



The Regulation and
Quality Improvement
Authority

Inspection Report

Name of Service: GlenOaks Day Centre
Provider: Western Health and Social Care Trust
Date of Inspection: 1 July 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:	Western HSC Trust
Responsible Person:	Neil Guckian
Registered Manager:	Dale Connolly
Service Profile:	
<p>GlenOaks Day Centre is a day care setting that is registered to provide care and day time activities for up to 35 service users living with physical and mental health difficulties. The service users' care is commissioned by the Western Health and Social Care Trust (WHSCT) and the Northern Health and Social Care Trust (NHSCT).</p>	

2.0 Inspection summary

An unannounced inspection took place on 1 July 2025, between 9.45 am. and 5.20 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 23 March 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 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 care records relating to Speech and Language Therapy (SALT) Assessments.

As a result of this inspection the areas for improvement previously identified were assessed as having been addressed by the provider. Details, including the new area for improvement identified, can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

It was evident 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.

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 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 process inspectors will seek the views of those working in, attending and visiting 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 and their quality of life

As part of the inspection process, we spoke to service users and staff members to seek their views of the care and support provided by the day care setting.

Service users indicated that they enjoyed their experience of attending GlenOaks Day Centre. Positive interactions were observed between the service users and staff. One service user told us that they enjoy attending the day centre and that they enjoy the activities provided.

Staff spoke positively in regard to the care delivered and management support in the day care setting. Comments included: "The manager is brilliant, he is approachable and fair, and has an open door policy for staff and service users. "The communication is good. We have a Safety Huddle in the morning and lunchtime, where we share relevant information. The service is person centred."

The information provided indicated that there were no concerns in relation to the day care setting.

3.3 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 systems in place to manage staffing.

It was identified that one staff member currently employed within the day care setting had transferred internally without an enhanced AccessNI check having been completed. There was discussion with management about the need for the provider organisation to be fully assured they have a robust system for criminal checks to be completed for staff. RQIA is aware of ongoing discussion between the Department of Health and Health and Social Care (HSC) Trusts in respect of this, and will keep this matter under review.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC). There was a robust system in place for professional registrations to be monitored by the manager.

Records of all staff training were retained and the manager maintained oversight of the training matrix to ensure compliance. This training included Deprivation of Liberty Safeguards (DoLS), Moving and Handling, Medication Management, Dysphagia and Adult Safeguarding. Records of staff training were noted to be mostly up to date. One staff required adult safeguarding refresher training. A date for this training had been identified by the manager.

There were no volunteers deployed within the day care setting.

Staff said they felt well supported in their role. Observation of the delivery of care evidenced that service users' needs were met by the number and skills of the staff on duty.

3.3.2 Care Delivery

There was a daily 'safety huddle', which included information about any changes to the service users care, that the staff needed to assist them in their roles.

Staff were observed to be prompt in recognising service users' needs. Staff were skilled in communicating with service users; they were respectful, understanding and sensitive.

Service users' needs were met through a range of individual and group activities.

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. Review of records and discussion with the manager evidenced that there were systems in place to manage service users' nutrition and mealtime experience. However, it was identified that the care records completed by staff did not fully reflect the SALT assessment. An area for improvement has been identified. Discussions with senior management are ongoing in respect of this.

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.

Care records were person centred, 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 user's 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.

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.

Service users care records were stored securely and accessible to authorised personnel in accordance with data protection regulations.

3.3.4 The system in place for identifying and addressing risks

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. They could also describe their role in relation to reporting poor practice.

The day care setting retained records of any referrals made to the HSC Trust in relation to adult safeguarding. A review of records and discussions with the manager indicated that they had been managed appropriately.

The manager was aware that RQIA must be informed of any safeguarding incident that is reported to the Police Service of Northern Ireland (PSNI).

3.3.5 Quality of Management Systems

Dale Connolly has been the manager in this day care setting since 21 February 2024.

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

Review of a sample of records evidenced that a system for reviewing the quality of care and staff practices was in place.

There were monitoring arrangements in place in compliance with Regulations and Standards. A review of the reports of the day care setting's quality monitoring 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 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. It was noted that no complaints had been received since the last inspection.

There was a system in place for managing incidents where a service user did not attend the day care setting as planned. This included a signing in and signing out of service users. The manager had also put in place a system for the transport staff to check the bus at the end of each trip, to ensure that there are no service users remaining on the bus.

3.3.6 Quality and Management of the Environment

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.

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

4.0 Quality Improvement Plan/Areas for Improvement

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

	Regulations	Standards
Total number of Areas for Improvement	0	1

The area for improvement and details of the Quality Improvement Plan were discussed with Dale Connolly, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with the Day Care Settings Minimum Standards August (revised) 2021	
<p>Area for improvement 1</p> <p>Ref: Standard 4</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing from the date of inspection</p>	<p>The registered person shall ensure that each service user has an up to date assessment of his or her needs with regard to the service provided, and which is kept up to date to accurately reflect at all times the needs of the service user.</p> <p>Ref: 3.3.2</p> <p>Response by registered person detailing the actions taken:</p> <p>In order to manage this QIP appropriately, the registered Manager has ensured that each Service User has an up to date assessment of his/her needs in regards to all services provided, in particular Speech & Language Therapy (SLT) recommendations.</p> <p>All documentation previously completed by Senior Day Care staff in relation to SLT recommendations have been archived and replaced with up to date most recent and relevant SLT format (REDS) by a qualified Speech & Lanaguage Therapist, which are now on file and operational both in hard copy file and also in Epic(Encompass).</p> <p>The Day Centre manager will ensure that SALT plans and interventions, are provided by SALT Department, are signed by the therapist and held on each member's file with review dates included. This practice will be reviewed as part of the monthly monitoring by the Lead nurse for the Division going forward as part of a file audit. The Community Services Manager will have oversight through monthly supervision with the Day Centre Manager to ensure that all assessments are up to date with the most up to date held in file.</p> <p>This learning regarding practice in GlenOaks Day Centre has been shared with the Senior Management team and the Assistant Director for the Governance of Quality, Safety & Experience of Service Users/Families(Social Work/Social Care).</p>

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