The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: Hawthorns Adult Centre

Provider: Northern Health and Social Care Trust

Date of Inspection: 24 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:	Mr. Thomas Haighton
Service Profile – Hawthorns Adult Centre is a day care setting based in Carrickfergus that provides therapeutic activities, care and support for up to 50 adults with a learning disability. The setting is open Monday to Saturday and is managed by the NHSCT.	

2.0 Inspection summary

An unannounced inspection took place on 24 November 2025, between 10.10 am and 3.45 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 30 May 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. As a result of this inspection the areas for improvement previously identified were 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.

Service users said that the care and support provided by the day care setting was a positive experience. Service users who were unable to voice their opinions were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Refer to Section 3.2 for more details.

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.

The inspector would like to thank the manager, service users, relatives 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 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 on Hawthorns Adult Centre. 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 within 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 and their quality of life

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

Service users told us that they loved coming The Hawthorns and seeing all their friends. One told us that 'The Hawthorns rocks'. They also commended the transport and food on offer.

One relative told us that their loved one jumped out of the car each time they arrived at the day care setting.

Staff were very positive about the care and support offered and numerous told us how much they enjoyed their jobs.

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**.**

Review of the 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.

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.

Newly appointed staff, including those supplied by recruitment agencies, had completed a structured orientation and induction, to ensure they were competent to carry out the roles and responsibilities of their job. Staff fed back to us that their induction was of a very good standard.

Records of all staff training were retained and were noted to be up to date. Staff confirmed that got sufficient training for their roles. A relative spoken with commented that 'the staff were obviously well trained'.

Procedures were in place for appraising the staffs' performance and supervisions were undertaken in keeping with the day care setting's policy and procedures.

Several staff remarked on the good teamwork in place and that they felt highly valued in their roles. A small number also highlighted that they felt that the low staff turnover within the day care setting was indicative of high levels of job satisfaction.

3.3.2 Care Delivery

Service users' needs were met through a range of individual and group activities. It was reassuring to note that service users were consulted about the activities they preferred, ensuring their views informed and shaped the day-to day activities. Service users told us how much they enjoyed the range of activities on offer.

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 praised the staff and told us repeatedly how staff made them laugh and offered them the correct level of support.

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.

One visiting healthcare professional told us that staff were very responsive to any recommendations given in relation to service users' care and support.

It was also positive to note that the day care setting had service user meetings on a regular basis which enabled the service users to discuss what they wanted from attending the day care setting and any activities they would like to become involved in.

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.

Service users care records were held confidentially.

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. The details of care plans were shared with service users and/or their representatives as appropriate.

Review of records identified that the care plans were reflective of the recommendations outlined within the Speech and Language Therapy (SLT) Care Plan. Risk assessments such as Moving and Handling risk assessments were in date.

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 authorisation documents. A central register was in place to enable tracking of any DoLS due for review.

Arrangements were in place to ensure that the capacity of service users who required higher levels of supervision, monitoring, or restriction was considered and, where appropriate, formally assessed in line with relevant legislation. Where a service user was experiencing a deprivation of liberty, the care records contained the relevant authorisation records.

3.3.4 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Mr. Thomas Haighton has been the registered manager in this day care setting since 26 February 2021.

Service users and both staff commented very positively about the manager and described him as supportive, approachable and able to provide guidance.

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 ensure that complaints were managed in accordance with the day care setting's policy and procedure. Where complaints were received since the last inspection, these were appropriately managed and were reviewed as part of the day care setting's monthly quality monitoring process.

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

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

There was evidence that the manager responded to any concerns, raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services within the day care setting.

3.3.5 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.

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.

It was identified that the tarmac on front driveway area for the day care setting was very uneven in places. This presented a potential trip hazard to both service users and staff. An area for improvement has been identified in this regard.

A fire risk assessment had been completed on 21 March 2025. There was evidence that fire safety checks had been completed as required. Staff had completed training in regard to fire safety and had participated in a fire evacuation drill. Throughout the inspection fire doors were observed to be unobstructed.

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

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

The area 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 26(2)(b) **Stated:** First time **To be completed by:** 31 March 2026	External areas used by service users must be kept in a good state of repair. The Registered Person shall ensure the identified uneven concrete entrance area is made safe in attempts to prevent trips and falls. Ref: 3.3.5
	Response by registered person detailing the actions taken: On the 27th November 2025 the estates department were contacted by the registered manager regarding these external areas for improvement. Estates conducted a site visit and survey one week post inspection. The contractor has now been instructed to carry out the resurfacing works as required with confirmation provided that these works will be actioned before April 2026.

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

The Regulation and Quality Improvement Authority

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