

Inspection Report

Name of Service: Enler Day Centre

Provider: Belfast HSC Trust

Date of Inspection: 22 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:	Belfast HSC Trust (BHSCT)
Responsible Individual/Responsible Person:	Mrs Maureen Edwards
Registered Manager:	Miss Carrie McAllister
Service Profile:	
This is a Day Care Setting that provides care and support, between Monday to Friday, for adults who are aged 65 years. Individuals who attend may have a diagnosis of dementia and / or a mental health diagnosis or a physical disability.	

2.0 Inspection summary

An unannounced inspection was conducted on 22 July 2025 between 9.25 a.m. and 4.35 p.m. by care Inspector.

The inspection examined the agency's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing, Service user involvement and Dysphagia management was also examined.

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 31 August 2023; the inspection also sought to determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

The inspection found that safe, effective and compassionate care was delivered to service users and that the day care setting was well led. Details and examples of the inspection findings can be found in the main body of the report.

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 Enler Day Centre was a good experience. Refer to Section 3.2 for more details.

As a result of this inspection all of the areas for improvement identified during the previous inspection were assessed as having been addressed by the provider and no new areas for improvement were identified. Details can be found in the main body of this 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 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

Service users told us that Enler Day Centre "has been a lifeline", enabling them to actively engage with peers and in the local community. They spoke about how the service alleviates loneliness and the sense of isolation, advising about positive relationships created with others and staff alike.

The service users stated that they felt listened to and respected as individuals. They provided examples such as alternative meal provision in response to their individual nutritional or dietary needs, or where there were choking risks. Several service users were highly complimentary about the quality of the food offered by the service and those staff working within the kitchen.

In relation to transportation to and from the day care setting, all service users expressed satisfaction, describing the drivers as being very considerate and 'going over and above'.

Service users explained that their opinions were actively sought in relation to the planned programme of activities, and expressed satisfaction with the activities offered which included exercise sessions, art classes, quizzes, reminiscence work, day trips and local outings.

Service users described staff as "kind" and stated they felt staff did not always get the recognition they deserved. Service users stated they felt able to discuss concerns which may be impacting upon them, either relating to their home life or their experience within the Enler Day Centre. They stated they felt confidentiality was maintained.

Service user representatives consulted with spoke very highly about the staff team within Enler Day Centre as well as the service they provide. The staff team was described as “welcoming”, “friendly” and “chatty”. Representatives advised how meaningful it was that the staff knew them by name, took an interest in their experience as carers and willingly offered support whenever they could. We were told how the staff identified concerns early, sought consent, made relevant referrals, liaised with allied professionals and kept carers updated. They advised how this alleviated pressure upon them.

Service user representatives spoke positively about communication between them and Enler Day Centre. They stated that communication was “effective”, “timely” and “relevant”. We were told that regular communications were received in relation to transportation, activities and information shared regarding complaints procedures.

Activities organised by Enler Day Centre were described as “inclusive”. We were told how one individual “loves the food, loves the activities and loves getting out into the community”. Several representatives advised how much the service users loved attending, whilst one explained how attendance permitted them to feel like a “valuable member of the community” and created “a sense of belonging”. One representative explained how the service has “exceeded how I thought they would perform”.

HSC representatives also told us how “friendly”, “accommodating” and “professional” the staff within Enler Day Centre were. We were told how they found staff always willing to help. They advised how matters were managed in a timely manner and that they were knowledgeable as to safeguarding procedures. We were told how they felt the service was very well managed by both the Manager and Deputy Manager.

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 robust systems in place to manage staffing.

The staff duty rota was clear and easy to follow denoting employees’ designation and hours of work scheduled. The rota was prepared in advance allowing time to acquire cover when needed.

Staff said there was good team work and that they felt well supported in their role and that 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 and discussions with service users and the manager evidenced that the needs of attendees were known and staff sought to ensure these were met. The interactions observed between service users and staff was observed to be caring and respectful.

Review of the agency's staff recruitment records 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 Northern Ireland Social Care Council (NISCC) or any other relevant regulatory body; there was a system in place for professional registrations to be monitored by the manager.

Newly appointed staff had completed a structured orientation and induction to ensure they were competent to carry out the duties of their job.

Records of all staff training were retained and the manager maintained oversight of the training matrix to ensure compliance. This training included adult safeguarding, dysphagia and manual handling at a level appropriate to job roles. It was positive to note that training was provided in relation to medical devices and included the use and storage of medical gases.

There was evidence that all staff received regular supervision and there were clear procedures in place for appraising staff performance.

3.3.2 Care Delivery

There was a daily handover 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. The manager and Team Leaders also completed a Management Summary on a regular basis to ensure that important information was communicated effectively amongst the management team. Regular staff meetings were held and minutes retained so that any staff unable to attend could read.

Staff were knowledgeable of individual service users' needs, their daily routines, wishes and preferences.

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. On a day to day basis there was good communication to advise service users as to what was planned for the week ahead.

Service users' needs were met through a range of individual and group activities such as physical activity programmes, quizzes, arts and crafts, hair dressing, reminiscence and gardening as well as community outings.

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.

Examination of care records and discussion with the Manager confirmed that the risk of falls was well managed and referrals were made to other healthcare professionals as needed. Where individuals had specific mobility needs that required use of specialised aids and/or equipment, details of manual handling assessment were evident in service user plans. The equipment itself was in good condition with records maintained of regular servicing and maintenance.

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 modified diets. Service users were provided choice, with personalised nutritional needs considered. This included those on specific diets and/or with speech and language therapy recommendations in place. It was also positive to note that the preferences of service users were respected; this was evident with one service user not wishing to take meals in the main dining room, and this 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; this also included their consent for external professionals, including RQIA, to access their care records. 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.

3.3.4 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. Art work by service users as part of the activity programme was displayed throughout the centre. Photographic displays also evidenced engagement in activities.

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 07 March 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 a change in the management of the day care setting since the last inspection. Miss Carrie McAllister has been the manager in this day care setting since 18 February 2024.

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. The reports of these visits were completed in detail.

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. It was good to note that these were reviewed in detail as part of the monthly quality monitoring process.

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

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Carrie McAllister, Registered Manager, as part of the inspection process and can be found in the main body of the report.



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