The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: Bannvale Social Education Centre

Provider: Southern HSC Trust

Date of Inspection: 6 March 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:	Southern HSC Trust
Responsible Individual/Responsible Person:	Mr Steve Spoerry
Registered Manager:	Mr Darren Campbell
Service Profile – Bannvale Social Education Centre is a day care setting that is registered to provide care and day time activities for up to 90 service users with a learning disability who may also have additional needs arising from physical disability and/or mental health diagnosis. The day care setting is open Monday to Friday and is managed by the Southern Health and Social Care Trust (SHSCT).	

2.0 Inspection summary

An unannounced inspection took place on 6 March 2026, between 9.20 am and 5.15 pm. A care Inspector conducted the inspection.

The last care inspection of the day care setting was undertaken on 16 July 2024 by a care Inspector. No areas for improvement were identified. This inspection was undertaken to evidence 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.

The inspection established that care delivery was safe and that effective and compassionate care was delivered to service users. Improvements were required, however, to ensure the effectiveness and oversight of certain aspects of the day care setting, such as care reviews and fire risk assessment.

Good practice was identified in relation to the provision of activities, service user involvement and staff training. There were good governance and management arrangements in place. Feedback from service users reflected their positive experience of the care and support provided. Refer to Section 3.2 for more details.

Full details, including areas for improvement identified, can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

The Inspector would like to manager, service users and staff team for their support and co-operation during 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 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 a number of service users and staff members.

Service users spoke very positively about their experience of attending the day care setting; they said they liked attending and staff were kind and always took time to listen to their views. Discussion with service users confirmed that they were able to choose how they spent their day including the provision of social activities. Service users' comments included; "Great staff and they look after me well", "We go for walks and coffee" and "I choose how I spend my day".

Staff told us that they were satisfied that the care and support was safe, effective, compassionate and well led. Staff spoke positively about the care delivery, training and management support in the day care setting. Staff comments included; "A high standard of person centred care and support is provided", "Good teamwork and good communication" and "Service users are well supported and there are lots of activities".

A returned service user questionnaire indicated that the respondent was very satisfied with the care and support provided. Comments included "My support workers always make me feel safe".

The information provided indicated that those who engaged with us had 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.

A review of the day care setting's 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 Nursing and Midwifery Council (NMC) and/or the Northern Ireland Social Care Council (NISCC); there was a system in place for professional registrations to be monitored by the manager and a record of checks retained. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

A competency and capability assessment had been completed for the staff members who were in charge of the day care setting in the absence of the manager. Review of the competency and capability assessment confirmed that the staff member had received training and was assessed as competent to undertake their role and responsibilities. Discussions with the assistant manager confirmed that they were aware of the day care setting regulations and minimum standards which they use to guide practice.

Staff provided positive feedback regarding the training they received and confirmed that it enabled them to fulfil the duties and responsibilities of their roles. Staff were provided with training appropriate to the requirements of their roles, which was recorded and monitored on a colour coded training matrix. The review concluded that staff had received mandatory and other role specific training since the previous care inspection, including moving and handling, fire awareness and medicines management. The day care setting had also provided training in regard to falls pathway and food safety, which strengthened staff competence in these areas.

There was evidence of effective systems in place to manage staffing. Staff reported collaborative team working and confirmed that they felt well supported in their roles by the manager. Staff also reported staffing levels were sufficient to meet the needs of the service users, and staff demonstrated a clear understanding of the needs, preferences and wishes of individual service users.

There was evidence of staff meetings. Staff stated they could add to the meeting agenda if there were items they wished to discuss. Minutes were maintained of the meetings for staff unable to attend, to read for information sharing.

3.3.2 Care Delivery

There was a daily meeting 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.

Discussions with staff regarding the activities they were delivering confirmed the activities were tailored to meet the needs of the service users. Service users confirmed they were asked their opinion regarding what they would like to do in the day care setting and their preferences were sought before any plans were made. Service users were enabled and supported by staff to engage and participate in meaningful activities. They discussed the range of activities they could take part in such as arts and crafts, visits to cafes, walking group, Fit for U and games.

Discussion with staff found they were informed regarding the ethos of the day care setting which promoted choice and ensured service users had access to a friendly, caring and stimulating atmosphere. Staff also discussed how they support and encourage service users to remain active and independent in the setting by ensuring they are able to access activities that they can engage in and the space they use facilitates their independence.

Staffs' approach and responses to services users were noted to be caring, cheerful and compassionate. Staff acknowledged that service users require varying degrees of support with their care needs, and that service users' independence should be promoted in an unobtrusive manner. The Inspector observed staff discreetly responding to service users who required such assistance in regards to mobilising safely, eating lunch and participating in activities.

Staff were observed informing service users that the inspection was taking place and they encouraged service users to talk to the Inspector. Service users were keen to share with the Inspector how much they enjoyed attending the day care setting and the positive relationships they have with staff.

Service users had good access to food and fluids throughout their day. The dining area was observed to be clean and warm. Service users were safely positioned for their meals and the mealtimes were observed to be well organised and supervised.

Staff communicated well to ensure that every service user received their meals in accordance with their assessed needs; it was positive to note that one staff member is responsible for checking all meals before they are provided to service users. Food provided was observed to be well presented and service users were offered a choice.

It was also positive to note that the day care setting had service users' 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

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 about 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 user's preferences and choices around how their support was provided. The details of care plans were shared 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.

A number of service users were assessed by a Speech and Language Therapist (SALT) and the documentation in place was satisfactory. A review of training records confirmed that staff had completed training on Dysphagia and in relation to how to respond to choking incidents.

