

Inspection Report

Name of Service: Islandview Day Centre

Provider: Southern Health and Social Care Trust
(SHSCT)

Date of Inspection: 26 June 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:	Southern Health and Social Care Trust (SHSCT)
Responsible Individual/Responsible Person:	Mr Steve Spoerry (Application pending)
Registered Manager:	Mr Melvyn Purdy (Acting)
Service Profile Islandview Day Centre provides a service to 13 adults living with a learning disability within the Coalisland catchment area.	

2.0 Inspection summary

An unannounced inspection took place on 26 June 2025, between 9.30 am and 5.20 pm. The inspection was conducted 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 22 August 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 fire evacuation drills, fire risk assessment, annual quality review report, service user questionnaires and staff supervision.

It was evident that staff promoted the dignity, independence and well-being of service users.

Service users were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Service users said that they enjoyed coming to the day care setting. Refer to Section 3.2 for more details.

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

We would like to thank the manager, service users, visiting professionals and staff team for their support and co-operation during the 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 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 attending and working within 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.

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 and their quality of life

We spoke with a number of service users and staff to seek their views of attending and working within the day care setting. We also spoke with a number of visiting professionals.

Service users spoke positively about their experience of attending the day care setting; they said they enjoyed attending the day care setting and that the staff were great. Two comments included the following statements; "I love it here. I love going to the leisure centre and I have good friends here." and "The staff are nice and I like it here". Observations of staff interacting with service users was noted to be person centred, respectful and caring.

Visiting professionals spoken with during the inspection commented positively about the provision of care and support provided by the day care setting and that service user's needs were met safely. Comments included "Staff are very prompt about reporting concerns to speech and language and follow the guidelines provided." and "Staff are fantastic."

Staff told us that they were satisfied that the care and support was safe, effective, compassionate and well led. Staff spoke very positively in relation to care delivery in the day care setting. One told us that they enjoyed working in the day care setting and that service users were involved in the running of the day care setting and were well looked after. Staff indicated that they were very well supported by the manager and that the training provided was good.

Returned service users' questionnaires indicated that the respondents were very satisfied with the care and support provided.

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 (recruitment and selection, induction and training)

The manager advised that staff recruitment was completed in conjunction with the organisation's Human Resources (HR) department and managed in accordance with the Regulations and Minimum Standards, before staff member's commenced employment and had direct engagement with service users. The manager further advised that there were no newly recruited staff to the day care setting and that the staff had all worked in the day care setting for a number of years.

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); there was a system in place for professional registrations, to be monitored by the manager and a record of checks retained. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken.

Staff consulted spoke positively about the training they receive and confirmed that they received sufficient training to enable them to fulfil the duties and responsibilities of their role and that training was of a good standard. Review of a sample of staff training records concluded staff had received mandatory and other training relevant to their roles and responsibilities since the previous care inspection such as infection prevention and control, first aid and moving and handling. It was positive to note that the day care setting provided training in regard to falls awareness and safety intervention.

There was evidence of effective systems in place to manage staffing. Staff said there was good teamwork and that they felt well supported in their role by the manager.

Staff said that there were sufficient staff to meet the needs of the service users. It was evident that staff had a good understanding of the needs, likes and dislikes of individual service users. Regular staff meetings were held and minutes maintained of the meetings for staff unable to attend, to read for information sharing.

3.3.2 Care Delivery

There was a daily meeting at the beginning of each shift, which included information about any changes to the service users' care, that the staff needed to assist them in their roles.

There was a system in place to ensure that the activities offered to service users were varied and tailored towards their individual needs and preferences. Service users are supported to access activities of their own choice. A review of the activities programme in the day care setting evidenced that it was varied and included boccia, arts and crafts, bingo, games and armchair exercises. Observations of service users taking part in activities on the day of inspection found that participation was enthusiastic.

Service users confirmed that their views and opinions are taken into account in all matters affecting them on a day to day basis and during regular service users' meetings.

Staff interactions with service users were observed to be polite, warm and supportive and the atmosphere was relaxed, pleasant and friendly. Staff were knowledgeable of individual service users' needs, their daily routine, wishes and preferences.

Service user meetings were held on a regular basis which enabled the staff to keep service users updated on any issues arising that may affect them. Some matters discussed included activities, transport arrangements and meals.

3.3.3 Management of Care Records

Care records were person centred and underpinned by a human rights approach, well maintained, regularly reviewed and updated to ensure they continued to meet the service users' needs. Staff recorded regular evaluations about the care and support provided. Service users, where possible, were involved in planning their own care and the details of care plans were shared with service users' relatives, if this was appropriate.

Care plans reflected a good understanding of service user's needs, including relevant assessments of service user's communication support and sensory needs.

Records pertaining to consent were available.

Service users care records were held confidentially.

3.3.4 Quality of Management Systems

Mr Melvyn Purdy has been the acting manager in this day care setting since 5 March 2024; RQIA will keep this matter under review. Those consulted with commented positively about the manager and described her as supportive, empathetic and approachable. It was positive to note that the manager spoke very highly of the staff and this was reciprocated.

Review of a sample of records evidenced that a robust system for reviewing the quality of care, other services and staff practices was in place. 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 and the annual service user quality satisfaction questionnaire had not been completed. Areas for improvement have been identified.

