

Inspection Report

Name of Service: Newtownstewart Day Centre

Provider: Western Health and Social Care Trust

Date of Inspection: 22 April 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/Responsible Person:	Mr Neil Guckian
Registered Manager:	Ms Kyra Crawford
Service Profile: This is a day care setting that is registered to provide care and daytime activities for service users over the age of 65 who may be frail. The day care setting is open on Wednesdays and is managed by the Western Health and Social Care Trust (WHSCCT).	

2.0 Inspection summary

An unannounced inspection took place on 22 April 2026, between 11.10 am and 5 pm by a care Inspector.

The last care inspection of the day care setting was undertaken on 17 April 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. However, improvements were required to ensure the effectiveness and oversight of certain aspects of the day care setting, such as record keeping.

It was evident that staff were knowledgeable and 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 information held by RQIA about this day care setting was reviewed. 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, attending and visiting 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

During the inspection, we spoke with service users, their relatives, staff members, and a Health and Social Care (HSC) professional.

Service users' comments included: "I enjoy attending the centre. The staff are very good; they are friendly and welcoming." Another service user commented, "The manager is competent and communicates well with me. We participate in activities and are encouraged to do so, although participation is not mandatory. I go out on the bus and enjoy the outings; I find the bus journey enjoyable. I have no concerns."

A service user representative commented: "Communication with the service is very good. Management is easy to contact. There are no concerns with the service. It provides a great opportunity for respite. They receive a good lunch and are well looked after."

Staff spoke positively about the manager and the care and support delivered to service users by the day care setting. Comments included: "The manager is good, and we have a good team, we support each other. I keep my NISCC registration up to date, and my training is all current, although the training can be repetitive. We receive sufficient training for our roles. We are a person-centred service, and service users are given choice; I have no concerns, everything is grand."

A Health and Social Care (HSC) professional commented, "The communication with the service is excellent; as we have Encompass, we can share information effectively. The manager maintains good open communication; she is accessible and responsive. The manager was in communication regarding the service user's Trust Review, which is good. The staff are welcoming. It is great that the service users are going out today; the service is proactive. The carers appear to have a good understanding of the service users. I have no concerns about the service."

3.3 Inspection findings

3.3.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through staff induction, regular staff training, and ensuring that the number and skill level of staff on duty each day meet the needs of service users.

There was evidence of robust systems in place to manage staffing; it was noted that there were enough staff on duty to meet the needs of the service users.

It is positive to note that staff have received competency training to ensure that there are always competent and capable staff in charge of the day care setting in the absence of the manager.

The manager advised that there were no newly recruited staff to the day care setting and that the staff team had all worked in the day care setting for a number of years. The manager confirmed that recruitment was managed in accordance with the regulations and minimum standards, before staff members commence employment and 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. 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 is positive to note that the day care setting provides training on dementia awareness.

Procedures were established for evaluating staff performance in accordance with the day care setting's policies and procedures. A review of the staff appraisal and supervision records confirmed that these had been carried out.

3.3.2 Care Delivery

At the beginning of each shift, a daily handover takes place, which includes information about any changes to the service users' care that staff need to assist them in their roles. It was advised that staff sign to confirm their attendance at the handover, ensuring that all staff receive the necessary information.

There was a system in place to ensure that the activities offered to service users were varied and tailored towards their individual needs and preferences. Service users are supported to access activities of their own choice. Activities for service users were provided which involved both group and one to one activities. Examples of activities include day trips and art projects.

It was positive to note that the day care setting held service users' meetings on a regular basis, enabling the service users to discuss any issues they may have and explore what 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 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. However, it was identified that a service user's care plan did not accurately reflect the Speech and Language Therapy (SALT) assessment. An area for improvement has been stated.

Care reviews had been undertaken in accordance with the agency's policies and procedures.

Staff recorded regular evaluations about the care and support provided. A review of a sample of these records evidenced that they were legible, up to date and signed by the person making the entry.

Service users' care records were held confidentially.

3.3.4 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Ms Kyra Crawford has been the Registered Manager since 21 December 2022. Staff spoke positively about the manager.

Monitoring arrangements were in place in compliance with regulations and standards. A review of the agency's quality monitoring reports 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, accidents/incidents, safeguarding matters, staff recruitment and training, and staffing arrangements.

There have been no incidents since the last inspection. However, it is positive to note that if incidents occur, there is a process in place for them to be audited to establish any patterns or trends. It is also positive to note that incidents are reviewed as part of the monthly quality monitoring process.

The annual quality report was reviewed, and it was noted that stakeholder feedback was included.

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 agency's adult safeguarding policy. There was an appointed ASC for the day care setting. It was established that effective systems and processes were in place to manage the safeguarding and protection of adults at risk of harm.

It was positive to note that staff had completed adult safeguarding training, and those spoken with demonstrated a clear understanding of their responsibility in identifying and responding to any actual or suspected incidences of abuse, as well as the process for reporting concerns.

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

The fire safety precaution records for the day care setting were reviewed. There was evidence that weekly fire testing had been conducted. All staff had completed fire safety training and participated in the fire evacuation drill. A date for the annual fire risk assessment had been arranged, and fire exits were observed to be clear of clutter and obstruction.

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

4.0 Quality Improvement Plan/Areas for Improvement

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

	Regulations	Standards
Total number of Areas for Improvement	1	0

The area for improvement and details of the Quality Improvement Plan were discussed with Ms Kyra Crawford, 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 The Day Care Setting Regulations (Northern Ireland) 2007	
Area for improvement 1 Ref: Regulation 16(1)(2)(a)(b)(c)(d) Stated: First time	The Registered Person shall ensure that each service user has personalised plans containing all necessary information to enable staff to adequately and safely respond to identified needs and presenting risks. Ref:3.3.3
To be completed by: Immediate from the date of the inspection	Response by registered person detailing the actions taken: The 1 care plan highlighted during inspection has been amended to reflect all necessary information to enable staff to adequately and safely respond to individualised identified needs and prevent risks. All care plans and risk assessments have also been reviewed to ensure same.

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



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