



The Regulation and  
Quality Improvement  
Authority

# Inspection Report

**Name of Service: Carlisle Day Centre**

**Provider: Belfast HSC Trust**

**Date of Inspection: 15 August 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>	Belfast HSC Trust (BHSCT)
<b>Responsible Individual/Responsible Person:</b>	Mrs Maureen Edwards
<b>Registered Manager:</b>	Ms Shauna Breslin
<b>Service Profile:</b>	
<p>Carlisle Day Centre is a day care setting located in Belfast. The day care setting provides care and day time activities for service users who have a cognitive impairment. The aim of the service is to provide a person-centred, quality health and social care for individuals living with dementia.</p> <p>The day care setting endeavours to support service users to maintain skills and abilities through meaningful activities with the aim of them experiencing a more fulfilling life.</p>	

## 2.0 Inspection summary

An unannounced inspection was conducted on 15 August 2025 between 9.40 a.m. and 4.20 p.m. by 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 10 March 2023. Additionally, the inspection sought 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, however, improvements were required to ensure the effectiveness and oversight of certain aspects of the day care setting, such as management of training and training compliance.

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.

Service users said that the care and support provided by Carlisle Day Centre was a good experience.

As a result of this inspection the area for improvement previously identified was assessed as having been addressed by the provider. One new area for improvement has been identified. Full details can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

### **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, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors seek the views of those attending, working in, and visiting the day care setting, and 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 and their quality of life**

Feedback received from service users was positive, with one service user summarising their experience of the day care setting by saying, "Everything at the centre is great". Several service users told us how much they value, enjoy and benefit from the company of others whilst attending the day care setting. Service users explained how approachable they find not only staff but also other service users. One individual explained that for them one of the most important things was "All the people, everyone is nice, they always speak to you".

It was reassuring that service users felt there is plenty of staff to look after them and they are always willing to help. Service users told us that they found staff to be "kind" and "helpful". They felt staff took time to speak with them and get to know them as individuals. It was encouraging to note that all service users consulted stated that they felt able to speak with staff within the day care setting about any problems they may be experiencing. It was also good to hear that service users felt safe whilst attending Carlisle Day Centre with staff and "friends" creating this sense of a secure environment.

In relation to activities, service users said, "I like the different activities at the day centre". Feedback from service users indicated a variety of activities, with individuals describing their personal preferences such as going out on bus trips, getting their nails and hair done, music and other entertainment. It was good hearing service users' advising that they "enjoy the craic" and "love coming" to the day care setting.

There was consensus about quality and standard of the food offered by the day care setting, with service users remarking that, “the meals are lovely”, “very good like homemade food” and “good variety”. The Inspector had the opportunity to observe how the staff completed a safety pause to ensure that any recommendations made by a Speech and Language Therapist (SALT) was adhered to and that service users were safeguarded from choking incidents when taking meals. Information relating to service users’ SALT needs was found to be clear and concise, with all staff fully aware as to expectations placed upon them to ensure the safety of service users whilst eating. Service users appeared comfortable and relaxed during lunch.

Observation of staffs’ direct practice and engagement with service users was found to be person-centred and respectful. Staff spoke knowledgeably about dementia and its impact, not just upon the individual diagnosed, but also upon the carer and wider family unit. The staff spoke passionately about their work, and the discussions illustrated compassion and empathy held for the people they support.

Staff advised that they receive regular supervision and feel able to seek additional support as needed outside of this formal process. Staff reported that the training received was good. For those staff expected to act up in the absence of the Registered Manager, they confirmed competency assessments were completed. Staff also confirmed that regular team meetings are scheduled.

Staff were familiar with how accidents and incidents were to be managed and were clear as to the policy and procedures regarding safeguarding issues.

In speaking with staff they were very complimentary about their colleagues and told us that they have an effective, collaborative team in place. They described their colleagues as “thoughtful” and “considerate”.

Staff highly praised the Registered Manager, advising how instrumental she was in establishing a positive work culture amongst the team. We were told how staff felt able to approach the Registered Manager with any concerns and that she was always be very receptive to matters brought to her attention.

Service user representatives told us how important attendance was to their loved one and how they seem “to really enjoy it”. One advised how much happier their father appeared following attendance at the day care setting, whilst another advised how their father questioned why they were leaving at the end of the day stating that he wanted to stay.

We were told that communication between service user representatives and the staff at the day care setting was very good. Several service user representatives told us that they are readily updated and advised of any changes. They also confirmed that protocol is followed in the event of service user nonattendance, with staff contacting them in a timely manner. The staff team were described as “lovely”, “brilliant” and “excellent”.

## 3.4 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 robust systems in place to manage staffing.

Staff said they were satisfied with the staffing levels. It was noted that there was enough staff in the day care setting to respond to the needs of the service users in a timely way, and to provide service users with a choice on how they wished to spend their day.

Observation of the delivery of care, review of documents, feedback from service users and discussions with the manager evidenced that the needs of attendees were known and staff sought to ensure these were met.

