

Inspection Report

Name of Service: Age NI Day Centre at Skainos Building

Provider: Age NI

Date of Inspection: 30 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:	Age NI
Responsible Individual/Responsible Person:	Ms Linda Robinson
Registered Manager:	Mrs Wendy McKillion
Service Profile: Age NI Day Centre at Skainos Building is a day care setting with a maximum daily capacity of 30 places. Staff in the day care setting provide care, support and day time activities for service users who are over 65 years and/or have enduring mental health conditions.	

An unannounced inspection was undertaken 30 June 2026, between 9.35 am and 2.20 pm by a care Inspector.

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 9 December 2024; and to determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

The inspection evidenced 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.

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.

Service users said that the care and support provided by Age NI Day Centre at Skainos Building was a good experience. Refer to Section 3.2 for more details.

As a result of this inspection all of the previous areas for improvement were assessed as having been addressed by the provider and no new areas for improvement were identified. Details can be found in the main body of this report.

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 Age NI Day Centre at Skainos Building 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 attending, working in, and visiting the day care setting; and 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

Through active listening, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

Engagement took place with service users attending the day care setting on the day of the inspection. Service users were keen to speak with the inspector and described attendance at the service as highly meaningful to them. Several advised that attending the day care setting provided valuable opportunities to socialise with peers, helping reduce feelings of isolation and loneliness, while giving structure and purpose to their day.

Service users consistently reported that attendance had positively impacted their quality of life, enhanced their sense of self-worth, and promoted their overall health and wellbeing. Feedback reflected the importance of the service in supporting not only social inclusion but also emotional wellbeing and independence.

The inspector participated in a planned group activity alongside service users. It was encouraging to observe the warm, respectful, and joyful interactions between service users and staff, with shared laughter and genuine engagement evident throughout. Staff were attentive, inclusive and demonstrated a person-centred approach, encouraging participation while respecting individual preferences.

Service users had unrestricted access to refreshments throughout the day and were offered food at appropriate intervals. It was positive to observe that individual dietary preferences were known by staff and accommodated wherever possible.

Discussions with staff demonstrated their passion for supporting older people to remain independent, active, and connected within their local communities for as long as possible. Staff spoke enthusiastically about the preventative and enabling ethos of the service and described a range of information sessions delivered within the day care setting to support service users.

An example included a sessions that occurred on the day of inspection providing information on accessing dental care and the financial supports available to older people, reflecting the service's commitment to promoting health, wellbeing, and informed decision-making.

Staff consistently reported high levels of job satisfaction and described the day care setting as a positive and supportive place to work. They attributed this to the effective teamwork and collaborative culture evident across the team. Staff advised that all team members, inclusive of the manager, willingly undertook any tasks necessary to ensure the efficient day-to-day operation of the service, demonstrating a shared commitment to delivering high-quality care. There was a clear sense of mutual respect amongst colleagues, and observations made during the inspection supported staff feedback.

HSC Trust representative's feedback received by the day care setting via email was observed to note the value for which Age NI Day Centre at Skainos Building is held by the community social work team. They commented how the day care setting acts a protective factor for "some of the most vulnerable in our society. Being able to attend the day centre is a lifeline for most of your attendees, providing not just a much needed social outlet, reducing their risk of isolation but it really is much more".

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.

Service users said that there was enough staff on duty to help them. Staff said there was good team work and that they felt well supported in their role and that they were satisfied with the staffing levels. Staff were observed to be responsive to service user needs, responding to requests for assistance in a prompt, caring and compassionate manner.

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.

There was a system in place for professional registrations to be monitored by the manager.

Staff provided positive feedback regarding the training they received and confirmed that it enabled them to fulfil the duties and responsibilities of their roles. Records of all staff training were retained and the manager maintained oversight of the training matrix to ensure compliance. This training included Deprivation of Liberties Safeguards (DoLS), adult safeguarding, dysphagia, at a level appropriate to their job roles. It was positive to find that staff had completed training which promoted best care delivery in respect of the bespoke needs of service users, for example staff had completed epilepsy awareness training.

Competency assessments were undertaken on all staff to ensure that they were competent in their roles and responsibilities. There was evidence of competency assessments in place for staff expected to act up in the absence of the manager.

There was a system in place to monitor appraisal and supervision compliance which evidenced that all staff had participated in supervision at a frequency aligned to that stipulated by the organisations policy and procedures. Records evidenced staff had also engaged in appraisals.

3.3.2 Care Delivery

There was a daily handover at the beginning of each shift, which included information about any changes to the service users' care, which the staff needed to assist them in their roles. There was evidence of regular staff meetings for which service user matters were discussed; records were held and minutes maintained of the meetings for staff, unable to attend, to read for information sharing.

