

Inspection Report

Name of Service:	Suffolk Day Centre
Provider:	Belfast Health and Social Care (HSC) Trust
Date of Inspection:	10 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:	Belfast HSC Trust
Responsible Individual:	Mrs Maureen Edwards
Registered Manager:	Ms Jane Braiden
Service Profile – Suffolk Day Centre is a day care setting located in Belfast. The day care setting provides care and daytime activities for up to 65 service users with a learning disability. The day care setting is open Monday to Friday and is managed by the Belfast Health and Social Care Trust (BHSCT).	

2.0 Inspection summary

An unannounced inspection took place on 10 October 2025, between 09.00 a.m. and 1.00 p.m. A care inspector carried out the inspection.

The inspection examined the day care setting's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction, training and adult safeguarding. It also looked at the reporting and recording of accidents and incidents, complaints, whistleblowing, service user involvement, and Dysphagia management.

The inspector identified good practice in relation to feedback from service users and relatives, service user care plans and service user involvement. There were good governance and management arrangements in place.

The inspector identified no Areas for Improvement during this inspection. The inspector signed off two Areas for Improvement from the previous inspection and validated these during this 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 they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

In preparation for this inspection, the inspector reviewed a range of information about the service. This included any previous areas for improvement identified, registration information, and any other written or verbal information received from service users, relatives, staff or the Commissioning Trust.

The inspector provided information 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 survey.

3.2 What people told us about the service and their quality of life

Throughout the inspection, the inspector sought to speak with service users, their relatives or visitors and staff for their opinions on the quality of the care and support, their experiences of living, visiting or working in Suffolk Day Centre.

The service users gave very positive feedback. One of the service users stated that she 'loves it here and looks forward to coming'. Another commented that 'I like it here and try to help the staff'. Another said that 'the staff are good to me'.

The inspector also spoke with the relatives of service users. Their feedback was also positive. One stated that 'the staff are great. They are really supportive of me'. Another said that 'I could not praise the place highly enough'.

Staff gave similarly positive feedback. One stated that 'the manager is great at developing staff'. Another commented that 'the manager is very approachable and there are no difficulties accessing training'.

The inspector spoke with a visiting health care professional who stated that 'the staff are very invested in dietary care within Suffolk Day Centre'. They always ensure that recommendations are followed.

Feedback from questionnaires indicated that service users have no concerns about the care provided in the day care setting, with respondents indicating that they were very satisfied that care provided was safe, effective and compassionate and that the service was well managed. Comments included 'we enjoy spending time with our friends' and 'staff support our physical and emotional needs'.

4.0 Inspection findings

4.1 What are the systems in place for identifying and addressing risks?

As a public-sector body, RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care services, we are committed to ensuring the protection of the rights of people who receive services. This means we will be seeking assurances from providers that they take all reasonable steps to promote people's rights. Users of day care settings have the right to expect their dignity and privacy to be respected, and to have their independence and autonomy promoted.

Having reviewed the model “We Matter” Adult Learning Disability Model for NI 2020, the Vision states that ‘individuals with a learning disability require respect and empowerment to lead a full and healthy life in their community’.

The purpose of the LD NI Model is to outline what individuals with learning disabilities expect of services, how services will achieve this and how they will be measured to ensure high quality, cost effective care.

The inspector reviewed the day care setting’s provision for the welfare, care and protection of service users. The organisation’s adult safeguarding policy and procedures were reflective of the Department of Health’s (DoH) regional policy and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

Discussions with the person in charge established that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting and managing adult safeguarding concerns.

Staff were required to complete adult safeguarding training during induction and every two years thereafter. Staff who spoke with the inspector had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns in normal business hours and out of hours. They could also describe their role in relation to reporting poor practice and their understanding of the day care setting’s policy and procedure with regard to whistleblowing.

Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or their care. The day care setting had provided service users with information about keeping themselves safe and the details of the process for reporting any concerns.

