

Inspection Report

Name of Service: Valley Centre

Provider: Western Health and social Care Trust

Date of Inspection: 3 February 2026

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:	Western Health and social Care Trust
Responsible Individual:	Neil Guckian
Registered Manager:	Sandra Boyd
Service Profile: The Valley Centre is a Day Care Setting that provides care and day time activities for people with learning difficulties. It is open five days a week from Monday to Friday. The day care setting is managed by the Western Health and Social Care Trust (WHSCT).	

2.0 Inspection summary

An unannounced inspection took place on 3 February 2026, between 11.00 am and 4.00 pm by 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 area for improvement identified, by RQIA, during the last care inspection on 18 June 2024; and to determine if the agency 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 the safe storage of hazardous substances.

As a result of this inspection the area for improvement previously identified was assessed as having been addressed by the provider. Full details, including a new area for improvement identified, can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

It was evident that the staff promoted the dignity and well-being of service users and that staff were knowledgeable and well trained to deliver safe and effective care.

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 working in and attending 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.

Information was provided 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 staff survey

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

During the inspection, we spoke with service users, relatives, and staff members.

Service users spoke positively about their experience of attending the day care setting. They said they enjoyed attending and that staff were friendly and welcoming. Service users' comments included: "I enjoy doing art. I enjoy coming here. All is good."

Comments received from relatives included: "The service is very good with communication. You are notified if there are any changes. I have no issues with the service." and "You couldn't get better staff. The manager is good. They communicate any concerns with me. I am happy with the service."

Staff told us that they were satisfied that the care and support were safe, effective, compassionate, and well-led. Staff spoke positively about the care delivery and management support in the day care setting. Staff comments included: "The service is really well led by the manager. Staff are all involved in decisions. We all work well as a team. The manager is very good with the service users, and there is always a choice of activities."

Information provided indicates that those who engage with us have no concerns in relation to the care setting.

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 meet the needs of service users.

A review of the staff recruitment records confirmed that pre-employment checks, including criminal record checks (AccessNI), were completed and verified before staff members commenced employment and had direct engagement with service users. The previous area for improvement regarding AccessNI checks has been met.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC). There was a system in place for professional registrations to be monitored by the manager. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

The day care setting has maintained a record for each member of staff, documenting all training, including induction and professional development activities undertaken. A review of a sample of staff training records established that staff had received mandatory training relevant to their roles and responsibilities. It was positive to note that the day care setting provided training in autism and neurodiversity.

Staff consulted spoke positively about the training they receive and confirmed that they received sufficient training to enable them to fulfil the duties and responsibilities of their role.

There was evidence of effective systems in place to manage staffing. Staff said there was good teamwork and that they felt well supported in their role by the manager. It was observed that staff responded to requests for assistance promptly in a caring and compassionate manner. It was evident that staff had a good understanding of the needs, likes, and dislikes of individual service users.

3.3.2 Care Delivery

There was a 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.

A system was in place to ensure that the activities offered to service users were varied and tailored to their individual needs and preferences. Service users are supported to access activities of their own choice. Activities for service users were provided, involving both group and one to one activities. Observations of service users taking part in activities on the day of inspection found that participation was enthusiastic.

Staff interactions with service users were observed to be friendly and supportive. Staff were prompt in recognising service users' needs and any early signs of distress, including those service users who had difficulty in making their wishes or feelings known.

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 their diet may be modified. A review of records and discussion with the manager evidenced that there were systems in place to manage service users' nutrition and mealtime experience. It was positive to note that all staff had received training in dysphagia.

3.3.3 Management of Care Records

The service users' care plans contained details of their likes, dislikes, preferences, and the level of care and support they may require. Care staff recorded regular evaluations of the delivery of care and support. 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 regarding how their support was provided. The details of care plans were shared with and signed by service users and/or their representatives as appropriate.

Care records were person centred, regularly reviewed, and updated to ensure they continued to meet the service users' needs.

Care reviews had been undertaken in accordance with the day care setting's policies and procedures.

Records pertaining to consent were available.

Service users' care records were held confidentially.

3.3.4 Quality of Management Systems

Sandra Boyd has been the registered manager in this day care setting since 5 June 2020. Staff spoke positively about the management team.

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 Health and Social Care (HSC) Trust representatives. The reports included details of a review of service user care records; accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements.

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.

The annual quality report was reviewed and noted to include stakeholder feedback.

Day care settings are required to have a person known as the Adult Safeguarding Champion (ASC), who is responsible for implementing the regional protocol and the day care setting's adult safeguarding policy. There was an appointed ASC for the day care setting. 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 system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. No complaints have been received since the last inspection.

There was a protocol in place for staff to follow when service users did not attend as planned. Additionally, 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.

There was evidence that fire safety checks had been completed as required. Staff had completed training regarding fire safety and had participated in a fire evacuation drill. Throughout the inspection, fire doors were observed to be unobstructed.

The environment was observed during a tour of the day care setting, and it was identified that hazardous substances were not stored appropriately in accordance with Control of Substances Hazardous to Health (COSHH) guidance. An area for improvement has been stated.

The day care setting was observed to be clean and tidy, suitably furnished, warm and comfortable, and free of clutter.

4.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with Regulations.

	Regulations	Standards
Total number of Areas for Improvement	1	0

Area for improvement and detail of the Quality Improvement Plan were discussed with Sandra Boyd, Registered Manager, 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 14 (1) Stated: First time	The registered person shall ensure that chemicals are stored in line with Control of Substances Hazardous to Health (COSHH) Regulations. Ref: 3.3.4
To be completed by: Immediate and ongoing from the date of inspection	Response by registered person detailing the actions taken: All chemicals are now stored in locked cabinets. Senior staff monitor compliance on a day to day basis.

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



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