



The Regulation and
Quality Improvement
Authority

Inspection Report

Name of Service: Mica Centre
Provider: Belfast HSC Trust
Date of Inspection: 18 August 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 HSC Trust
Responsible Person:	Mrs Maureen Edwards
Registered Manager:	Ms Maria O'Hagan
Service Profile – This is a Day Care Setting with 40 places. The day care setting provides care and day time activities for adults living with a learning disability who may also have a physical disability, sensory disability, autism, mental health needs, behaviours which challenge and/or dementia.	

2.0 Inspection summary

An unannounced inspection was undertaken on 18 August 2025 between 9.30 am and 4.05 pm by a care Inspector.

The last care inspection of the day care setting was undertaken on 23 September 2024 by a care inspector. No areas for improvement were identified. This inspection was undertaken to evidence how the day care setting is performing in relation to the regulations and standards; and to determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

Service users said that the care and support provided by the Mica Centre was a good experience. Service users were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Refer to Section 3.2 for more details.

Good practice was identified in relation to service user involvement, staff advocacy, care records and activity provision. There were good governance arrangements in place.

The inspection established that safe, effective and compassionate care was delivered to service users and that the day care setting was well led. As a result of this inspection 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 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, 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 healthcare professionals to seek their views of attending and working within the day care setting.

Service users indicated that they were happy with the care and support provided at the day care setting. Comments made to the inspector by those attending included the following statements: "I like it, it is good" and "I like to cook and play games". Returned questionnaires indicated that the respondents were satisfied that the service provided safe, compassionate and effective care and that the service was well led.

Relatives who spoke with the inspector indicated that they were happy with the care provided to their loved one and that they could approach the staff with any concerns they had if they needed to. Comments made by those who spoke with the inspector included the following statements: "My relative loves it" and, "the staff are brilliant".

Staff who spoke with the inspector spoke positively about the care delivery, training and management support in the day care setting. Some staff indicated that transport reduced during covid had not been reinstated and that this had reduced the amount of outings service users could avail of through the day centre. This was discussed with the manager who confirmed that provision of transport continues to be raised and advocated for at senior level on behalf of all service users. Assurances were given by the manager that outings within the local community take place on a weekly basis and planning for this is done with service users through their service user meetings. The manager also advised that staff have been proactive

in supporting service users to access public transport which enables them to engage in activities of their choosing in their local community.

Healthcare professionals contacted for feedback on the service indicated that they were satisfied with the care provided to service users and that the day care setting was a welcoming and friendly environment with staff who engaged well and acted as good role models for service users.

4.0 Inspection findings

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. 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.

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. 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.

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 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 the correct documentation confirming the DoLS.

4.3 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. There was evidence of robust systems in place to manage staffing.

Observation of the delivery of care evidenced that service users' needs were met by the number and skills of the staff on duty. Staff said they felt well supported in their role, that there was good teamwork and that the manager was approachable and supportive. There were no volunteers deployed within the day care setting.

A review of the day care setting's staff recruitment records of employees recruited since the last inspection 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) or the Nursing and Midwifery Council (NMC) or any other relevant regulatory body. There was a system in place for the monitoring of professional registrations by the manager.

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. Written records were retained regarding the person's capability and competency in relation to their job role.

Staff were provided with training appropriate to the requirements of their role which was recorded on a colour coded matrix. On review of this however, it was evident that one staff member had to complete training in respect of Adult Safeguarding, Fire safety, Manual Handling and medication. The manager provided reasons for same and it was evident they had plans in place to action appropriately. The manager further advised of efforts to arrange Basic Life Support/ First Aid training. This will be reviewed at the next care inspection.

4.4 Dysphagia Management

A number of service users had been assessed by a Speech and Language Therapist (SALT) who put in place recommendations regarding the consistency of their food and fluids. 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.

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.

4.5 Care Records and Service User Input

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 records evidenced multi-disciplinary working and regular communication with relevant professionals from the commencement of the day care placement. Care plans contained details about their likes and dislikes and the level of support they may require. Care and support plans 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.

It was noted that a number of the service user currently required the use of specialised equipment, such as walking aids and wheelchairs. A review of a selection of care records identified that moving and handling risk assessments and care plans were up to date. Staff were also aware of how to source training should it be required.

It was positive to note that the day care setting had service user meetings on a regular basis which enabled the service users to give their views on what activities they would like participate in whilst attending the day care setting as well as identifying any issues that they were concerned about. Some activities available include going to the gym, Fitness Freddie, music, cooking and swimming. A review of the minutes of these meetings noted that the issue of transport provision raised by a service user was not noted as a follow up action in a subsequent meeting. The manager advised that this was an oversight and endeavoured to ensure that updates would be given to service users in respect of matters raised and that these would be carried forward as part of the agenda for future service user meetings. This will aid in ensuring service users feel listened to and empowered as well as encouraging proactive engagement with regards to how the service could be improved.

4.6 Quality and Management of the Environment

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

There was evidence that fire safety checks had been completed as required. Staff had completed training in 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.

4.7 Governance and Managerial Oversight

There were monthly monitoring arrangements in place in compliance with the regulations and standards and a review of the reports of established that there was engagement with service users, service users' relatives, 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.

The Annual Quality Report was reviewed and was satisfactory.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. The manager advised that no complaints had been received since the last 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 and the manager advised that they were currently working on implementing procedures for staff to check the vehicle after each journey to ensure that no service users remain on the transport.

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 Maria O'Hagan, Registered Manager, as part of the inspection process and can be found in the main body of the report.



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