Upon appointment, staff were found to have completed a structured orientation and induction into the day care setting to ensure they were competent to carry out the duties of their job.

Records relating to staff training were not held in one centralised location which made it difficult for the manager to have effective oversight of training compliance. A review of the records of mandatory training identified that some training had expired and some information was inaccurate. The Registered Manager provided assurances that some training which had lapsed had been booked. An area for improvement was identified in relation to staff training.

There was some evidence that staff received supervision and staff confirmed that they had been provided with supervision. There was discussion with Registered Manager and Head of Service regarding the type and frequency of supervision scheduled for 2025/26. This will be examined during the next inspection.

### 3.3.2 Care Delivery

Staff were knowledgeable of individual service users' needs, their daily routines, wishes and preferences. Throughout the day, observation confirmed that staff attended safety briefings prior to mealtimes etc. to ensure good communication across the team about changes in service users' needs.

There was a system in place to ensure that the activities offered to service users were varied and geared towards their individual needs and preferences. There was good daily communication to advise service users as to what was planned.

Service users' needs were met through a range of individual and group activities such as therapeutic therapies, physical activity programmes, social outings, arts and crafts, hair dressing, cooking, health awareness and music sessions.

Staff interactions with service users were friendly and supportive.

Staff were observed to be prompt in recognising service users' needs as well as actively supporting engagement and participation. It was positive to observe that service users appeared comfortable in their environment and in their interactions with peers and staff alike.

As referenced above, there was evidence of good nutrition and a positive dining experience within the day care setting. Service users were provided choice, with personalised nutritional needs considered. This included those on specific diets and/or with SALT recommendations in place. It was also positive to note that the preferences of service users were respected; this was evident with one service user being provided with adequate personal space away from others within the main dining room, which was facilitated.

### 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.

Review of records identified that service user consent was sought in relation to the staff contacting/requesting information from other healthcare professionals on their behalf. Service users were given the choice as to whether or not they wanted their photograph taken and used in any organisational promotional material or social media.

Service users' care records were held confidentially in line with data protection regulations.

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 restrictive practices applied by the service were described within the day care setting's statement of purpose. In addition to this, there was an effort to ensure that restrictive practices were evident within individual service users care and risk plans, however, the internal locked doors restricting access to particular areas within the building were not included. This was discussed with the Registered Manager and advice given to review practice in this area to ensure consistency across all records. This will be reviewed during the next inspection.

### 3.3.4 Quality and Management of the Environment

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

There was evidence that systems and processes were in place to manage infection prevention and control, which included policies and procedures and regular monitoring of the environment and staff practice to ensure compliance.

A fire risk assessment had been completed on 7 January 2025; the recommendations within the fire risk assessment had been actioned.

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.

### 3.3.5 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Ms Shauna Breslin has been the manager in this day care setting since 13 April 2017.

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

Review of a sample of records evidenced that a robust system for reviewing the quality of care and staff practices was in place. 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. Some small details contained within the quality monitoring reports were brought to the attention of the Head of Service and Registered Manager to address going forward. This will be reviewed at the next inspection.

There was a process in place to manage any complaints.

Review of incident records identified that they were managed appropriately. There was evidence that incidents were audited on a regular basis, to establish any patterns/trends.

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

There was a protocol in place for staff to follow where service users did not attend as planned. There was also a clear protocol in place to check the bus transport after every journey to and from the day care setting, to ensure that every service user had safely exited the bus and evidence that this had been followed.

There was evidence that the manager responded to any concerns, raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services provided within the day care setting.

## 4.0 Quality Improvement Plan/Areas for Improvement

One area for improvement has been identified where action is required to ensure compliance with the Standards.

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	0	1

Areas for improvement and details of the Quality Improvement Plan were discussed with Ms Shauna Breslin, Registered Manager, and Head of Service as part of the inspection process. The timescales for completion commence from the date of inspection.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Day Care Settings Minimum Standards August (revised) 2021</b>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 21.3</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediately from date of inspection</p>	<p>The Registered Person shall ensure sufficient oversight is maintained regarding training of employees of the day care setting. Records retained will evidence adequate planning to ensure mandatory training compliance is maintained.</p> <p>Ref: 3.3.1</p>
	<p><b>Response by registered person detailing the actions taken:</b></p> <p>The Registered Manager has implemented a new training audit process which will be completed monthly. This will ensure any training expiring in the coming months (3 month time period) is addressed in supervision.</p> <p>The Registered Manager has adapted the newly designed training matrix specifically to the day centre which provides a traffic light system indicating when staff training is: in date, due to expire or expired and this matrix will remain under constant review by the Manager. The Assistant Service Manger will review this training matrix in A) monthly governance meeting with the manager B) in formal supervision when addressing this QIP and associated action plan. The Assistant Service Manager will then report to the Service Manager any outstanding issues pertaining to training in A) monthly governance meeting B) monthly supervision.</p>

***\*Please ensure this QIP is completed in full and uploaded via Web Portal\****



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