

Inspection Report

Name of Service: Everton Day Centre

Provider: Belfast Health and Social Care Trust (BHSCT)

Date of Inspection: 15 May 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:	Belfast Health and Social Care Trust (BHSCT)
Responsible Individual/Responsible Person:	Mrs. Jennifer Walsh
Registered Manager:	Mrs. Christine Noble - Acting
Service Profile – Everton Day Centre is a day care setting which provides care and day time activities for people living with a learning disability along with possible dementia or additional mental or physical health care needs. The day care setting is open Monday to Friday and is managed by the Belfast Health and Social Care Trust (BHSCT).	

2.0 Inspection summary

An unannounced inspection took place on 15 May 2026, between 9.15 am and 4.00 pm. It was carried out by two care Inspectors.

The last care inspection of the day care setting was undertaken on 28 November 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 and is well led. Improvements were required, however, to ensure the effectiveness of the monthly monitoring quality reports. 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 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.

It was established that the staff promoted the dignity and well-being of service users and that staff delivered safe and effective care.

The Inspectors would like to thank the manager, service users and staff for their help and support in the completion of this 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 about Everton Day Centre. 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.

3.2 What people told us about the service and their quality of life

Through actively listening to a broad range of service users, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

Service users described Everton as their 'favourite place'; one told us that they didn't like the weekend as the day care setting was closed; another that they loved attending and 'seeing their friends'.

Staff described Everton as a 'safe environment where both they and service users are treated with dignity, respect, and understanding'. They told us that they felt well supported and that they 'loved 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.

Feedback from a small number of service users on the day of inspection indicated that they had concerns that staffing levels within the day care setting occasionally had a negative impact on some aspects of their activity programmes. This was discussed with the management team at the end of the inspection. While RQIA are assured that staffing levels are monitored daily and contingency actions taken if required, staffing levels will be reviewed at the next inspection.

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.

There was evidence that all newly appointed staff had completed a structured orientation and induction, having regard to the Northern Ireland Social Care Council's (NISCC) 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 agency's policies and procedures. There was a robust, structured induction programme which also included shadowing of a more experienced staff member. It was positive to note that all new staff had weekly meetings with their line manager throughout their induction.

Checks were made to ensure that staff were appropriately registered with NISCC or any other relevant regulatory body; there was a system in place for professional registrations to be monitored by the manager.

A system was in place to ensure that staff were compliant with pre-determined mandatory training requirements.

3.3.2 Care Delivery

There was a system in place to ensure that the activities offered to service users were varied and geared towards their individual needs and preferences. Activities included going out for coffee, reflexology, dancing, cooking, arts and crafts, jigsaws, gardening workshops, fitness sessions, going swimming and 'getting a chippy'. Service users spoke very positively about the activities available.

Staff interactions with service users were observed to be friendly and supportive. Service users said they had no concerns regarding their safety; they described how they could speak to staff, including transport staff, if they had any concerns about safety or the care being provided.

Service users told us how they were given choices on how they spend their day; one told us 'I can lie down if I want to'. Some commented how staff helped them with their personal care and helped them if they felt sick.

Service users had good access to food and fluids throughout the day.

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.

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. Some matters discussed included activities, transport, food and Wi-Fi.

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 and signed by 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 (SALT) 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 details of assessments completed and agreed outcomes developed in conjunction with the HSC Trust representative. A central register was in place to enable tracking of any DoLS due for review.

3.3.4 Quality of Management Systems

There are currently acting manager arrangements in place within the day care setting. RQIA have been fully appraised of this and will keep this arrangement under review.

Staff and service users provided very positive feedback regarding the management team. Service users told us that any of the management team would always help them. Multiple staff told us about the high level of support they received. One told us that 'the management's approach helps maintain a positive atmosphere within the team and contributes massively to staff wellbeing and morale, which, of course, contributes to a happier centre with service users'.

A review of the monthly monitoring reports evidenced that these contained limited staff feedback, limited review of staff training and included the review of a selection of non-contemporaneous records. The reports did not assure RQIA that improvement is being driven and embedded into practice. An area for improvement has been stated in this regard.

In the absence of the manager there was a nominated person-in-charge (PIC) to provide guidance and leadership. Changes were made to the duty rota on the day of inspection to ensure that this was more clearly outlined.

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. The manager was identified as the 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.

Staff told us that they would have no issue in raising any concerns regarding service users' safety, care practices or their environment; they described how they felt 'listened to' by the management team. Service user feedback indicated that if they had any concerns, they knew who to report them to and said they were confident that any of the staff would address their concerns.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. A compliments book was available with cards and emails of thanks.

3.3.5 Quality and Management of the Environment

The day care setting was observed to be suitably furnished, warm and comfortable and free of clutter. Art work undertaken by service users as part of their activity programme was on display throughout the day care setting.

It was noted that there were some patches of damp in various parts of the day care setting. The manager informed the Inspectors that this matter is currently being dealt with by the Estates Department within BHSCT. Details of this were shared with the day care setting's aligned RQIA Estates Inspector.

The Inspectors noted that the standard of cleanliness in a small number of areas in the day care setting was not of the required level. The Inspectors discussed this with the manager who committed to resolve the issues with immediate effect. This will be monitored at the next inspection. .

Corridors and fire exits were clear of clutter and obstruction should the need to evacuate occur and fire extinguishers were easily accessible. Staff had attended fire training and had participated in a fire evacuation drill. One service user commented 'staff make us feel safe. If the fire alarm goes off, they help us to get out'.

Fire safety checks were regularly conducted. A fire risk assessment had been completed on 8 May 2024. It was reassuring to note that the management team were in the process of sourcing an updated assessment.

Hazardous substances were noted to be stored appropriately in accordance with Control of Substances Hazardous to Health (COSHH) guidance.

It was noted that not all staff were fully compliant with one of the practices for managing infection prevention and control. Assurances were received from the manager that this would be addressed immediately after the inspection. .

Personal protective equipment and hand hygiene facilities were readily available throughout the day care setting.

4.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have 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 28(4)(a) Stated: First time	The Registered Person shall ensure the monthly quality monitoring reports include detail on staff feedback and training compliance and that all records reviewed are contemporaneous. Ref: 3.3.4
To be completed by: Immediate and ongoing from date of inspection	Response by registered person detailing the actions taken: The Registered Person will ensure that future monthly monitoring reports include staff training compliance, incorporates staff feedback, and confirm that all records reviewed relate to the same reporting period.

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



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