The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: Enler Day Centre

Provider: Belfast HSC Trust

Date of Inspection: 20 August 2026

Information on legislation and standards underpinning inspections can be found on our website https://www.rqia.org.uk/

Organisation/Registered Provider:	Belfast HSC Trust (BHSCT)
Responsible Individual/Responsible Person:	Mrs Jennifer Welsh
Registered Manager:	Miss Carrie McAllister
Service Profile: This is a Day Care Setting that provides care and support, between Monday to Friday, for adults who are aged 65 years and over. Individuals who attend may have a diagnosis of dementia and / or a mental health diagnosis or a physical disability.	

2.0 Inspection summary

An unannounced inspection was conducted on 20 August 2026 between 10.25 a.m. and 3.40 p.m. by 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 22 July 2025; the inspection also sought to determine if the day care setting 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 established 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 Enler Day Centre was a good experience. Refer to Section 3.2 for more details.

No areas for improvement were identified 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 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 information held by RQIA about this day care setting was reviewed. This included registration information, and any other written or verbal information received from service users, their representatives, 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 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

Service users told us that Enler Day Centre "provides a much needed service" which alleviates loneliness, social isolation and provides meaning to their day. All service users consulted advised that they enjoy attending the day care setting.

Staff were described as "brilliant", "lovely", "respectful" and "kind". Service users told us that they felt staff actively listened to them and responded to feedback received. Service users consulted described a sense of autonomy and meaningful involvement within the day care setting.

Two service users involved in the review of annual satisfaction surveys demonstrated pride when explaining the objectives underpinning the project and the methodology deployed by the group. This evidenced a strengths based approach deployed by the day care setting, recognising the skills of service users and actively promoting their involvement in quality improvement processes.

Service users were highly complementary about the quality of the food provided. Whilst consulting with service users during a break within the dining area, those with hearing impairments did express that it can be quite noisy and thus difficult to converse. In discussion with the manager they stated that they were aware of this and actively seeking means to improve the dining experience for all service users.

Service users consulted expressed dissatisfaction with the reliability and consistency of transport arrangements to and from the day care setting. They reported that changes to transport arrangements could occur at short notice, resulting in occasions when they were unable to attend the setting. Where attendance was possible, service users described the impact of transport arrangements on the duration of time available to participate in the day care programme.

Service users acknowledged the efforts made by day care staff to minimise the impact of transport difficulties. However, they considered that further action was required by the BHSCT to address the underlying issues. Service users confirmed that they had been supported to raise their concerns through the complaints process and demonstrated awareness of the Northern Ireland Public Services Ombudsman (NIPSO) as an avenue for further consideration of unresolved complaints.

The issues relating to transport were also reported to have an impact on staff. Additional time was required to develop contingency arrangements to facilitate service users' attendance, communicate changes to affected individuals complete incident documentation and undertake monthly escalation reporting. These activities were undertaken in addition to the routine operational responsibilities associated with managing the day care setting and without additional staffing resources. Staff reported that the cumulative demands associated with managing transport-related issues placed additional pressure on the team and operational capacity.

Despite the challenges faced, staff described a positive work culture characterised by collaborative working and a shared focus on achieving positive outcomes for service users. Staff reported that individual skills, knowledge and areas of expertise were recognised and utilised in the planning and delivery of activities. This contributed to the development of a varied and diverse programme of activities tailored to the service users' interests, abilities and needs.

Feedback recorded by the day care setting from HSC representatives was positive describing "very good communication" and the provision of person-centred care.

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.

Observations throughout the day illustrated there was enough staff in the day care setting to respond to the needs of the service users in a timely way, and to provide service users with a choice on how they wished to spend their day.

Review of the agency's staff recruitment records confirmed that all pre-employment checks, including criminal record checks (AccessNI), were completed and verified before staff members commenced employment and had direct engagement with service users.

Checks were made to ensure that staff were appropriately registered with 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.

Newly appointed staff had completed a structured orientation and induction to ensure they were competent to carry out the duties of their job. Staff spoke positively as to the induction received and support provided by colleagues.

