

Inspection Report

Name of Service: Edgcumbe Assessment and Therapy Unit

Provider: Belfast Health and Social Care Trust (BHSCT)

Date of Inspection: 6 July 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:	Ms. Jennifer Welsh
Registered Manager:	Mrs. Joan Telford
Service Profile – Edgumbe Assessment and Therapy Unit is a day care setting situated in East Belfast. It provides specialist care and support to service users living with dementia. The day care setting is operational from Monday to Friday.	

2.0 Inspection summary

An unannounced inspection took place on 6 July 2026 between 10.40 am and 4.10 pm. It was carried out by a care Inspector.

The last care inspection of the day care setting was undertaken on 18 September 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 safe, effective and compassionate care was delivered to service users and that the day care setting was well led. Details and examples of the inspection findings can be found in the main body of the report. No areas for improvement were identified during this inspection.

Service users said that the care and support provided by the day care setting was a positive experience.

It was evident that staff promoted the dignity and well-being of service users and that staff were knowledgeable and well 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 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, 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 they enjoyed the activities provided and that the lunches were 'great'.

One relative expressed that the day care setting was a 'godsend' to them. They further commented that their loved one was 'so settled' when they attended the day care setting and came home much calmer.

Staff described the day care setting as a 'great place to work' and told us that they had no issues with the care and support offered 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 robust systems in place to manage staffing.

A review of a sample of recruitment records indicated that pre-employment checks had been completed before staff commenced employment.

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, three-day induction programme which also included shadowing of a more experienced staff.

Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC) or any other relevant regulatory body. There was a system in place for professional registrations to be monitored by the manager.

A robust system was in place to ensure that all staff were compliant with pre-determined mandatory training requirements. Staff confirmed they received sufficient training for their roles.

Competency assessments were undertaken on all staff to ensure that they were competent in their roles and responsibilities.

Procedures were in place for appraising the staffs' performance and supervisions were undertaken in keeping with the agency's policy and procedures.

Service users commented that the staff were 'brilliant' and a relative told us that staff were excellent at keeping in touch with them.

3.3.2 Care Delivery

There was a daily handover at the beginning of each day, which included information about any changes to the service users' care that the staff needed to assist them in their roles. Notes of these handovers were detailed and available for staff to reference throughout each day

Regular staff meetings were held, with minutes recorded and circulated to ensure staff unable to attend remained informed.

Activities for service users were provided incorporating both group and one to one activities. Birthdays and annual holidays were celebrated. Planned activities included gardening, reminiscence, outings, bingo, movies, sensory activities, music and arts and crafts. A recent service users' meeting included discussions on activities, food provision and the environment.

There was genuine warmth in the engagement by staff with service users and staff spoken with were knowledgeable regarding service users likes, dislikes and individual preferences.

Service users had good access to food and fluids throughout the day. Menus were displayed in each activity room informing service users of the meal choice for that 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.

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.

3.3.4 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Staff spoke highly of the support offered by the management team and discussed how they 'wouldn't ask us to do anything they wouldn't do and help when they can'.

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, and 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.

The Annual Quality Report was reviewed and was satisfactory.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure.

Review of incident records identified that they were managed appropriately. There was evidence that incidents were audited on a regular basis, to establish any patterns/trends. It was good to note that these were reviewed in detail as part of the monthly quality monitoring process. RQIA had been notified of incidents in keeping with the regulations.

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. This included a Resource File in place for staff; this provided clear guidance as to the process for escalating concerns and making a referral in regard to adult safeguarding in a timely manner.

Staff told us that they would have no issue in raising any concerns regarding service users' safety, care practices or their environment. They also told us that there were confident that any concerns raised would be dealt with in full.

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

3.3.5 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.

Externally the day care setting was well maintained. There was an enclosed garden area to the back of the setting where service users could participate in outdoor activities including gardening and barbecues.

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 2 June 2026. Fire risk assessments for the setting were available for the inspection and had been completed on 21 January 2025. There was evidence of follow up in regard to the recommendations. Staff fire training was up to date. It was positive to note that a proportion of the staff were trained as fire wardens. During the inspection fire exits were observed to be clear of clutter and obstructions.

It was noted that there was no dining room or large activity space within the day care setting. The manager discussed that a business case has been submitted to BSHCT in this regard. RQIA welcomes this development in terms of the flexibility it will offer service users' activity programmes and the enhancement of their dining experience. RQIA will monitor the progress of the business case.

4.0 Quality Improvement Plan/Areas for Improvement

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



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