The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: **Cairnmount Day Centre**

Provider: **Cairnhill Home 'A' Ltd**

Date of Inspection: **24 August 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:	Cairnhill Home 'A' Ltd
Responsible Individual:	Mr James Digney
Registered Manager:	Mrs Katrina Poland
Service Profile – Cairnmount Day Centre has places for up to 25 service users a day; Monday to Friday. Providing services to those with Learning Difficulties. The services provided for each service user will vary according to the individuals' assessed need. The Southern Health and Social Services Trust (SHSCT) commission these services.	

2.0 Inspection summary

An unannounced inspection took place on 24 August 2026, between 08.50 am and 2.30 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 area for improvement identified, by RQIA, during the last care inspection on 20 May 2025; and to determine if the day care is delivering safe, effective and compassionate care and if the service is well led.

The inspection found 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 they loved Cairnmount Day Centre. Refer to Section 3.2 for more details.

There was evidence at inspection that the provider had taken necessary action in relation to the previously identified area for improvement. One new area for improvement was identified during this inspection. This related to recruitment.

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 the previous area 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 and attending 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 and their quality of life

During the inspection, we spoke with service users, healthcare professionals and staff members.

Service users spoke positively about the management, staff, and their experience of attending the day care setting. They said the manager and staff were good, that they enjoyed attending, and felt safe. Service users were complimentary in relation to the food, the activities and the friendships.

Comments received from health care professionals included: "This is an excellent centre, staff are approachable, nothing is unsolvable here. The service users are comfortable and involved here as much as they want to. It has been lovely to see service users blossom."

Staff spoke positively about care delivery and management support in the day care setting.

Information provided indicates that those who engage with us have no concerns in relation to the day care setting.

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 skills of staff on duty each day meet the needs of service users. There was evidence of effective systems in place to manage staffing.

Staff spoke positively about the staff team and the manager. It was observed that staff responded to requests for assistance promptly in a caring and compassionate manner. It was evident that staff had a good understanding of the needs, likes, and dislikes of individual service users.

A review of the staff recruitment records confirmed that criminal record checks (Access NI), pre had been completed and verified before staff members commenced employment and engaged directly with service users. In one case, a reference from an employer and a health declaration had been completed after the staff member had commenced employment. An area for improvement has been identified.

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 was positive to note that the day care setting provided training in Autism awareness, Dysphagia awareness, Learning disability and Autism as well as Meaningful activities. Staff consulted spoke positively about the training they receive and confirmed that they received sufficient training to enable them to fulfil the duties and responsibilities of their role.

Competency assessments were completed for staff expected to take the lead in the manager's absence, ensuring they were proficient in their roles and responsibilities.

3.3.2 Care Delivery

There was a morning huddle at the beginning of each shift, which included information about any changes to the service users' care that the staff needed to assist them in their roles.

A system was in place to ensure that the activities offered to service users were varied and tailored to their individual needs and preferences. Service users are supported to access activities of their own choice. Activities for service users were provided, involving both group and one to one activity. Observations of service users included a group involved in a gardening activity, while others were involved in craft activities in preparation for their carnival. Other service users had chosen to play tennis on the outside area of the day care setting, while a

small group of service users enjoyed singing. On the day of inspection the service users were found to be enthusiastically participating.

Good nutrition and a positive dining experience are 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 may be modified. A review of records and discussion with the person in charge evidenced that systems were in place to manage service users' nutrition and mealtime experience. It was positive that the menu considered service user preferences. It was also positive to note that all staff had received training in dysphagia.

Staff were observed to be respectful in their interactions with service users, knowledgeable of their likes and dislikes and interested in the updates from the service users from their previous attendance at the day care setting.

3.3.3 Management of Care Records

The service users' care plans included details of the level of care and support they might require. Staff regularly recorded evaluations of the delivery of care and support provided to the service users. Care records demonstrated that service users, where possible, were involved in planning their own care, and efforts were made to determine service users' preferences and choices regarding how their support was provided.

Care records were person centred, the manager shared plans to implement a new system to ensure the care records were regularly reviewed.

Care reviews had not been consistently undertaken in accordance with the day care setting's policies and procedures. The manager has agreed to monitor the progress with care reviews being completed.

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. Mrs Katrina Poland has been the manager in this day care setting since 2 June 2023. Staff and service users spoke positively about the manager.

There were monitoring arrangements in place in compliance with Regulations and Standards. A review of the reports of the day care setting's quality monitoring established that there was engagement with service users, service users' relatives, staff and Health and Social Care (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.

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 positive to note that these were reviewed in detail as part of the monthly quality monitoring process.

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 day care setting's adult safeguarding policy. There was an appointed 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.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. No complaints were received since the last inspection.

Discussion took place at inspection in relation to the bus transport arrangements. The manager aims to devise a protocol for this aspect of the service users' care. This will be reviewed at future inspection.

There was evidence that fire safety checks had been completed as required. Staff had completed training regarding fire safety and had participated in a fire evacuation drill. Throughout the inspection, fire doors were observed to be unobstructed.

The environment was observed during a guided tour by a service user of the day care setting, and it was identified that hazardous substances were stored appropriately in accordance with Control of Substances Hazardous to Health (COSHH) guidance.

The day care setting was observed to be clean and tidy, suitably furnished, warm and comfortable, and free of clutter.

4.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has 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 Mrs Katrina Poland, 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 Schedule 2 **Stated:** First time **To be completed by:** Immediately from the date of inspection	The Registered Person shall ensure that full and satisfactory information is available in relation to him in respect of each of the matters specified in Schedule 2; this relates specifically to health declarations and references being obtained prior to the commencement of employment. Ref: 3.3.1
	Response by registered person detailing the actions taken: Recruitment policy updated 25th August 2026. New candidate to start on 14th September 2026 checked file 10/09/2026 2 references and health declation received.

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

The Regulation and Quality Improvement Authority

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