Records of all staff training were retained and the manager maintained oversight of the training matrix to ensure compliance. This training included adult safeguarding, dysphagia and manual handling at a level appropriate to job roles. It was positive to note find evidence of forward planning occurring with training needs identified and sessions booked in advance.

There was evidence that all staff received regular supervision and there were clear procedures in place for appraising staff performance.

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 that the staff needed to assist them in their roles. Regular staff meetings were held and minutes retained so that any staff unable to attend could read.

There was a system in place to ensure that the activities offered to service users were varied and geared towards their individual needs and preferences. Activities planned were denoted throughout the centre on whiteboards and staff were observed providing verbal reminders as to options available.

There was diverse array of meaningful activities scheduled within the day care setting which ranged from poetry, mindfulness, art therapy and reminiscence workshops to circus skills and community outings.

Service users confirmed they were asked their opinion regarding what they would like to do in the day care setting and their preferences were sought before any plans were made. Service users were enabled and supported by staff to engage and participate in meaningful activities.

Staffs' approach and responses to services users were noted to be caring, respectful and compassionate. Staff acknowledged that service users require varying degrees of support with their care needs, and that service users' independence should be promoted in an unobtrusive manner. We observed staff discreetly responding to service users who required such assistance in regards to mobilising safely and eating.

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.

Service users had good access to food and fluids throughout their day. The dining area was observed to be clean and warm. Service users were safely positioned for their meals and the mealtimes were observed to be well organised and supervised.

Staff communicated well to ensure that every service user received their meals in accordance with their assessed needs; it was positive to note that one staff member is responsible for checking all meals before they are provided to service users. Food provided was observed to be well presented and service users were offered a choice.

It was also positive to note that the day care setting had service users' meetings on a regular basis which enabled the service users to discuss what they wanted from attending the day care setting and any activities they would like to become involved in.

Additionally, an area of good practice was recognised in recent service user involvement which saw the redesign of annual service user surveys.

3.3.3 Management of Care Records

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

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. It was also positive to find service user consent sought as to use of photography/videography and what, if any, information service users wished to be shared with by the day care setting with their next of kin.

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.

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.

A number of service users were assessed by a Speech and Language Therapist (SALT) and the documentation in place was satisfactory. A review of training records confirmed that staff had completed training on Dysphagia and in relation to how to respond to choking incidents.

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. Recent maintenance work had been undertaken within the day care setting in respects of paintwork which enhanced the appearance of the day care setting.

There was art work displayed throughout the day care setting which had been completed by service users which provided meaningful recognition of individuals and groups creativity and achievements, promoted a sense of pride and belonging and contributed to a welcoming, person-centred environment.

The day care setting's facilities were observed to appropriately meet the needs of attendees with mobility difficulties.

Wide corridors, suitable equipment and accessible bathroom facilities supported safe and independent movement throughout the setting and promoted attendees' dignity, comfort and inclusion.

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.

Hazardous substances were noted to be stored appropriately in accordance with Control of Substances Hazardous to Health (COSHH) guidance.

A fire risk assessment had been completed on 07 March 2025; the recommendations within the fire risk assessment had been actioned. There was evidence that fire safety checks had been completed as required. Staff had completed training in regard to fire safety, and had participated in a fire evacuation drill. Throughout the inspection, fire doors were observed to be unobstructed.

3.3.5 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Miss Carrie McAllister has been the manager in this day care setting since 18 February 2024.

Those consulted with commented positively about the manager and described her as supportive, approachable and able to provide guidance. Service users consulted spoke positively about the manager describing her as "helpful" and readily available whenever needed.

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. The day care setting was also found to retain a record of compliments received. . The nature of compliments reviewed, 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.

There was a protocol in place for staff to follow where service users did not attend as planned. There was also a clear 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 and evidence that this had been followed. It was positive to find records were regularly audited.

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

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 however a suggestion was made that further analysis of incidents and accidents would strengthen this process. The manager was receptive and agreed to appropriately share this recommendation with relevant personnel.

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 Carrie McAllister, Registered Manager, as part of the inspection process and can be found in the main body of the report.

The Regulation and Quality Improvement Authority

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