The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: **Orchardville Training and Resource 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/

1.0 Service information

Registered Provider:	Belfast HSC Trust
Responsible Person:	Ms Jennifer Welsh
Registered Manager:	Mr Terry McCrea
Service Profile – Orchardville Training and Resource Centre is a day care setting that provides care and support for up to 90 adults who live within the Belfast Health and Social Care (BHSC) Trust area. Service users have a learning disability and may have a range of additional disabilities/conditions including profound and multiple disabilities, complex healthcare needs, dementia, autism, mental ill health, behaviours which challenge and sensory impairment. The day care setting is open Monday to Friday and is managed by the Belfast Health and Social Care (BHSC) Trust.	

2.0 Inspection summary

An unannounced inspection took place on 20 August 2026 by a care Inspector between10.30 am and 4.05 pm.

The last care inspection completed on 15 May 2025 identified no areas for improvement. This inspection was undertaken to evidence how the service was 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 led.

Good practice was identified in relation to service user involvement and range of activities to avail of. There were good governance and management arrangements in place.

Service users said that the care and support provided by Orchardville Training and Resource Centre was a good experience.

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 service 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 will seek the views of those attending, working and visiting the day care setting; and review/examine a sample of records to evidence how the home is performing in relation to the regulations and standards.

3.2 What people told us about the service and their quality of life

We sought feedback from a range of service users, relatives, staff and a healthcare professional in relation to their views of attending, visiting and working within this day care setting. The information provided positive feedback about the care and support provided. There were no concerns in relation to the day care setting.

Service users whom we spoke with said that attending Orchardville Training and Resource Centre was enjoyable and that support they received from staff was good.

Relatives who provided feedback on the service said that they were very happy with the support provided to their loved one and that their relative enjoyed their time at the day care setting. Some comments received included the following statements: "Fantastic service, they are good at communicating with us and we can go to them with any concerns. I would highly recommend it" and "My relative loves it – and we are over the moon with it".

Staff who spoke with the inspector spoke positively about the service and support provided to service users who attend. They said that service users are provided with a good range of stimulating activities and have a good experience when attending the day care setting. Staff said that the training was of a good standard, that the support they received from management was good; and that it was a lovely place to work.

A relative responded to the electronic survey and indicated that they were 'very satisfied' that care provided was safe, effective and compassionate and that the service was well led.

A healthcare professional contacted for feedback on the service said that staff are good at listening and following recommendations given by professionals involved with service users and that they know the clients well and treat them with the utmost respect.

3.3 Inspection findings

3.3.1 Adult Safeguarding and Incident Reporting

The day care setting's provision for the welfare, care and protection of service users was reviewed. The organisation's policy and procedures reflected information contained within the Department of Health's (DoH) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

Discussions with the manager established that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting and managing adult safeguarding concerns.

Staff were required to complete adult safeguarding training during induction and every two years thereafter. Staff who spoke with the inspector had a clear understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns in normal business hours and out of hours. They could also describe their role in relation to reporting poor practice and their understanding of the day care setting's policy and procedure with regard to whistleblowing.

The day care setting retained records of any referrals made to the HSC Trust in relation to adult safeguarding. A review of records confirmed that these had been managed appropriately. It was positive to note that all adult safeguarding concerns were recorded on a centralised recording system which had been developed to assist staff in checking that all actions had been completed as appropriate in line with the adult safeguarding policies and procedures.

The day care setting's governance arrangements for the management of accidents/incidents was reviewed and confirmed that an effective incident/accident reporting policy and system was in place. The manager maintained a centralised record of incidents / accidents arising and this was reviewed on a bi-monthly basis. It was recommended that this tracker document should include unique identifiers of service user/ witnesses to incident to ensure accuracy when recording and reviewing same. The manager took on board this advice and agreed to implement going forward. This will be reviewed at a future inspection. The manager was aware that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

3.3.2 Mental Capacity and Restrictive Practice

The Mental Capacity Act (Northern Ireland) 2016) (MCA) provides a legal framework for making decisions on behalf of service users who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, service users make their own decisions and are helped to do so when needed. When service users lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

Staff had completed appropriate Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. There were arrangements in place to ensure that service users who required high levels of supervision or monitoring and restriction had had their capacity considered and, where appropriate, assessed. A register was in place to record all service users with DoLS in place which was reviewed regularly by the manager to ensure that any restrictions on liberty were proportionate and necessary for the safety and well-being of the individual in line with the legislation.

There was a policy for the use of restrictive interventions. The manager advised that other restrictive practices applied within the day care setting such as wheelchair lap- belts and foot-straps were assessed by the multidisciplinary team, recorded on a register and reviewed every six months to ensure adherence to principles of necessity and proportionality.

