The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: **Montra**

Provider: **Northern HSC Trust (NHSCT)**

Date of Inspection: **13 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:	Northern HSC Trust (NHSCT)
Responsible Individual:	Ms Jennifer Welsh
Registered Manager:	Mr Michael Bacon
Service Profile: This is a day care setting that provides care and day time activities for service users who have learning disabilities.	

2.0 Inspection summary

An unannounced inspection took place on 13 October 2025, between 9.30 am and 1.20 pm by a care Inspector.

The last care inspection of the day care setting was undertaken on 19 August 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. However, improvements were required to ensure the effectiveness and oversight of certain aspects of the day care setting, such as recruitment records, notifiable incidents, the care records and the availability of records for inspection purposes. Improvements were also required in relation to the updating of care plans and in relation to the recording of the manager's presence within the day care setting.

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

Full details, including areas for improvement identified, 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 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

Through active listening, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans. The service users described the staff as being 'nice' and 'friendly' and that the staff made them feel safe and that they trusted the staff. Comments received described how the service users felt the staff were 'special' to them and that they 'loved the carry on with the staff'.

Relatives told us that their loved one was getting on very well in Montra.

Staff told us that they had no concerns in relation to their roles and they felt very well supported.

3.3 Inspection findings

3.3.1 Staffing Arrangements (recruitment and selection, induction and training)

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 sufficient staffing numbers in place on the day of the inspection.

Review of the staff recruitment records confirmed that pre-employment checks, including criminal record checks (AccessNI), were generally completed and verified before staff members commenced employment and had direct engagement with service users. However, whilst two references were received for one staff member, it was identified that neither of these were from the staff member's current employer. An area for improvement has been identified.

There was a process in place to ensure that all newly appointed staff complete a structured orientation and induction, having regard to the Northern Ireland Social Care Council's (NISCC) Induction Standards for new workers in social care, to ensure they were competent to carry out the duties of their job in line with the organisation's policies and procedures. There was a new staff member in post who was employed to work between Montra and another registered day care setting. Whilst the corporate induction was being undertaken in the other setting, there was evidence of a local Induction for Montra. Advice was given in relation to retaining a copy of the full Induction record within Montra, when it is completed.

Checks were made to ensure that staff were appropriately registered with Northern Ireland Social Care Council (NISCC).

It was identified that staff from another registered day care setting provided staffing cover if needed. Advice was given in relation to retaining evidence of those staffs' AccessNI checks, safeguarding training and NISCC status within Montra's registered premises.

Staff training records for the staff who permanently worked in Montra were not available for inspection. An area for improvement has been identified.

Procedures were in place for appraising staff performance and all staff received regular supervision.

3.3.2 Care Delivery and Management of Care Records

Regular staff meetings were held and minutes maintained of the meetings for staff, unable to attend, to read for information sharing. Whilst RQIA acknowledges that the manager is also the manager of another day care setting, it is advised that the records of staff meetings pertaining to both services are retained separately.

Service users' needs were met through a range of individual and group activities such as arts and crafts, bowling, music, karaoke, armchair exercises, ipads, cookery and table top activities. Service users also went out to dinner at a local hotel; and they also were able to watch movies of their choice.

Staff interactions with service users were observed to be friendly and supportive.

Staff were observed to be prompt in recognising service users' needs, including those service users who had difficulty in making their wishes or feelings known. Staff were skilled in communicating with service users; they were respectful, understanding and sensitive to service users' needs.

Service users' needs were assessed when they were first referred to the day care setting and before care delivery commenced. This assessment was incorporated into a care and support plan which was completed by the service users' social workers. Thereafter, the day care setting is meant to complete a risk assessment and a care plan with respect to how the service users' needs are to be met within the day care setting. Review of records identified that the risk assessments were not consistently completed; and care plans were also not completed in a timely manner. Two areas for improvement have been identified in this regard.

Where a service user was at risk of falling, measures to reduce this risk were put in place.

Whilst there was no evidence that the risk of falling was not being managed appropriately; and referrals were made to other healthcare professionals as needed, the review of records identified that the care plan had not been updated after a service user had sustained a fall. An area for improvement has been identified.

The majority of service users had service user agreements completed with them when they first commenced attending the day care setting. There was one service user for whom this had not been completed; following the inspection, confirmation that this had been completed was submitted to RQIA.

It was good to note that the care plans included detail regarding the specific level of diet noted within the Speech and Language Therapy (SALT) Care Plan.

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 the relevant documentation. It was good to note that there was oversight of any Deprivation of Liberty Safeguards (DoLS) in the monthly quality monitoring process; there was also evidence that the person in charge had followed up with the Trust, as appropriate.

3.3.3 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Mr Michael Bacon has been the manager in this day care setting since 28 March 2019 and he is also the Registered Manager of another registered day care setting.

Whilst those consulted with commented positively about the manager, there were no records available to evidence the time spent in Montra, as opposed to time spent in the other day care setting. An area for improvement has been identified.

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; none had been received since the last care inspection.

Review of incident records identified that they were managed appropriately. However, as previously discussed in section 3.3.2, the care plans had not consistently been completed when a service user had fallen. It was also noted that RQIA had not been notified of the incidents in keeping with the regulations. An area for improvement has been identified.

The annual quality report was reviewed and it was noted that stakeholder feedback had not been included. Following the inspection, an updated report was submitted to RQIA. Advice was given in relation to including staff comments and this will be reviewed at a future inspection.

