

Inspection Report

Name of Service: Inniscoole Day Centre

Provider: Northern HSC Trust

Date of Inspection: 14 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 Health Social Care Trust
Responsible Individual:	Ms Jennifer Welsh
Registered Manager:	Mrs Lauren Wharry (registration pending)
Service Profile: Inniscoole Day Centre is a day care setting with accommodation to provide 75 places for people, who may be frail, have a physical disability, sensory impairment or addiction. The day care setting is open Monday to Friday and is managed by the Northern Health Social Care Trust (NHSCT).	

2.0 Inspection summary

An unannounced inspection took place on 14 October 2025, between 9 am and 1.44 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 26 November 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 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.

Service users said that the care and support provided by Inniscoole Day Centre was a good experience.

As a result of this inspection the previous area for improvement identified at the last care inspection was assessed as having been addressed by the provider. No new areas for improvement were identified during this inspection. 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 users, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors seek the views of those living, 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.

Service users told us that they were loved attending the day care setting. One comment included that they enjoyed 'the parties and dressing up' and that they enjoyed the day trips on the bus. Responses indicated that the service users felt safe because of 'the way the carers look after (them) and know (their) needs'. Service users described the staff as being 'second to none', 'very kind', 'understanding', 'caring', 'brilliant'; and that the staff 'go above and beyond'.

Staff spoken with said that the day care setting was 'lovely' and that it 'runs like clockwork'.

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 enough staff on duty to support service users and staff were seen assisting service users in a caring and compassionate manner. Staff said that they felt well supported in their role. Some comments were received in relation to the staffing levels having been affected by short notice sick leave. We were satisfied that these instances were unavoidable and that generally there were sufficient staffing levels in place every day.

A review of the day care setting'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.

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.

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 on information about any changes to the service users' care needs and the staff allocation for the day. The meeting were also used to share important information to staff, such as learning alerts.

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

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 quizzes, bingo, boccia, arts and crafts, relaxation sessions, music and gardening. Service users knitted squares that are to be put together to make a patchwork quilt. Service users also enjoyed making clay ornaments and building different things out of match sticks.

Service user meetings had not been held in some time. This was discussed with the manager who advised that these were due to recommence in the coming weeks. However, we were satisfied that the service users' views and opinions about the service had been obtained via a survey. The service users' meetings will be reviewed at a future inspection.

Observation of the lunch time meal evidenced that there were robust systems in place to manage service users' nutrition and mealtime experience. There was a Dysphagia folder in place in the dining room, which staff could refer to when serving the meals. Specific diets required were also noted on the daily meal sheet.

Any service user who required a gluten free diet, was offered a choice in meal.

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.

A fire risk assessment had been completed on 24 October 2024. There was evidence that fire safety checks had been completed as required. Staff had completed training in regard to fire safety.

The majority of staff had attended fire evacuation drills and the annual drill was due to be undertaken in the coming weeks.

3.3.5 Quality of Management Systems

There has been a change in the management of the day care setting since the last inspection. Mrs Lauren Wharry has been the manager in this day care setting since 2 October 2025. The staff spoken with described having good relationships with the manager and described her as being '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. RQIA had been notified appropriately of any incidents in keeping with the regulations. These were also reviewed as part of the monthly quality monitoring process.

There was a system in place to ensure that staff were registered with the Northern Ireland Social Care Council (NISCC).

The annual quality report had been completed and was deemed to be satisfactory.

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

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



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