The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: **Mica Day Centre**

Provider: **Belfast Health and Social Care Trust (SHSCT)**

Date of Inspection: **17 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:	Belfast Health and Social Care Trust
Responsible Individual:	Ms. Jennifer Welsh
Registered Manager:	Ms. Maria O'Hagan
Service Profile – Mica Day Centre is a Day Care Service located in Belfast. The day-care setting provides care and daytime activities for up to 40 service users with Learning Disability. The centre is open Monday to Friday and is operated by the Belfast Health and Social Care Trust (SHSCT).	

2.0 Inspection summary

A care Inspector completed an unannounced inspection on 17 August 2026 between 8.00am and 1.00 p.m.

The last care inspection of the day care setting was undertaken on 18 August 2025 by a care Inspector. The Inspector did not identify any Areas for Improvement during this inspection.

This inspection was undertaken to evidence how Mica Day Centre 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 managed.

To that end, the inspection examined the day care setting's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training and adult safeguarding. The Inspector also examined the processes for reporting and recording of accidents and incidents, complaints, whistleblowing, Deprivation of Liberty Safeguards (DoLS), service user involvement, restrictive practices and dysphagia management.

The Inspector identified good practice in relation to monthly quality monitoring, safeguarding documentation, care planning and feedback from service users, staff and relatives. There were good governance and management arrangements in place.

The Inspector did not identify any Areas for Improvement during 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 Mica Day Centre 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.

Throughout the inspection process, inspectors seek the views of those working for or receiving support from 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 day care setting?

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

The service users who spoke with the Inspector gave very positive feedback. One service user stated that that 'I'm very happy here. I come every day'. Another commented that 'I like it here. They're very good to me'. Throughout the inspection, the Inspector noted that all service users appeared very happy and relaxed. There appeared to be a good relationship between staff and service users.

Several members of staff on duty gave very positive feedback about the day care setting, the support provided by the manager and how much they enjoyed the training provided to them. One stated that 'there is a great atmosphere here. Everyone gets on well'. Another stated that 'I love it here. That is why I have stayed so long. The training is great'. Another stated that 'management are very approachable and supportive. The debrief sessions are very good and this reduces stress'.

One relative of a service user stated that 'I find Mica great. My relative is very happy there. She loves going'. Another commented that 'my relative is very happy there. The staff are great and very caring'.

One visiting professional who spoke with the Inspector commented that 'I love going to Mica to review service users. The staff are great'

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. The manager reported that the day care setting has recently completed a successful recruitment process and had one current vacancy.

Recruitment for the day care setting is managed regionally through Recruitment Shared Services (RSS) which is part of the Business Services Organisation (BSO). The Inspector subsequently confirmed that all pre-employment checks, including criminal records checks (AccessNI), were completed before members of staff commenced employment and had direct engagement with service users. The manager was knowledgeable in this area.

The manager confirmed that three new members of staff had been recruited since the last inspection. The Inspector subsequently gained access to recruitment documentation through the Amiqus system.

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 day care setting's policies and procedures. There was a robust, structured, induction programme, which also included shadowing of a more experienced staff member.

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 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.

Records of all staff training were retained and the manager confirmed that she and her assistant managers maintained oversight of the training matrix to ensure compliance. This training included Deprivation of Liberties Safeguards (DoLS), adult safeguarding, Dysphagia etc., at a level appropriate to staff job roles. Staff confirmed that they were provided with opportunities to complete mandatory training commensurate with their role and are actively encouraged by the manager to develop new skills and knowledge. The Inspector reviewed the training matrix and confirmed that the majority of training was up to date. Where training was about to expire, the day care setting had booked updates.

Procedures were in place for appraising staff performance and staff confirmed that supervision and appraisals had taken place. Records evidenced that staff supervisions had been completed regularly and that appraisals had been completed on an annual basis.

The day care setting holds staff meetings every month and retains the minutes. The Inspector reviewed the minutes.

3.3.2 Care Delivery

Staff were knowledgeable of individual service users' needs, their daily routine wishes and preferences.

Staff met the needs of service users' through a range of support activities. The agency promotes the independence of the service users. It was reassuring to note that service users reported that staff consulted them about the activities they preferred, ensuring their views informed and shaped day care activities. The Inspector viewed the extensive programme of day care activities for service users.

The Inspector viewed records of regular service user meetings which are held monthly. The manager noted that the day care setting participates in a citywide service user group from across Belfast. This group meets quarterly.

3.3.3 Management of Care Records

The Inspector reviewed care records on the Epic system and found them to be person-centred, well maintained, regularly reviewed, and updated to ensure they continued to meet the service users' needs. Individual support workers reviewed support plans for their aligned service users monthly and care records evidenced this. The manager reported that several service users required dietary modification. The Inspector noted that care plans reflected the Speech and Language Therapy assessment.

The manager confirmed that one service user was subject to a full Deprivation of Liberty Standards (DoLS). The Inspector viewed the DoLs register and confirmed that all forms were up to date. The day care setting kept a DoLS folder for staff to reference.

There was a policy in place for the use of restrictive interventions. The day care setting maintained a register, which is reviewed and updated annually. The manager reported that one service user was subject to restrictive practices regarding the need for 1-1 supervision.

3.3.4 Quality of Management Systems

The Inspector reviewed of a sample of monthly monitoring reports, which evidenced that a robust system for reviewing the quality of care and staff practices was in place. The Inspector reviewed the reports and confirmed that these included engagement with service users, service users' relatives, staff and HSC Trust representatives. The reports included details of a review of the care records of service users; accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements.

The Inspector reviewed the day care setting's process for the management of complaints and noted that the day care setting had received one complaint since the last inspection. The Inspector noted that the manager had handled this complaint appropriately and the complaint had been closed. The manager commented that all staff receive Stage 1 complaints training. The manager and assistant managers undertake further complaints training in the model for complaints handling, which has been developed by the Office of the Northern Ireland Ombudsman.

Review of incident records, which are completed via the BHSCT datix system, identified that the manager had managed these appropriately. There was evidence that the manager audited incidents on a regular basis, to establish any patterns/trends. The day care setting also reviewed incidents as part of the monthly quality monitoring process

The Inspector viewed the annual quality report, which included stakeholder feedback.

The Inspector confirmed that the day care setting had very effective systems and processes in place to manage the safeguarding and protection of adults at risk of harm. The day care setting had managed eleven safeguarding incidents since the last inspection. The Inspector confirmed that these had been handled appropriately and had subsequently been closed. The Inspector was able to cross-reference safeguarding incidents with datix incidents. The manager was aware of the need to notify RQIA of any incidents, which involve the Police Service of Northern Ireland (PSNI).

A fire risk assessment had been completed for the day care setting on 25/6/25. There was evidence that staff completed fire safety checks as required. Staff had completed training fire safety and had participated in a fire evacuation drill.

4.0 Quality Improvement Plan/Areas for Improvement

The Inspector did not identify any Areas for Improvement during this inspection. The Inspector discussed the findings of the inspection with Ms. Maria O'Hagan (Registered Manager) and Mr. Neil Wilson (Assistant Manager) as part of the inspection process. These can be found in the main body of the report.

The Regulation and Quality Improvement Authority

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