The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: **Wilson House Resource Centre**

Provider: **Northern Health and Social Care Trust**

Date of Inspection: **27 November 2025**

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:	Northern Health and Social Care Trust (NHSCT)
Responsible Individual/Responsible Person:	Ms. Suzanne Pullins
Registered Manager:	Mrs. Marion Gage

Service Profile –

Wilson House Resource Centre is a day care setting situated in the village of Broughshane in Co. Antrim. It is operated by NHSCT and registered for 50 places. Wilson House provides care and day time activities for people living with physical disability, learning disability or a social or health vulnerability, including those with dementia. The setting is open from 8.30am – 4.00pm, Monday to Friday.

2.0 Inspection summary

An unannounced inspection took place on 27 November 2025, between 9.55 am and 3.15 pm. It was carried out 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 December 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. However, improvements were required to ensure the effectiveness and oversight of certain aspects of the agency, such as care planning. As a result of this inspection the areas for improvement previously identified were assessed as having been addressed by the provider. Full details, including the 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.

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

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

We would like to thank the manager, service users and staff for their help and support in the completion of the 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 the service 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 service. This included the previous areas for improvement 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 will seek the views of those attending and working in the day care setting. They also 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

We spoke to a range of service users, relatives and staff to seek their views of attending and working within the day care setting.

Service users spoken with were very positive about Wilson House. They commended the staff, transport and meals provided.

One relative told us that they were very satisfied with the care provided by the staff and would highly recommend the day care setting.

Staff told us that they enjoyed their jobs and that they worked as a team.

The information provided indicated that there were no concerns in relation to the day 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 meets the needs of service users. There was evidence of robust systems in place to manage staffing.

There was a process in place to ensure that recruitment was managed appropriately; this ensured that all pre-employment checks, including criminal record checks (AccessNI), are completed and verified before staff members commenced employment and have direct engagement with service users.

Newly appointed staff had completed a structured orientation and induction, to ensure they were competent to carry out the roles and responsibilities of their job. Staff commended the quality of their induction.

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.

Records of all staff were retained. Some gaps were noted but there was evidence that staff had scheduled the required training. Staff confirmed that got sufficient training for their roles.

Competency assessments were undertaken with all staff to ensure that they were competent in their roles and responsibilities.

3.3.2 Care Delivery

Staff interactions with service users were observed to be friendly and supportive/Staff were observed to be prompt in recognising service users' needs and any early signs of distress or illness, 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 said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided. The day care setting had provided service users with information about keeping themselves safe and the details of the process for reporting any concerns.

Care reviews had been undertaken in keeping with the day care setting's policies and procedures. There was also evidence of regular contact with service users and their representatives, in line with the commissioning Trust's requirements.

Several months had lapsed since the day care setting had had a service user meeting. These meetings enable service users to discuss what they want from attending the day care setting and any activities they would like to become involved in. The manager was encouraged to reinstate these meetings as soon as possible.

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.

A number of service users were assessed by a Speech and Language Therapist (SLT) with recommendations provided and some required their food and fluids to be of a specific consistency. A review of a sample of service users' care plans evidenced that these were not consistent with the SLT recommendations. An area for improvement is stated in this regard.

3.3.4 Quality of Management Systems

There has been a change in the management of the day care setting since the last inspection. Mrs. Marion Gage has been the registered manager in this day care setting since 19 November 2025.

There were monthly monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. A review of the reports of the day care setting's monthly 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 service user care records; accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements.

The day care setting had completed an annual review in relation to their practice which incorporated service user and their representatives' feedback (Regulation 17).

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 effective systems and processes were in place to manage the safeguarding and protection of adults at risk of harm.

The Statement of Purpose required some updates to ensure consistency with Regulations and Standards. Guidance was supplied to the manager in this regard. This will be reviewed at the next inspection.

During the course of the inspection, it became evident that NHSCT staff not directly involved with the service utilised office space and facilities within the day care setting's premises. RQIA views this as a breach of the day care setting's Statement of Purpose. RQIA is currently engaging with the service in regards to these arrangements.

RQIA had been notified appropriately of any incidents in keeping with the Regulations. Incidents had been managed appropriately. No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure.

There was a system in place for managing instances where a service user did not attend the day care setting as planned. This included a system for signing in and out the service users who attend.

3.3.5 Quality and Management of Environment

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

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that the last full evacuation drill was undertaken on 17 June 2025. An up to date fire risk assessments for the setting was available for the inspection. All identified high priority actions had been completed. All staff had completed fire training and it was positive to note that a proportion of staff had also been trained as fire wardens.

The day care setting has had some recent improvement works including installation of new windows and outside lighting. Work was ongoing to upgrade the existing laundry room.

4.0 Quality Improvement Plan/Areas for Improvement

One area for improvement has been identified where action is required to ensure compliance with Regulations.

	Regulations	Standards
Total number of Areas for Improvement	1	0

Areas for improvement and details of the Quality Improvement Plan were discussed with the 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 16(1) **Stated:** First time	The Registered Person shall ensure that care plans relating to swallowing difficulties are consistent with the SLT care plan and clearly specify the service users' needs. Ref: 3.3.3
To be completed by: Immediate and ongoing from date of inspection	**Response by registered person detailing the actions taken:** The Registered person has reviewed all care plans and ensures that care plans relating to swallowing difficulties are consistent with the SLT care plan and clearly specifies the Service Users' needs.

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

The Regulation and Quality Improvement Authority

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