Staff had completed Deprivation of Liberty Safeguards (DoLS) training appropriate to their roles. Review of a sample of care records and discussion with the manager evidenced that a number of service users who required high levels of supervision or monitoring and restrictions had their capacity considered and, where appropriate, assessed. Where a service user was experiencing a deprivation of liberty, their care records contained the correct documentation confirming the DoLS. The day care setting maintains a register of those service users who have a DoLS in place.

A number of care reviews were outstanding. Discussion with the manager confirmed that staff had endeavoured to progress these care reviews with the relevant Trust staff. However, they were unsuccessful in securing dates for these reviews. An area for improvement has been identified.

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 Darren Campbell has been the manager in this day care setting since 17 June 2019. Those consulted with described an open door policy with the manager and that they were confident that any concerns or suggestions made would be listened to and addressed.

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.

The day care setting's governance arrangements for the management of accidents/incidents were reviewed. Review confirmed that an effective incident/accident reporting policy and system was in place. Staff are required to record any incidents and accidents in a centralised electronic record, which is then reviewed and audited by the manager and the SHSCT governance department. A review of a sample of accident/incident records evidenced that these were managed appropriately.

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 has responsibility for implementing the regional protocol and the day care setting's adult safeguarding policy. There was an individual within the organisation's senior management team who was identified as the appointed ASC for the day care setting.

The day care setting retained records of any referrals made to the HSC Trust in relation to adult safeguarding. A review of a sample of records confirmed that these had been managed appropriately. Adult safeguarding matters were reviewed as part of the quality monitoring process.

The manager and staff confirmed that there was an established pathway for staff to follow in regard to raising any safeguarding concerns. They were aware of their roles and responsibilities in relation to reporting adult safeguarding concerns and maintaining safeguarding records.

Staff confirmed they had access to a range of policies and procedures, which they used to guide and inform their practice. Staff spoken with also confirmed that the manager would advise them of any updates to the relevant policies and procedures.

There was a system in place to ensure that complaints were managed in accordance with the day care settings 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 quality monitoring process. Samples of compliments were available for review and evidenced a high level of satisfaction with the service provided.

Discussion with staff confirmed that they knew how to receive and respond to complaints sensitively and were aware of their responsibility to report all complaints to the manager or the person in charge. Staff demonstrated an awareness of their role, responsibilities and knowledge of lines of accountability and who to discuss concerns with.

Discussions with the manager and staff confirmed that systems were in place to monitor staff performance and ensure that staff received support and guidance. As noted in section 3.3.1, staff spoken with during the inspection confirmed the availability of continuous update training. In addition, staff confirmed the availability of supervision/appraisal processes and staff meetings, which they described in positive terms and found beneficial.

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

3.3.5 Quality and Management of the Environment

The environment was observed during a tour of the day care setting and there was evidence of Infection Prevention and Control (IPC) measures in place such as Personal Protective Equipment (PPE), which was available for staff. Other IPC measures were in place, which included seven step hand hygiene notices positioned at wash hand basins, supplies of liquid soap and hand towels mounted on the wall and foot pedal operated bins.

It was identified that items were stored in accordance with Control of Substance Hazardous to Health (COSHH) guidance.

The day care setting was found to be warm, fresh smelling and clean throughout. The day care setting was tastefully decorated and service users' artwork was displayed.

The day care setting's fire safety precaution records were reviewed. Discussion with staff confirmed they were aware of the fire evacuation procedure.

Fire exits were observed to be clear of clutter and obstruction. All staff had completed fire safety training and participated in an annual fire evacuation drill. Fire safety checks were undertaken on a regular basis.

An updated fire risk assessment was completed in July 2025. Review of the fire risk assessment confirmed that a number of significant findings had not been addressed within the specified timeframe. An area for improvement has been identified.

4.0 Quality Improvement Plan/Areas for Improvement

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

	Regulations	Standards
Total number of Areas for Improvement	1	1

Areas for improvement and details of the Quality Improvement Plan were discussed with Mr Darren Campbell, 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 21 (1)(b) (2)(b) (3)(d) **Stated:** First time **To be completed by:** Immediate and ongoing from date of inspection	The registered person shall provide details of the action taken to address the significant findings highlighted in the fire risk assessment dated July 2025. Ref: 3.3.5
	Response by registered person detailing the actions taken: The Fire Risk Assessment dated July 2025 has been reviewed by the Registered Person. A number of the actions have been addressed and completed. The Registered Person will continue to link with the Fire Safety Department and the Health and Safety Department Lead Person/Team identified in the Actions Plans to address outstanding works highlighted in the fire risk assessment from July 2025. The Registered Person has provided the RQIA inspector with an update on actions taken to complete outstanding works on the fire risk assessmnet from July 2025.
Action required to ensure compliance with the Day Care Settings Minimum Standards August (revised) 2021	
Area for improvement 1 **Ref:** Standard 15.3 **Stated:** First time **To be completed by:** Immediate and ongoing from date of inspection	The registered person shall ensure that the initial care review should take place within four weeks of the commencement of the placement; thereafter reviews should take place at the times or intervals specified in the care plan, or in response to changing circumstances, or at the request of service users or other persons, including carers, or agencies involved in their care. As a minimum, a formal review should take place once a year. Ref: 3.3.2
	Response by registered person detailing the actions taken: The Registered Person will ensure an initial care review will take place within four weeks of the commencemnt of placement, thereafter reviews will occur at intervals specified in the care plan or in response to changing circumstances, or at the request of service users or other persons, including carers, or agencies involved in their care. As a minimum a formal review will take place once a year.

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

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