPO. 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 of Management Systems

There has been a change in the management of the day care setting since the last inspection. Mrs. Dorothy Forsythe has been the manager in this day care setting since 8 July 2025. Service users told us that they knew who the manager was and staff described her as 'very supportive'.

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 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 day care setting's registration certificate was up to date and displayed.

RQIA had been notified appropriately of any incidents in keeping with the regulations. Incidents had been managed appropriately. No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

There was a system in place for an identified person to check the vehicle at the end of each journey to ensure that no service users remained on the transport.

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. Much of the day care setting was decorated with art work undertaken by service users as part of the activity programme provided.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. Fire risk assessments for the setting were available for the inspection and had been completed on 21 January 2025. Staff fire training was up to date. During the inspection fire exits were observed to be clear of clutter and obstructions. Service users told us they know where their assembly point was in the event of an emergency evacuation.

There was evidence that medical devices within the day care setting had been maintained in line with manufacturers' recommendations.

Hazardous substances were noted to be stored appropriately in line with Control of Substances Hazardous to Health (COSHH) guidelines.

Discussion took place with the manager in relation to several garden areas located around the day care setting. All of these required some amelioration work. The manager reported that requests have been submitted for this work. This will be reviewed in detail at the next inspection.

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 the manager, as part of the inspection process and can be found in the main body of the report.



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