

Inspection Report

Name of Service: Balloo Training and Resource Centre

Provider: South Eastern Health and Social Care Trust (SEHSCT)

Date of Inspection: 25 June 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:	South Eastern Health and Social Care Trust (SEHSCT)
Responsible Individual/Responsible Person:	Ms. Roisin Coulter
Registered Manager:	Miss Susin Reid
Service Profile – Balloo Training and Resource Centre is a day care setting situated in Bangor. It is registered for a maximum of 70 service user. It delivers a programme of day care and day time activities from Monday to Friday for adults with learning disability. The day care setting is operated by SEHSCT.	

2.0 Inspection summary

An unannounced inspection took place on 25 June 2026, between 9.30 am and 4.00 pm. It was carried out by a care Inspector. The RQIA Service Improvement Officer was also present for the early part of the inspection and supported the Inspector with seeking the opinions and experiences of the manager on a general matter.

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 22 May 2025; and to determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

As a result of this inspection one area for improvement previously identified was assessed as having been addressed by the provider, one was assessed as not addressed and a third will be carried over to the next inspection. Full details, including new areas 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.

It was established 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 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 service 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 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 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 told us that there was nothing they did not like about the day care setting and that they had 'no problems'. Several told us that one of the things they liked best was 'seeing their friends'.

Staff indicated that they were very satisfied with the level of care and support given to service users.

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 systems in place to manage staffing.

There was a process in place to ensure that recruitment was managed appropriately; this ensured that all pre-employment checks, including criminal record checks (AccessNI), are completed and verified before staff members commenced employment and have direct

engagement with service users. An area for improvement identified in this regard at the last inspection will be carried forward to the next inspection.

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.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken; this included staff that were supplied by agencies. Where any staff training was due to expire, new dates had been booked.

It was evidenced during discussions with the manager that staff from another registered day care setting of which they were also the registered manager, frequently worked across both settings. RQIA is currently engaging with the service in this regard.

Service users told us repeatedly how well supported and involved they felt by the staff. They gave us examples how staff helped them to plan activities, assisted them in the bathroom and cut up their food at lunch time.

3.3.2 Care Delivery

Staff were observed to be prompt in recognising service users' needs and any early signs of distress or illness, including those service users who had difficulty in making their wishes or feelings known. Staff were skilled in communicating with service users; they were respectful, understanding and sensitive to service users' needs.

Activities for service users were provided incorporating both group and one to one activities. Birthdays and annual holidays were celebrated. Planned activities included walking groups, gardening, cookery, games, a formal, themed activity months, bus trips, bingo, movies, sensory activities, music and arts and crafts.

Good nutrition is important to the health and social wellbeing of service users. Service users may need a range of support with meals; this may include simple encouragement through to full assistance from staff and their diet modified. Service users had good access to food and fluids throughout the day. Service users were safely positioned for their meals and the mealtimes were appropriately supervised.

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.

Service users fed back that the staff made them feel safe and that they would talk to the staff if they had any problems. This included the transport staff.

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 centre and any activities they would like to become involved in.

Some matters discussed included activities, holidays and transport. One service user told us how much they enjoyed taking part in these meetings.

3.3.3 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection.

Miss Susin Reid has been the registered manager in this day care setting since 20 September 2024. She is also the registered manager of another day care setting and also manages an unregulated service, which is not subject to RQIA regulation.

The manager's presence within the day care setting was not reflected in the staff rota. This has been stated as area for improvement. The rota should clearly reflect all staff working each day and ensure staff are aware of the manager's availability to provide guidance and leadership.

Several service users told us that they would talk to the manager if they had a problem.

It was noted that the current staffing structure in the day care setting did not include team leaders or senior day care workers. The manager was responsible for all the day to day operations of the setting and the direct supervision of all day care worker staff. This current staffing model limits the opportunity for career progression and may have a negative impact on staff retention.

There were monthly monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. 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; safeguarding matters; staff recruitment and training, and staffing arrangements.

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 reviewed as part of the day care setting's monthly quality monitoring process.

The Annual Quality Report was reviewed and was satisfactory.

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

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. A specific individual was identified as the day care setting's ASC.

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

3.3.4 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. The walls were decorated with service users' art work and photographs from recent activities.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that the last full evacuation drill was undertaken on 23 October 2025. Service users told us that the fire drills made them feel safe.

Fire risk assessments for the setting were available for the inspection and had been completed on 24 July 2025. There was evidence that all recommendations had been followed up. All staff had completed fire safety training. During the inspection fire exits were observed to be clear of clutter and obstructions.

The area for improvement identified at the previous inspection in relation to the male service user toilets had been addressed by the provider. While RIQA acknowledge that developments have been made in securing approval and finance for a dedicated, standalone changing area for service users, to date this work had not commenced. This area for improvement is stated as not met for a second time.

There had been no progress on proposed work to sound proof the dining room ceiling within the day care setting. This has been stated as an area for improvement. Service users and staff continued to tell us that the dining room can be very noisy. The noise levels at lunch time meant the Inspector had to raise their voice to talk to the manager. The manager informed the Inspector that several service users decline to eat their lunch in the dining room as they feel overwhelmed by the level of noise.

4.0 Quality Improvement Plan/Areas for Improvement

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

	Regulations	Standards
Total number of Areas for Improvement	2*	2

* the total number of areas for improvement includes one that has been stated for a second time and one which is carried forward for review at the next inspection.

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 21(3)(d) Schedule 2 Stated: First time To be completed by: Immediate and ongoing from date of inspection	The Registered Person shall ensure that recruitment records include a full employment history. Ref: 3.3.1
	Response by registered person detailing the actions taken: Registered Manager will gather all information available on Amiqis regarding employment history. This is held and gathered by BSO. Any issue of gaps in employment history will be highlighted to Senior Management team.
Area for improvement 2 Ref: Regulation 26(2)(j) Stated: Second time To be completed by: 31 December 2026	The Registered Person shall ensure that suitable adaptations are made to the facilities to meet the needs of service users. This relates specifically to a dedicated, standalone changing area for service users. Ref: 3.3.4
	Response by registered person detailing the actions taken: A Business Case has been submitted and approved to fund and carry out the required work. Plans are currently being finalised for this work to be completed within this financial year.
Action required to ensure compliance with The Day Care Settings Minimum Standards August (revised) 2021	
Area for improvement 1 Ref: Standard 23.7 Stated: First time To be completed by: Immediate and ongoing from the date of inspection	The Registered Person shall A record is kept of staff working each day and the capacity in which they worked. This relates specifically to the requirement for the staff rota to include details of the manager's presence in the day care setting. Ref: 3.3.1
	Response by registered person detailing the actions taken: The registered manager will ensure that the staff rota reflects her presence in the centre.

Area for improvement 2 Ref: Standard 25.7 Stated: First time To be completed by: 31 March 2027	The Registered Person shall ensure that the premises are kept safe and suitable. This relates specifically to the requirement for sound proofing of the dining room. Ref: 3.3.4 Response by registered person detailing the actions taken: The registered manager will link with estates department to look at options for sound proofing in the dining room and take appropriate action.
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