

# Inspection Report

**Name of Service:** Oakridge Social Education Centre

**Provider:** Southern HSC Trust

**Date of Inspection:** 17 February 2026

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

## 1.0 Service information

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| <b>Organisation/Registered Provider:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Southern Health & Social Care Trust |
| <b>Responsible Individual/Responsible Person:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                             | Mr Steve Spoerry                    |
| <b>Registered Manager:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Mr Melvyn Purdy (Acting)            |
| <b>Service Profile –</b> This is a day care setting providing a programme of day care and day time activities Monday to Friday for adults living with a learning disability. Oakridge Social Education Centre (SEC) provides day care for those adults presenting with learning disability. An intensive support unit is located on the site and accommodates service users with complex medical/nursing needs. Oakridge also has a bespoke unit “Little Oaks” for a number of service users. |                                     |

## 2.0 Inspection summary

An unannounced inspection took place on 17 February 2026 from 10.15 am to 4.45 pm by a care Inspector.

The last care inspection of the day care setting was undertaken on 24 June 2024 by a care inspector. No areas for improvement were identified. This inspection sought to examine how the day care setting is performing in relation to the regulations and standards; and to determine if the day care setting is delivering safe, effective and compassionate care; and if the service is well led.

Service users were observed to be content in their surroundings and some who spoke with the inspector said that attending Oakridge Social Education was an enjoyable experience.

The inspection established that safe, effective and compassionate care was delivered to service users, and that the day care setting was well led.

No new areas for improvement were identified as a result of this inspection. Details of the findings of inspection can be found in the main body of the 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 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 a sample of records to evidence how it is performing under 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

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

Service users said that they were happy with the care and support provided at the day care setting. Comments made to the inspector by those attending included the following statements: "I enjoy it here the staff are lovely" and "I like it here". Returned questionnaires indicated that the respondents were satisfied that the service provided safe, compassionate and effective care and that the service was well led. Some service users reported that they would like more music and more days out. This was relayed to the manager to action as appropriate.

Relatives who spoke with the inspector indicated that they were happy with the care provided to their loved one and that they could approach the staff with any concerns they had if they needed to. Comments made by those who spoke with the inspector included the following statements: "It is fantastic" and, "the staff are brilliant - they are a Godsend and the unsung heroes".

Staff who spoke with the inspector spoke positively about the care delivery, training and management support in the day care. Staff advised that the centre is very busy and that they can be short staffed but that there is good support and team work which helps them to provide a good experience for service users. This was relayed to the day centre who confirmed that were imminent plans to recruit new staff. This is discussed in more detail in section 3.3.3.

Healthcare professionals who provided feedback on the service indicated that staff advocated for service users, participated enthusiastically in any suggested activities from professionals. Communication from the service was said to be appropriate and service user-focused. Some comments suggested the need for upgrades to the building, environment and improved transport options for service users to enable them to visit the local community more often. These comments were relayed to the manager to action as appropriate.

### **3.3 Inspection findings**

#### **3.3.1 Adult Safeguarding and Incident Reporting**

The day care setting's provision for the welfare, care and protection of service users was reviewed. The organisation's policy and procedures reflected information contained within the Department of Health's (DoH) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

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. 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.

Discussions with staff 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. The day care setting retained records of any referrals made to the HSC Trust in relation to adult safeguarding. A review of records confirmed that any concerns raised within the service were managed appropriately. These were also recorded on a tracker document which was combined to also include and record the management of accidents/incidents occurring. On closer review of the tracker document it was not possible to ascertain at ease, the number of safeguarding concerns that arose since the last inspection. The manager agreed to review this document with a view to being able to efficiently highlight any trends or patterns in safeguarding concerns going forward. This will be reviewed at a future inspection.

An examination of a sample of accidents/incidents arising confirmed that these had been managed appropriately however, it was identified that two incidents in the day care setting had not been reported to RQIA in line with Regulation 29 (1) (e). The manager provided an explanation for this and proceeded to submit a notification to RQIA immediately. Further discussion took place with the manager to ensure understanding of the requirements under this Regulation.

#### **3.3.2 Mental Capacity and Restrictive Practice**

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, service users make their own decisions and are helped to do so

when needed. When service users lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

Staff had completed Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. There were arrangements in place to ensure that service users who required high levels of supervision or monitoring and restriction had had their capacity considered and, where appropriate, assessed. The day care setting maintains a register of those service users who have a DoLS in place. A review of care records of service users with DoLS authorisations in place identified that some required a review to ascertain if the Emergency provisions under which they were initially assessed, still applied. The manager followed this up immediately and provided an update to the inspector after the inspection of ongoing efforts to address this with the relevant professionals. This will be kept under review.