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.

A procedure was in place for recording attendance at the day care setting; this included checks when the service users arrived at the day care setting; and when the bus guide returned to the day care setting, after supporting service users home.

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.

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 29 August 2025 and fire safety checks were undertaken on a regular basis. Advice was given in relation to completing another fire drill, to include a staff member who had missed the last drill. Following the inspection, it was confirmed to RQIA that this had been completed.

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 the Regulations and the Standards.

	Regulations	Standards
Total number of Areas for Improvement	5	2

Areas 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) **Stated:** First time **To be completed by:** Immediate from the date of the inspection	The registered person shall ensure that pre-employment checks include a reference from the applicant's current employer. Ref: 3.3.1
	Response by registered person detailing the actions taken: Manager will ensure that references are obtained from applicant's current employer and that these appear satisfactory prior to commencement in post. The Registered Manager will obtain these via Trust systems and if necessary, seek additional information to meet this regulation. These will be collated within the staff members file.
Area for improvement 2 **Ref:** Regulation 19 (3)(b) **Stated:** First time **To be completed by:** Immediate from the date of the inspection	The registered person shall ensure that all records are available for inspection; this refers to but is not limited to training records. Ref: 3.3.1
	Response by registered person detailing the actions taken: A shared drive has been set up to collate and easily access any necessary records and staff documentation which will ensure that the Registered Person will have access to accurate and up to date records. Access has been given to Senior Day Care Worker based at the Montra to support her to effectively manage and support staff.
Area for improvement 3 **Ref:** Regulation 15 (a) **Stated:** First time **To be completed by:** Immediate from the date of the inspection	The registered person shall ensure that risk assessments are completed in a timely manner after the service users, start attending the day care setting. Ref: 3.3.2
	Response by registered person detailing the actions taken: The Registered Person will ensure that Service Users are involved and supported to participate in review processes and that time is arranged to complete this in a timely manner when a Service User begins attending the day care setting. The Registered Person will prioritise ensuring that Risk Assessments are completed and uploaded on to the Encompass system as part of the wider migration process which has been ongoing since system has been launched. If extra support is required to complete this in a timely manner, the Registered Manager will ensure this is provided to support the Day Care Worker.

Area for improvement 4 **Ref:** Regulation 16 (1) **Stated:** First time **To be completed by:** Immediate from the date of the inspection	The registered person shall ensure that care plans are completed in a timely manner after the service users, start attending the day care setting. Ref: 3.3.2
	Response by registered person detailing the actions taken: The outstanding Care Plans noted during Inspection has now been completed and updated onto Encompass System. The Registered Person will ensure that Care Plans are completed and uploaded on to the Encompass System as part of the wider migration process which has been ongoing since system has been launched. If extra support is required to complete this in a timely manner, the Registered Manager will ensure this is provided to support the Day Care Worker to enable this to be prioritised..
Area for improvement 5 **Ref:** Regulation 29 (1)(f) **Stated:** First time **To be completed by:** Immediate from the date of the inspection	The registered person shall ensure that RQIA is informed of any notifiable events. Ref: 3.3.3
	Response by registered person detailing the actions taken: The Registered Person and Day Care Worker have reviewed procedures with staff in relation to reporting of accidents, incidents and communicable diseases to RQIA. The Registered Manager has tabled this for discussion at an upcoming team meeting to advise staff on when and how to escalate accidents/incidents/communicable diseases, timescales for reporting and responsibility for submitting notifications. The table contained in the RQIA guidance "Statutory Notification of Incidents and Deaths for Registered Providers and Managers of Regulated Services" (pages 21-21) will be used as an aide-memoire for staff to refer to. A log of all notificable accidents is insitu and will be maintained and cross referenced against RQIA submissions. The manager will conduct monthly reviews to ensure that all notifiable events have been reported in line with regulatory requirements. In relation to communicable diseases occuring the records will include relevant risk assessment and actions taken alligned to IPC measures within the NHSCT..

Action required to ensure compliance with The Day Care Settings Minimum Standards August (revised) 2021	
Area for improvement 1 **Ref:** Standard 5.6 **Stated:** First time **To be completed by:** Immediate from the date of the inspection	The registered person shall ensure that the care plans pertaining to falls, is updated when a service user experiences a fall. Ref: 3.3.2
	Response by registered person detailing the actions taken: The Registered Person and Day Care Worker in Montra will ensure that care plans are updated following a Service User experiencing a fall to reflect any amendments. The Service User will be encouraged and supported to take part any reviews of their care plans. The Registered Manager has reviewed any appropriate care plans and amended as appropriate. Falls witnessed, or not witnessed by staff will be reported to RQIA as detailed in "Statutory Notification of Incidents and Deaths Guidance for registered Providers and Managers of Regulated Services.".
Area for improvement 2 **Ref:** Standard 17 **Stated:** First time **To be completed by:** Immediate from the date of the inspection	The registered person shall ensure that evidence of the manager's presence within the day care setting is retained and available for inspection. Ref: 3.3.3
	Response by registered person detailing the actions taken: The registered Person's attendance at the day care setting is now captured on the amended weekly rota and via the sign in/out documentation at the day care setting. This clearly identifies the lines of accountability and defined management structure for the day care setting and will provide clarity regarding specific roles and responsibilities. This documentation will be retained and available for inspection.

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

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