

Inspection Report

Name of Service: Orchardville Training and Resource Centre

Provider: Belfast Health and Social Care Trust

Date of Inspection: 15 May 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
Responsible Individual	Mrs Maureen Edwards
Registered Manager:	Mr Terry McCrea
Service Profile	
<p>Orchardville Training and Resource Centre is a day care setting that provides care and support for up to 90 adults who live within the Belfast Health and Social Care (BHSC) Trust area. Service users have a learning disability and may have a range of additional disabilities/conditions including profound and multiple disabilities, complex healthcare needs, dementia, autism, mental ill health, behaviours which challenge and sensory impairment.</p> <p>The day care setting is open Monday to Friday and is managed by the Belfast Health and Social Care (BHSC) Trust.</p>	

2.0 Inspection summary

An unannounced inspection was undertaken on 15 May 2025 between 11.25 am and 4.15 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 areas for improvement identified, by RQIA, during the last care inspection on 8 December 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. Details and examples of the inspection findings can be found in the main body of the report.

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

There were no new areas for improvement identified during this 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 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 within the day care setting and review a sample of records to evidence how the day care setting is performing 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 questionnaires and an electronic staff survey.

3.2 What people told us about the service

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

Service users said that they were happy with the care and support provided at the day care setting. Two comments included the following statements; "I like it here." and "I come every day - it's very good".

Feedback received from the service user/relative questionnaires indicated that service users felt safe, that the care provided was compassionate, and that the service was well led. Some comments from returned surveys included the following statements; "they listen and I can talk to staff." And; "the centre makes me feel welcome and safe". Other comments noted within a returned survey identified that issues around transport and staffing had impacted service user experience. The issue of transport was discussed with the manager who advised that the day care setting was operating with one less bus at present due to shortage of drivers available. This has led to some service users being transported by taxi and less buses being available for planned outings. The manager confirmed that where service users are impacted as a consequence of driver shortages, this is promptly escalated to the appropriate departments and reported under the incident management policy. This will be reviewed at a future inspection. A review of staffing arrangements is discussed in more detail in section 3.4.3.

Staff who spoke with the inspector spoke positively in regard to the care delivery, training and management support in the day care setting.

Relatives who spoke with the inspector indicated that they were happy with the care provided to their loved one commenting as follows; “staff are meticulous – they know what (my relative) needs” and “staff go over and above”.

One healthcare professional who spoke with the inspector spoke positively about the staff and care provided in the centre: “I find the staff really approachable and they follow all advice given”. Other healthcare staff who provided feedback after the inspection were very positive about the care and support given by staff to the service users when attending the day care setting.

3.3 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 08 December 2023 by a care Inspector. As a result of this inspection one area for improvement was made and assessed as having been addressed by the provider.

3.4 Inspection findings

3.4.1 Adult Safeguarding and Incident Reporting

The day care setting’s provision for the welfare, care and protection of service users was reviewed. The organisation’s policy and procedures reflected information contained within the Department of Health’s (DoH) regional policy ‘Adult Safeguarding Prevention and Protection in Partnership’ July 2015 and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

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

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 in normal business hours and out of hours. They could also describe their role in relation to reporting poor practice and their understanding of the day care setting’s policy and procedure with regard to whistleblowing.

The manager was aware that RQIA must be informed of any safeguarding incident that is reported to the Police Service of Northern Ireland (PSNI). Incidents and accidents which occurred since last inspection had been managed appropriately and any learning or changes arising had been embedded into practice. Advice was provided to the manager in respect of implementing a way of recording and tracking incidents on a monthly basis so that any trends can be noted and addressed accordingly. The manager welcomed this advice and agreed to implement this going forward.

3.4.2 Mental Capacity and Restrictive Practice

The Mental Capacity Act (MCA) 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. When service users lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

Staff had completed appropriate 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 the correct documentation confirming DoL is in place and the day care setting maintains a register of those service users who have a DoL in place.

There was a policy in place for the use of restrictive interventions however the manager confirmed there were no service users subjected to restrictive practices within the day care setting.

3.4.3 Staff Selection, Training and Recruitment Records

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 service user. Review of the agency'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 Northern Ireland Social Care Council (NISCC) or any other relevant regulatory body; 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.

