

Inspection Report

Name of Service: Magherafelt Day Centre

Provider: Northern Health and Social Care Trust (NHSCT)

Date of Inspection: 29 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:	Northern Health and Social Care Trust (NHSCT)
Responsible Individual:	Ms Jennifer Welsh
Registered Manager:	Ms Donna O'Neill
Service Profile: Magherafelt Day Centre is a day care setting with accommodation to provide 30 places for older people over the age of 65, who may also be frail, have a physical disability, learning disability, sensory impairment, mental health need, and/or dementia. The day care setting is open Monday to Friday and is managed by the NHSCT.	

2.0 Inspection summary

An unannounced inspection took place on 29 August 2025, between 9.25 am and 1.15 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 19 September 2024; 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. Details and examples of the inspection findings can be found in the main body of the report.

Service users said that the care and support provided by Magherafelt Day Centre was a good experience. Refer to Section 3.2 for more details.

As a result of this inspection three of the four areas for improvement previously identified were assessed as having been addressed by the provider. RQIA is aware of ongoing discussion between the Department of Health and HSC Trusts in respect of the need for all new staff within regulated services to have an AccessNI check undertaken regardless of whether they are already working in the NHSCT. Therefore an area for improvement previously identified has been carried forward to the next inspection. Full details can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

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 (QIP), registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors 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

Through active listening, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

Service users told us that they loved coming to the day care setting and described attending the day care setting in positive terms. All those spoken with appeared to be very happy and there was a relaxed atmosphere on the day of the inspection, where staff and service users interacted well together. Service users described that staff as being 'very helpful', 'wonderful', 'very attentive' 'professional' and 'good fun'; Service users described how the support provided helps them feel 'happy' and 'safe'. One response stated that 'the welcome of the staff, their kindness and attention to each person is amazing'.

Staff told us that they loved working in the day care setting and that the service users' safety was always their priority.

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 were good systems in place to manage staffing. There were enough staff on duty to support service users. Staff said there was good teamwork and that they felt well supported in their role. No concerns were raised in relation to the staffing levels and the staff were seen assisting service users in a caring and compassionate manner.

It was identified that a staff member currently employed within the day care setting commenced work without enhanced AccessNI checks having been completed. It was explained that this was due to the individual having had an AccessNI check undertaken for another role within the NHSCT. RQIA is aware of ongoing discussion between the Department of Health and HSC Trusts in respect of this matter. An area for improvement previously identified has been carried forward to the next inspection.

There was a process in place to ensure that any new staff are provided with a structured orientation and induction, to ensure they are competent to carry out the duties of their job.

Records of all staff training were retained and were noted to be up to date. It was good to note that transport staff had also been provided with training in relation to adult safeguarding. Advice was given in relation to retaining a record of this training along with the training records of all other day care staff.

All staff received regular supervision and there were procedures in place for appraising staff performance on an annual basis.

3.3.2 Care Delivery

There was a handover at the beginning of each day, which all staff attended. These meetings focused, but not exclusively, on the service users' dietary requirements; information about any changes to the service users' care needs was also shared with staff. A diary and a 'Messages book' was also used as part of the handover process to ensure good communication between staff.

Staff were knowledgeable of individual service users' needs, their daily routine wishes and preferences. Staff attended 'safety pauses' prior to mealtimes to ensure good communication across the team about changes in service users' dietary needs. Staff interactions with service users were observed to be friendly and supportive. Staff were skilled in communicating with service users; they were respectful, understanding and sensitive to service users' needs.

Service users' needs were met through a range of individual and group activities such as singing and dancing, bingo, Boccia, quizzes, word searches, crafts, bingo, cookery and playing cards. Service users regularly went to Ballyronan Marina for spins on the day care setting's transport.

Service user meetings were held on a regular basis. It was good to note that service users were involved in decision making around the activities and the meals they were offered.

Observation of the lunch time meal, discussion with service users, staff and the manager evidenced that there were robust systems in place to manage service users' nutrition and mealtime experience. Any service user who required a gluten free diet, was offered a choice in meal. Whilst there was a gluten free choice for those who needed this, the choices were limited to cold deserts, such as bananas or yoghurts, whilst the majority of service users had hot

deserts such as apple crumbles or rice puddings. This was relayed to the staff who communicated this immediately to the appropriate catering staff. This will be reviewed at a future inspection.

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, 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.

Staff recorded regular evaluations about the care and support 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.

Systems were in place to manage infection prevention and control. Advice was given in relation to retaining incontinence products within their original packaging in keeping with good practice. This will be reviewed at a future inspection.

A fire risk assessment had been completed on 15 September 2023. There was evidence that fire safety checks had been completed as required. Staff had completed training in regard to fire safety. Review of the fire evacuation drill records identified that a small number of staff had yet to be involved in a fire drill. Following the inspection, it was confirmed to RQIA by email that this had been addressed.

3.3.5 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Ms Donna O'Neill has been the manager in this day care setting since 11 May 2022. The staff spoken with described having good relationships with the manager and described her as being 'very good' and very approachable'.

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 system in place to manage any complaints and incidents. These were also reviewed as part of the monthly quality monitoring process.

There was a system in place to ensure that staff, including agency staff, were registered with the Northern Ireland Social Care Council (NISCC). An area for improvement previously identified in relation to this matter was assessed as having been addressed.

Advice was given in relation to recording any Nursing and Midwifery Council (NMC) registrants using the same process.

The annual quality report was in the process of being completed; this will be reviewed at a future inspection.

An area for improvement previously identified in relation to the staff roster was assessed as having been addressed.

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.

There was a 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.

4.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with the Regulations

	Regulations	Standards
Total number of Areas for Improvement	1*	0

* the total number of areas for improvement includes one that has been carried forward for review at the next inspection.

The area for improvement and details of the Quality Improvement Plan were discussed with the person in charge, 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	
Area for improvement 1 Ref: Regulation 21 (1)(b) (2)(b) (3)(d) Stated: First time To be completed by: Immediate from the date of the inspection	The registered person shall ensure that AccessNI pre-employment checks are satisfactorily carried out for all staff before they commence employment. Ref: 3.3.1 Action required to ensure compliance with this regulation is carried forward to the next inspection.

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



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