The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: Mount Oriel Day Centre

Provider: Belfast Health and Social Care Trust (BHSCT)

Date of Inspection: 21 August 2026

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

1.0 Service information

Registered Provider:	Belfast Health and Social Care Trust (BHSCT)
Responsible Person:	Ms. Jennifer Welsh
Registered Manager:	Ms. Julie Robinson
Service Profile – Mount Oriel Day Centre is a day care setting located in Belfast. The day care setting provides services to a maximum of 75 service users. The centre provides 50 places per day for older people and 25 places for adults living with a learning disability. This service is operated by the BHSCT.	

2.0 Inspection summary

A care Inspector completed an unannounced inspection on 21 August 2026 between 8.30 am and 12.30 p.m.

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

This inspection was undertaken to evidence how Mount Oriel 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 incident management, recruitment processes, care planning, activity programming, and feedback from service users and staff. 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 Mount Oriel 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'. Another commented that 'I enjoy coming every day. I have good friends here'. Another stated that 'I get good opportunities here and enjoy meeting my friends'. 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 induction and 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 agency member of staff confirmed that she had received extra training to be a bus guide, and really enjoyed it.

One relative of a service user stated that 'I find Mount Oriel great. My relative is very happy there. She loves going'. Another commented that 'I couldn't fault it. It's a lifesaver for me'.

One visiting professional who spoke with the Inspector commented that 'I love Mount Oriel. The staff are all so welcoming and the service users all seem so happy'. Another stated that 'I have absolutely no issues with my service users in Mount Oriel'.

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 person in charge reported that the day care setting currently has three vacancies, and currently uses block booked agency staff. The service is currently facing challenges in the recruitment of bus drivers.

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 person in charge was knowledgeable in this area.

The person in charge confirmed that two 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 professional registrations to be monitored by the manager. The Inspector spoke with staff who confirmed that they were aware of their responsibilities to keep their registrations up to date.

Records of all staff training were retained and the person in charge reported that she maintained oversight of the training matrix to ensure compliance. This training included mandatory training such as Deprivation of Liberties Safeguards (DoLS), adult safeguarding, Dysphagia etc., which was at a level appropriate to staff job roles. Staff confirmed that they were provided with opportunities to complete 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 appraisals had taken place. Records evidenced that supervision sessions took place on a regular basis and appraisals had been completed annually.

3.3.2 Care Delivery

The day care setting held staff meetings every month and retained the minutes.

The Inspector viewed records of regular service user meetings which were held by the day care setting.

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 day care setting promotes the independence of the service users as far as possible. 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.

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 by individual support workers aligned to a group of service users, and updated to ensure they continued to meet the service users' needs. Where service users required dietary modification, care plans reflected the Speech and Language Therapy assessment. Where specialist equipment was required, care plans and risk assessments were clear regarding the name and type of equipment to be used.

The person in charge confirmed that two of the service users was subject to 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 person in charge reported that two service users were subject to restrictive practices in relation to the use of a wheelchair and a specialist harness. The Inspector viewed documentation for both.

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 two complaints since the last inspection. The day care setting had handled these appropriately. The Inspector was pleased to note that in the same timeframe the service had received over one hundred compliments. The person in charge confirmed that all staff receive complaints training but the manager and two assistant managers had undertaken 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 these had been managed 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 effective systems and processes were in place to manage the safeguarding and protection of adults at risk of harm. The day care setting had managed a number of safeguarding incidents since the last inspection. The Inspector confirmed that these had been handled appropriately and had subsequently been closed. The person in charge 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 7/1/25 and was due to be repeated on 6/1/27. 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 Mrs. Rachel Keys (Assistant Manager and person in charge) 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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