The staffing arrangements were reviewed during inspection and it was identified that there were a number of staff vacancies within the centre. The manager confirmed that these are presently managed through use of agency staff however efforts to recruit new staff remain ongoing and it was highlighted that a new approach towards recruitment recently trialled received a positive response. The manager confirmed plans for a further recruitment drive to commence imminently. On the day of inspection, there were enough staff on duty to support service users. Staff said there was good teamwork and that they felt well supported in their role and that they were satisfied with the present staffing levels. Staff were seen assisting service users in a caring and compassionate manner. The staffing arrangements will be reviewed at a future inspection.

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 evidence that the induction programme for all new staff included shadowing of a more experienced staff member - this included staff that were supplied by agencies. Written records were retained by the agency of the person's capability and competency in relation to their job role.

Staff were provided with training appropriate to the requirements of their role. The day care setting had maintained a record for each member of staff of all training which was checked and updated on a regular basis. 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.

All day care staff had been provided with training in relation to medicines management. A review of the policy relating to medicines management identified that it included direction for staff in relation to administering liquid medicines. Where service users received liquid medicines using an oral syringe, this was documented in the service user's care plan and staff had undertaken an assessment of their competency in this area.

3.4.4 Dysphagia Management

A number of service users were assessed by Speech and Language Therapist (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.

Discussions with staff and review of service users' care records reflected the multi-disciplinary input and the collaborative working undertaken to ensure service users' health and social care needs were met within the day care setting. There was evidence that staff made referrals to the multi-disciplinary team and these interventions were proactive, timely and appropriate. Staff also implemented the specific recommendations of the SALT to ensure the care received in the setting was safe and effective.

Staff demonstrated good knowledge of service users' wishes, preferences and assessed needs. These were recorded within care plans along with associated SALT dietary requirements. Staff were familiar with how food and fluids should be modified and followed a clear programme for each service user with SALT requirements at meal times.

3.4.5 Care Records and Service User Experience

A review of service users' care records identified that each service user had a detailed, person centred support plan to enable them to follow and participate in all aspects of their care. Care plans contained details about their likes and dislikes and the level of support they may require. These are kept under regular review and services users and /or their relatives participate, where appropriate, in the review of the care provided on an annual basis, or when changes occur in line with the commissioning trust's requirements. It was good to note that service users consent was sought in relation to what information could be obtained and held on file from other healthcare professionals as well as highlighting who should be asked to consent on their behalf where a service user was unable to do so.

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

The day care setting held service user meetings on a regular basis which enabled the service users to give their views on what they wanted from attending the day care setting as well as identifying any activities they would like to become involved in. It was positive to note that the day centre staff collaborated with another day care setting to arrange current celebratory events such as World Women's Day and Learning Disability week. Further health and well-being events were also planned for the summer months including an outdoor disco, fitness classes, visits from a rock choir as well as planned outings to the Ulster Transport Museum and local swimming pool.

3.4.6 Quality and Management of the Environment

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

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

3.4.7 Governance and Managerial Oversight

There has been no change in the management of the day care setting since the last inspection. Mr Terry McCrea has been the manager in this day care setting since 7 February 2023. Staff who spoke with the inspector commented positively about the manager and management team and described them as supportive, approachable and able to provide guidance when needed.

There were monitoring arrangements in place in compliance with regulations and standards. A review of the reports of the agency's quality monitoring established that there was engagement by senior staff with service users, service users' relatives, staff and Health and Social Care Trust representatives. The reports included details of a review of service users' care records; accident/incidents; safeguarding matters; staff recruitment and selection; and staffing arrangements including training.

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

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. Records reviewed and discussion with the person in charge indicated that no complaints were recorded since the previous care inspection.

There was a system in place for managing instances where a service user did not attend the day care setting as planned. There was also a system for signing in and out the service users who attend.

The annual quality report was reviewed and noted to include stakeholder feedback.

Whilst there was a system in place whereby staff check the vehicle after each journey to ensure that no service users remain on the transport, advice was given to the manager regarding ensuring that a record is completed to verify when such checks are undertaken. This will be reviewed at a future 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 Mr Terry McCrea, Registered Manager as part of the inspection process and can be found in the main body of the report.



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