There was a policy in place for the use of restrictive interventions and a register was in place which was reviewed and updated regularly to record when restrictive practices or withdrawal of staff was initiated as a safety precaution. Restrictive practices that were applied such as locked doors and use of identified designated spaces within the day care setting were subject to robust risk assessment with multi-disciplinary input and regular review by management and staff. Any use of restrictive interventions was well documented within service user's records as well as the restrictive practice register. The manager was aware that any restrictions applied within the day care setting must remain proportionate to the aim sought with input from the multi-disciplinary team so they are not applied for longer than is necessary in line with regional guidance.

### **3.3.3 Staffing Arrangements (recruitment and selection, induction and training)**

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.

Observation of the delivery of care on the day of inspection evidenced that service users' needs were met by the number and skills of the staff on duty. Staff said they felt supported in their role and that there was good teamwork, however there were some concerns about the lack of additional staffing provision for service users assessed as requiring a higher staffing ratio. It was identified that staff shortages had led to a reduction in the number of days some service users were able to attend the day care setting. This was discussed with the manager who provided an update on recent recruitment efforts and ongoing work to ensure service users are provided with the appropriate staffing to enable them to attend the day care setting in line with their assessed need. RQIA will keep this matter under review.

A review of the day care setting's staff recruitment records identified that pre-employment checks for new staff, including criminal record checks (AccessNI), were completed and verified before commencing 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) or the Nursing and Midwifery Council (NMC) or any other relevant regulatory body. There was a system in place for professional registrations to be monitored by the manager. Staff who spoke with the inspector confirmed that they were aware of their responsibilities to keep their registrations up to date.

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, to ensure they were competent to carry out the duties of their job in line with the day care setting's policies and procedures. There was evidence that the induction programme for all new staff included shadowing of a more experienced staff member. Written records were retained regarding the person's capability and competency in relation to their job role.

Staff were provided with training appropriate to the requirements of their role. The day care setting had maintained an electronic record of all staff training which on review, identified that some staff required to refresh mandatory training in respect of Adult Safeguarding, Fire Safety, a Medication Competency and First Aid. This was discussed with the manager who confirmed the arrangements for staff to complete refresher training in these areas after the inspection.

Where service users required the use of specialised equipment to assist them with moving, this was included within the day care setting's mandatory training programme.

### **3.3.4 Dysphagia Management**

A number of service users had been assessed by a Speech and Language Therapist (SALT) who put in place recommendations regarding the consistency of their food and fluids. Staff were familiar with how food and fluids should be modified and followed a clear programme for each service user with SALT requirements at meal times. A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents.

Staff demonstrated good knowledge of service users' wishes, preferences and assessed needs. These were recorded within care plans along with associated SALT dietary requirements.

### **3.3.5 Care Records and Service User Input**

A review of service users' care records identified that each service user had a detailed, person centred support plan to enable them to follow and participate in all aspects of their care. Care plans contained details about their likes and dislikes and the level of support they may require. These are kept 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 in line with the commissioning trust's requirements. A review of a selection of care records identified that moving and handling risk assessments and care plans were up to date.

The day care setting had service user meetings on a monthly basis which enabled service users to give their views on what they wanted from attending the day care setting as well as identifying any activities they would like to become involved in. A review of the minutes of the service user's meetings found that these were documented in a format suitable to the needs of each service user group. Activities included baking, visits to the local community, fit4U, arts and crafts and live music. It was positive to note that service users contributed to the completion of a newsletter which was distributed to their representatives as a way of providing regular updates and communicating the different activities that service users partake in when attending the day care setting.

### 3.3.6 Quality and Management of the Environment

The day care setting was observed to be clean and tidy and suitably furnished, warm and comfortable and free of clutter. There was evidence that fire safety checks had been completed as required. Staff had completed training in fire safety and had participated in a fire evacuation drill. Throughout the inspection, fire doors were observed to be unobstructed.

### 3.3.7 Governance and Managerial Oversight

There were monthly monitoring arrangements in place in compliance with the regulations. 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; staff recruitment and training, and staffing arrangements. It was identified that safeguarding matters were not specifically quantified within the monitoring report and assurances were given by the manager that this would be included in future reports. This will be reviewed at a future inspection.

The Annual Quality Report was reviewed and was satisfactory.

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

The day care setting's registration certificate was up to date and displayed appropriately. The manager had submitted an application to RQIA for registration as manager; this will be reviewed in due course.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. The manager advised that no complaints had been received since the last inspection.

## 4.0 Quality Improvement Plan/Areas for Improvement

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



The Regulation and  
Quality Improvement  
Authority

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