3.3.3 Staffing Arrangements (recruitment and selection and induction)

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.

Observation of the delivery of care evidenced that service users' needs were met by the number and skills of the staff on duty. Staff said they felt well supported in their role.

A review of the day care setting's staff recruitment records of an employee recruited since the last inspection evidenced that enhanced AccessNI checks had been completed for staff prior to commencing direct work with service users.

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 the monitoring of professional registrations by the manager.

There was evidence that all newly appointed staff had completed a structured orientation and induction, having regard to NISCC's 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.

3.3.4 Staff Training

Staff were provided with training appropriate to the requirements of their role, which was recorded on a colour-coded matrix. A review of the training matrix confirmed that staff had completed training appropriate to their roles including; Adult Safeguarding, Moving and Handling, Dysphagia, Basic Life Support, DoLS, Safety Intervention and Infection Control. Staff who spoke with the inspector said that they felt the training provided was useful and helped them to carry out care tasks as required in line with their roles and responsibilities.

Where service users required the use of specialised equipment to assist them with moving, this was included within the day care setting's mandatory training programme.

All day care staff had been provided with training in relation to medicines management which is refreshed every two years and consists of both online and face to face training. A competency assessment was undertaken for all staff who assist with medication to ensure they were competent in assisting with this task.

3.3.5 Management of Dysphagia and Recommendations for Eating, Drinking and Swallowing Documents (REDS)

A number of service users had been assessed by a Speech and Language Therapist (SALT) with recommendations in place regarding the consistency of their food and fluids. Staff had completed training in dysphagia and were familiar with how food and fluids should be modified and had completed training in Dysphagia and in relation to how to respond to choking incidents. Staff followed a clear programme for each service user with SALT requirements at meal times to ensure the care received in the setting was safe and effective.

3.3.6 Care Records and Service User Input

Discussions with staff and review of service users' care records reflected the multi-disciplinary input and the collaborative working undertaken to ensure service users' health and social care needs were met within the day care setting.

A review of service users' care records identified that each service user had a detailed, person centred support plan and robust risk assessment. Care records evidenced multi-disciplinary working and regular communication with relevant professionals from the commencement of the day care placement. Care plans contained details about their likes and dislikes and the level of support they may require. These plans are kept under regular review and service users and / or their relatives participate, where appropriate, in the review of the care provided on an annual basis, or when changes occur, in keeping with the day care setting's policies and procedures. Care reviews had been undertaken in keeping with the day care setting's policies and procedures. There was evidence of regular contact with service users and their representatives, in line with the commissioning Trust's requirements.

The day care setting held service user meetings every two months to discuss topics and activities of their interests. It was positive to note that staff coordinated activities a month in advance and recorded these on pictorial timetables which were on display on the noticeboards within the centre. Some of the activities arranged included; bingo, card-making, gardening, movies, fitness class & ball games, story time, armchair exercises, music yard, party animals NI, family day BBQ, petting farm visits, disco dancing, line dancing, karaoke, quizzes and boccia. There were also arrangements for service users to help with specific tasks of their choosing around the day care setting.

3.3.7 Quality and Management of the Environment

The day care setting was observed to be clean, tidy and suitably furnished. It was bright and colourfully decorated with art completed by service users on display around the centre. The environment was warm and comfortable.

A review of the most recent fire risk assessment indicated that all actions had been completed. There was evidence that fire safety checks had been completed as required and that staff had participated in a fire evacuation drill. Throughout the inspection fire doors were observed to be unobstructed.

3.3.8 Governance and Managerial Oversight

There has been no change in the management of the day care setting since the last inspection. Mr Terry McCrea has been the manager in this day care setting since 7 February 2023. Staff spoke positively about the manager and described him as supportive and approachable.

There were monthly monitoring arrangements in place in compliance with the regulations and standards. A review of a sample of the reports of the day care setting's monthly quality monitoring established that there was engagement with service users, service users' relatives, staff and HSC Trust representatives. The reports included details of a review of accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements. Advice was given to the manager regarding including a breakdown of incident type within reports as well as confirmation that any necessary actions had been completed. This will be reviewed at a future inspection.

The Annual Quality Report was reviewed and was satisfactory.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

The day care setting's registration certificate was up to date and displayed appropriately.

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

There was a system in place for managing instances where a service user did not attend the day centre as planned.

5.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. The findings were discussed with Mr Terry McCrea Manager, following the inspection and can be found in the main body of the report.

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James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA

Tel: 028 9536 1111

Email: info@rqia.org.uk

Web: www.rqia.org.uk

Twitter: @RQIANews