The person in charge was aware that RQIA must be informed of any safeguarding incident that is reported to the Police Service of Northern Ireland (PSNI).

4.2 What are the systems in place for the promotion of service user involvement?

The inspector reviewed service users’ care records on the Encompass system and through discussions with service users, observed that service users had an input into devising their own plan of care. The service users’ care plans contained details about their likes and dislikes and the level of support they may require. The day care setting keeps care and support plans under regular review and services users and /or their relatives participate, where appropriate, in the review of the care provided on an annual basis, or when changes occur. The day care setting had undertaken regular reviews in keeping with its policies and procedures. There was also evidence of regular contact with service users and their representatives, in line with the commissioning trust’s requirements.

The inspector also viewed evidence of the regular service users’ meetings, which enabled the staff to keep service users updated on any issues arising that may affect them, as well as providing an opportunity to discuss the provisions of their care.

The inspector reviewed the annual quality report and this demonstrated evidence of service user consultation.

4.3 What are the systems in place for meeting the Dysphagia needs of service users?

The person in charge reported that there were several service users who required a modified diet, in line with Speech and Language Therapy (SALT) recommendations. The inspector viewed a number of these care plans on the Encompass system. The inspector reviewed training records and discussions with staff confirmed that they had completed training in Dysphagia and felt competent in relation to how to respond to choking incidents should they occur.

4.4 What systems are in place for recruitment and are they robust?

The inspector reviewed recruitment records and confirmed that staff had been recruited, inducted and trained in line with the regulations. The inspector 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.

A review of the day care setting's staff records confirmed that staff were registered with the Northern Ireland Social Care Council (NISCC). There was a system in place for the manager to monitor registrations on a monthly basis. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

4.5 What arrangements are in place for staff induction and training?

The day care setting provided staff with training appropriate to the requirements of their role.

There was evidence that all newly appointed staff had completed a structured orientation and induction, having regard to NISCC's Induction Standards for new workers in social care. This ensures they are competent to carry out the duties of their job in line with the day care setting's policies and procedures. There was a formal induction programme of at least three days, which included shadowing of a more experienced staff member. The day care setting retained records of the staff member's capability and competency in relation to their job role.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken. The inspector reviewed the training matrix maintained by the day care setting and found the majority of training to be up to date.

The person in charge reported that none of the service users currently required the use of specialised equipment. Staff were aware of how to source such training should it be required in the future.

The day care setting had provided staff with training in relation to medicines management. The manager confirmed that at present staff do not administer medications to service users.

The Mental Capacity Act (MCA) provides a legal framework for making decisions on behalf of service users who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, the day care setting allows service users make their own decisions and are helped to do so when needed.

Staff had completed Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. The person in charge reported that several of the current service users was subject to DoLS. A resource folder was available for staff to reference.

4.6 What are the arrangements to ensure robust managerial oversight and guidance?

There were monitoring arrangements in place in compliance with Regulations and Standards. A review of the reports of the day care setting's 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 the care records of service users; accident/incidents; safeguarding matters; staff recruitment, training and supervision, and staffing arrangements.

The inspector reviewed the Annual Quality Report and found it satisfactory.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

The day care setting's registration certificate was in date and displayed appropriately.

There was a system in place to ensure that Suffolk Day Centre managed complaints in accordance with its policy and procedure. The inspector confirmed that the day care setting had managed these appropriately. The day care setting continues to review these as part of the monthly quality monitoring process.

The inspector reviewed records of regular staff supervision as well as annual appraisals. Examination of appraisal and supervision records indicated that the day care setting carried these out regularly as per its policies and procedures.

5.0 Quality Improvement Plan/Areas for Improvement

The inspector did not identify any Areas for Improvement during the inspection. The inspector discussed the findings of the inspection with Mrs Patricia Molloy and Mrs Moya Delaney (Assistant Managers). These can be found in the main body of the report.



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