Staff were knowledgeable of individual service users' needs, their daily routine wishes and preferences. Throughout the day observation confirmed that staff regularly liaised with one another to ensure all required tasks were appropriately assigned.

There was a system in place to ensure that the activities offered to service users were varied and geared towards service user needs and preferences. It was positive to find evidence of service user consultation occurring, with service user meeting scheduled on a regular basis, for which service users' opinions were sought about not only activities but all aspects of service provision.

It was positive to observe staff promoting service user autonomy and choice in relation to how they wish to spend their time within the day care setting. Staff demonstrated genuine interest and enthusiasm in relation to the service users' individual interests and preferences, promoting meaningful engagement and person-centred support.

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.

3.3.3 Management of Care Records

Service users care records were held confidentially in line with data protection regulations.

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 agreements were in place for all service user records sampled. These agreements, signed by the service user and/or service user representatives, clearly outlined the parameters of service provision, the responsibilities of both parties and provided essential information in an accessible manner regarding the day care settings policies and procedures.

Review of records identified that service users consent was sought in relation to the staff contacting/requesting information from other healthcare professionals on their behalf; this also included their consent for external professionals, including RQIA to access their care records. It was also positive to find service user consent sought as to what, if any, information service users wished to be shared with by the day care setting with their next of kin.

Service users were given the choice as to whether or not they wanted their photograph taken and used in any organisational promotional material or social media.

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 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.

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. There was a system in place which saw the auditing of service user records assuring these were completed to a satisfactory standard. Care reviews had been undertaken in keeping with the day care setting's policies and procedures.

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. An area for improvement previously identified relating to the replacement of furniture was found to have been appropriately addressed by the provider.

Artwork displayed throughout the day care setting was largely reminiscence in nature, including photographs of the local area from previous years and images reflecting subjects likely to be of interest to service users. This contributed to a welcoming and familiar environment, with artwork that could be utilised to support conversation and engagement.

The premises included two large, accessible bathrooms equipped with mobility aids to promote independence and safe access. A spacious communal area was available to facilitate group activities, with equipment and resources observed to be stored safely, appropriately and in an organised manner. There was also a room available to facilitate one to one conversations as required. The open-plan dining room was bright and welcoming, with modern furniture that provided a comfortable environment for service users to enjoy meals and social interactions.

There was evidence that systems and processes were in place to manage infection prevention and control which included policies and procedures and regular monitoring of the environment and staff practice to ensure compliance.

A fire risk assessment had been completed on 13 October 2025; it was identified that recommendations within the fire risk assessment had been appropriately actioned. There was evidence of regular fire safety checks being undertaken, with fire evacuation drills undertaken on a six monthly basis. Two previous areas for improvement relating to fire doors and fire warden training were assessed as having been appropriately addressed by the provider.

3.3.5 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Mrs Wendy McKillion has been the manager in this day care setting since 8 September 2010.

Service users described the manager as “a star” and “a diamond”. Staff consulted commented positively about the manager and described her as supportive, approachable and able to provide guidance. Staff commented on her commitment and dedication to improving the quality of life of the service users who attend the day care setting, highlighting her person-centred approach and genuine passion for ensuring positive outcomes for those using the service.

There was a process in place to ensure any complaints received by the agency were appropriately managed in line with the agency’s policies and procedures. It was positive to note compliance with the Northern Ireland Public Services Ombudsman’s (NISPO) Health and Social Care Model Complaints Handling Procedure. The day care setting was also found to retain a record of compliments received, for which six had been recorded from the date of the previous inspection. The nature of compliments centred upon the quality of care and support as well as the attitude and conduct of staff.

There was a system in place to ensure any incidents or accidents which may arise within the day care setting were appropriately managed. These were also reviewed as part of the monthly quality monitoring process. Discussion with staff illustrated their knowledge of organisational policies and procedures relating to incident and accident management as well as their confidence in being able to appropriately respond to such an occurrence.

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 identified individual appointed as ASC for the day care setting. It was established that good systems and processes were in place to manage the safeguarding and protection of adults at risk of harm. The annual safeguarding position report had been completed satisfactorily.

There was a protocol in place for staff to follow where service users did not attend as planned. There was also protocol in place to check the bus transport after every journey to and from the day care setting, to ensure that every service user had safely exited the bus.

Review of a sample of records evidenced that a robust system for reviewing the quality of care and staff practices was in place. 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 annual quality report was reviewed and noted to include service user and stakeholder feedback. It was positive to find that one hundred per cent of service users who responded stated that they were happy with the day care setting and moreover stated that they would recommend the service to someone else.

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 Mrs Wendy McKillion, Registered Manager as part of the inspection process and can be found in the main body of the report.



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