The day care setting's governance arrangements for the management of accidents/incidents were reviewed. Review confirmed that an incident/accident reporting policy and system was in place. Staff are required to record any incidents and accidents in a centralised electronic record, which is then reviewed and audited by the manager and the SHSCT governance department. A review of a sample of incident records evidenced these were managed appropriately.

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. There was an individual within the organisation's senior management team who was identified as the appointed ASC for the day care setting.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. A review of the complaints record and discussion with the manager, evidenced that no complaints had been recorded since the previous inspection. Discussion with staff confirmed that they knew how to receive and respond to complaints sensitively and were aware of their responsibility to report all complaints to the manager or the person in charge.

Staff demonstrated an awareness of their role, responsibilities and knowledge of lines of accountability and knew when and who to discuss concerns with. All staff consulted with described an open door policy with the manager and that they were confident that any concerns or suggestions made would be listened to and addressed.

Discussions with the manager and staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. As noted in section 3.3.1, staff spoken with during the inspection confirmed the availability of continuous update training. In addition, staff confirmed the availability of supervision/appraisal processes and staff meetings which they described in positive terms and found beneficial.

A review of staff supervision records evidenced that one staff member did not have supervision completed on a quarterly basis. An area for improvement has been identified.

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. It was positive to note that the décor of the day care setting included service users' art work.

There was evidence that fire safety checks had been completed as required. Throughout the inspection fire doors were observed to be unobstructed. Staff had completed training in regard to fire safety. A fire evacuation drill had taken place on 28 February 2025. However, staff and service users who participated in the fire evacuation had not been recorded. Additionally, staff from other SHSCT day care settings who frequently covered shifts within Islandview Day Centre, had not attended a fire evacuation drill. An area for improvement made in the previous inspection report has not been satisfactorily addressed and is stated for a second time.

The day care setting's fire risk assessment, dated 12 August 2024, was reviewed. A significant finding had not been actioned. An area for improvement has been identified.

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

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	3*	2

* the total number of areas for improvement includes one that has been stated for a second time.

Areas for improvement and details of the Quality Improvement Plan were discussed with Mr Melvyn Purdy, 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 Regulations (Northern Ireland) 2007	
<p>Area for improvement 1</p> <p>Ref: Regulation 26 (4)(f)</p> <p>Stated: Second time</p> <p>To be completed by: Immediate and ongoing from the date of inspection</p>	<p>The registered person shall ensure that records pertaining to fire drills are retained, to evidence the names of all the staff and service users in attendance.</p> <p>Ref: 3.3.5</p> <p>Response by registered person detailing the actions taken: The registered person can confirm that records of fire evacuation drills now evidences the names of all staff and service users in attendance. This includes any staff rostered from other centres. A fire safety induction is completed with all staff new to working in Islandview Day Centre.</p>
<p>Area for improvement 2</p> <p>Ref: Regulation 26 (4)(a)</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 provide details of the action taken to address the outstanding significant finding highlighted in the fire risk assessment dated 12 August 2024.</p> <p>Ref: 3.3.5</p> <p>Response by registered person detailing the actions taken: The registered person can confirm that a temporary key lock box has been installed in each of the adjoining day care premises to ensure access to the fire panel in an emergency. The Trust Estates Department have commissioned the installation of the repeat panel as outlined in the facility fire risk assessment.</p>

<p>Area for improvement 3</p> <p>Ref: Regulation 17</p> <p>Stated: First time</p> <p>To be completed by: 31 August 2025</p>	<p>The registered person shall ensure that the annual quality review report is completed including matters set out in Schedule 3.</p> <p>Ref: 3.3.4</p> <hr/> <p>Response by registered person detailing the actions taken: The registered person has given assurance that the 2024-2025 Annual Quality Review Report will be completed and shared with RQIA by 31st August 2025.</p>
<p>Action required to ensure compliance with the Day Care Settings Minimum Standards August (revised) 2021</p>	
<p>Area for improvement 1</p> <p>Ref: Standard 8.4, 8.5</p> <p>Stated: First time</p> <p>To be completed by: 31 August 2025</p>	<p>The registered person shall ensure that service users' views and opinions about the running of the service are sought on a formal basis at least once a year. A report is prepared that identifies the methods used to obtain the views and opinions of service user, the comments made and issues raised by service users and any actions to be taken in response. A copy of this report should be made available to service users.</p> <p>Ref: 3.3.4</p> <hr/> <p>Response by registered person detailing the actions taken: Service user views and opinions on the running of the service have been formally sought from current users. Any issues raised will be reviewed and where necessary actions taken which will result in service improvements. The feedback and any subsequent actions will be included in the 2024-2025 Annual Quality Review Report which will be shared with RQIA by 31st August 2025.</p>
<p>Area for improvement 2</p> <p>Ref: Standard 22.2</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 staff have recorded individual, formal supervision sessions according to the day care setting's procedures and no less than every three months.</p> <p>Ref: 3.3.4</p> <hr/> <p>Response by registered person detailing the actions taken: The registered person will ensure that all staff have a recorded individual formal supervision completed no less than every 3 months in line with day care setting's procedures.</p>

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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