

Inspection Report

Name of Service: Autism Initiatives Newcastle Resource Centre

Provider: Autism Initiatives NI

Date of Inspection: 6 October 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:	Autism Initiatives NI
Responsible Individual:	Ms. Adele Leighton
Registered Manager:	Mrs. Leone Campbell
Service Profile Autism Initiatives, Newcastle Resource Centre is a day care setting with a maximum of 20 places. It provides care and day time activities for adults with autism spectrum condition and associated conditions such as learning disability, behaviours which challenge, physical disability and sensory needs. Services are commissioned by the South Eastern Health and Social Care Trust (SEHSCT).	

2.0 Inspection summary

An unannounced inspection took place on 6 October 2025, between 10.15 pm and 1.45 pm. It was carried out by a care Inspector.

The last care inspection of the day care setting was undertaken on 26 November 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.

The inspection established that care delivery was safe and that effective and compassionate care was delivered to service users. One area for improvement was identified in relation to fire safety.

Service users said that the care and support provided by the day care setting 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.

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 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, working 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

We spoke to a range of service users and staff to seek their views of attending, visiting and working within this day care setting.

Service users told us how much they enjoyed coming to the day care setting and that the staff made them feel safe.

Staff commended the good team working in place and told us that they were very happy with the care and support offered.

The information provided indicated that those spoken with had no concerns in relation to the day care setting.

3.3 Inspection findings

3.3.1 Staffing Arrangements

There was a process in place to ensure that recruitment was managed appropriately; this ensured that all pre-employment checks, including criminal record checks (AccessNI), are completed and verified before staff members commenced employment and have 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.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken. One member of staff told us that 'my organisation always offers training and opportunities to develop yourself and to push yourself'.

3.3.2 Care Delivery

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 commended the number of activities on offer and highlighted the friendly atmosphere within the day care setting. Staff fed back that they felt that 'we listen to service users and their opinions and choices are met and respected'.

It was 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 care setting and any activities they would like to become involved in.

The manager reported that none of the service users currently required the use of specialised equipment for transfers. They were aware how to source training in this regard for staff should it be required in the future.

3.3.3 Management of Care Records

Service users care records were held confidentially.

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. A central register was in place to enable tracking of any DoLS due for review.

There was a policy in place for the use of restrictive interventions and a register was in place which was reviewed and updated regularly. Any restrictive practices were reviewed alongside the support plan, care review and subject to multidisciplinary review.

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. A specific individual was identified as the day care setting's ASC. It was established that good systems and processes were in place to manage the safeguarding and protection of adults at risk of harm. The annual safeguarding position report had been completed.

The day care setting provided transport to some service user who attend. Whilst there were risk assessments in place for each of these service users in regard to their use of the transport, these were noted to be lacking in detail. More comprehensive risk assessments were received by the inspector after the inspection.

3.3.4 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Mrs. Leone Campbell has been the manager in this day care setting since 27 June 2022. Staff told us 'I have no issues about reporting any concerns to my manager or my area manager' and that 'I couldn't ask for a better manager'.

It was noted that there was no record in place of the training and competencies completed by the staff member required to take charge of the day care setting in the absence of the manager. This was sent to RQIA after the inspection.

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, 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.

The manager was aware what incidents required to be notified to RQIA. No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

The day care setting's registration certificate was up to date and displayed appropriately along with current certificates of public and employers' liability insurance.

Whilst no complaints had been received by the day care setting since the last inspection, it was noted that there was no system in place whereby detailed information was recorded relating to any previous complaint. The manager agreed to implement this and this will be reviewed at the next inspection. Advice was also given in relation to ensuring that the day care setting's Complaints Policy was readily available for staff to reference. It was positive to note that the day care setting had received a range of compliments since the last inspection.

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. The walls were decorated with art work undertaken by service users as part of the activity programme provided.

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.

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

Records examined identified that a number of safety checks and audits had been undertaken. These included medication and fire audits. In relation to fire alarm tests, it was noted that not all staff had been present at at least one fire evacuation drill in the previous year. This has been identified as an area for improvement. Fire risk assessments for the setting were available for the inspection and had been completed on 25 August 2025. All staff had completed fire training. During the inspection fire exits were observed to be clear of clutter and obstructions.

4.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with Regulations and Standards.

	Regulations	Standards
Total number of Areas for Improvement	0	1

Areas for improvement and details of the Quality Improvement Plan were discussed with the 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 Setting Minimum Standards August (revised) 2021	
<p>Area for improvement 1</p> <p>Ref: Standard 28.6</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing from date of inspection</p>	<p>The Registered Person shall ensure all staff attend a fire evacuation drill at least once a year</p> <p>Ref: 3.3.5</p>
	<p>Response by registered person detailing the actions taken: Fire drill was completed on 21.10.2025 to ensure all staff were included. Schedules are in place to ensure future fire drills include all staff at least once a year.</p>

Please ensure this document is completed in full and returned via the Web Portal



The Regulation and Quality Improvement Authority

James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA



Tel: 028 9536 1111



Email: info@rqia.org.uk



Web: www.rqia.org.uk



Twitter: @RQIANews