The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: Strabane Day Centre

Provider: Western Health and Social Care Trust

Date of Inspection: 14 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:	Western Health and Social Care Trust
Responsible Person:	Mrs Karen Hargan
Registered Manager:	Mrs Sonia Marie McDermott
Service Profile: Strabane Day Centre is a day care setting that provides care and day time activities for up to 40 adults with a range of needs associated with old age, learning disability, physical disability and dementia. The day centre is open Monday to Friday and is operated by the Western Health and Social Care Trust (WHSCT).	

2.0 Inspection summary

An unannounced inspection was undertaken 14 August 2026, between 10.20 am and 3.30 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 areas for improvement identified, by RQIA, during the last care inspection on 17 April 2025; and to determine if the day care setting is delivering safe, effective and compassionate care and if the service is well led.

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 the care and support provided by Strabane Day Centre was a good experience. Refer to Section 3.2 for more details.

As a result of this inspection two areas for improvement previously identified were assessed as having been addressed by the provider. Two areas for improvement have been stated for a second time. No new areas for improvement were identified. Full details, including areas for improvement, can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

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 Strabane 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.

To prepare for this inspection we reviewed information held by RQIA about this day care setting. This included the previous Quality Improvement Plan issued, registration information, and any other written or verbal information received from service users, service user representatives, staff or the commissioning trust.

Throughout the inspection process inspectors seek the views of those attending, working in, and visiting the day care setting; and 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 service

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

In discussion with service users they commented positively about the day care setting and the staff. One service user advised, "I love coming here. The meals are great and good value. The staff are lovely". Several other service users also advised, "I am well cared for"; "I enjoy coming here, the girls are all fantastic, they make me feel at ease"; and, "They (staff) can't do enough for me, they do everything they can".

All feedback relating to the provision of meals within the day care setting was highly complementary, whilst transportation was described as "reliable". Whilst we were told that the activities were "enjoyable" and "fun" feedback received from a service user with mobility issues were discussed with the manager.

A visiting professional spoken with during the inspection commented positively about the provision of care and support provided by the day care setting.

Staff consulted spoke positively about their employment advising how rewarding they found their work within the day care setting. Staff told us that they were satisfied that the care and support was safe, effective, compassionate and well led.

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.

Service users said that there was enough staff on duty to help them. Observation of the delivery of care evidenced that service users' needs were met by the number and skills of the staff on duty.

Staff advised that there was good team work amongst colleagues and that the teams collective goal was to ensure best service delivery for service users attending the day care setting. Due to absences staff were working additional hours to maintain safe staffing levels. Staff told us that although they were happy to assist, current arrangements were starting to negatively impact. Staff felt a long-term solution regarding staffing shortages was needed. This was discussed with the registered manager who agreed to explore available options to alleviate current impact upon staff.

There was a process in place to ensure that recruitment was managed appropriately; this ensured that all pre-employment checks, including criminal record checks (AccessNI), are completed and verified before staff members commenced employment and have direct engagement with service users.

Concerns were identified during the inspection regarding the day care setting's retention of all necessary recruitment and training information for staff employed to provide transport. These concerns were discussed with the manager following the inspection who was advised that the responsibility to obtain, maintain and have all necessary information readily available for inspection purposes rests with the day care setting. The previous area for improvement was assessed as having been satisfactorily addressed by the provider however compliance with this requirement, specifically in relation to transport staff, will be reviewed again at a future inspection.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken. During the previous inspection it was identified that the proforma used for the Senior Day Care Worker's induction was the same as that used by Day Care Workers and Agency Staff and as such an area for improvement was stated directing development of the induction process for those in more senior roles. There was no evidence that any action had been taken in respects to further developing induction. This area for improvement will therefore be stated for a second time.

Review of training records identified that the majority of training elements had been provided to staff and future dates had been secured for training expected be renewed. Direction was given to ensure the training matrix was updated to include all training completed by staff, such as fire evacuation and medication to appropriately enable efficient monitoring of compliance.

Medicines Competency assessments were completed for any staff who administered medicines. There were also competency assessments undertaken for those staff expected to oversee the day to day operations of the day care setting in the absence of the manager.

It was noted staff did receive regular supervision. Procedures were in place for appraising staff performance and staff confirmed that appraisals had taken place. The importance of consistency regarding the storage of records was discussed.

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, which the staff needed to assist them in their roles. Regular staff meetings were held and minutes maintained of the meetings for staff, unable to attend, to read for information sharing.

Staff were knowledgeable of individual service users' needs, their daily routine wishes and preferences. Throughout the day observation confirmed that staff attended 'safety pauses' prior to mealtimes to ensure good communication across the team.

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. Information was shared in advance to service users to enable them to determine if they wished to participate or engage in an alternative activity.

It was positive to find that the day care setting regularly undertook surveys to gain feedback directly from service users as to their views upon activities and enquire as to any others which would be of interest. Additionally, satisfaction with activities was also regularly reviewed during service user meetings.

Staff interactions with service users were observed to be polite, warm and supportive and the atmosphere was relaxed, pleasant and friendly. Staff were knowledgeable of individual service users' needs, their daily routine, wishes and preferences.

3.3.3 Management of Care Records

Service users care records were held confidentially in line with data protection regulations. Inconsistencies in the manner for which service user records retained caused difficulties during the inspection and was discussed with the person in charge. It was agreed that action would be taken to reorganise records held by the day care setting to improve consistency and ease of retrieval. This will be reviewed at a future inspection.

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.

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. Service users were given the choice as to whether or not they wanted their photograph taken and used in any organisational promotional material or social media.

Plans were in place to direct staff on how to meet the service user's needs. Care records reviewed were found to be person centred, well maintained and regularly reviewed and updated to ensure they continued to meet the service user's needs. Care records evidenced service user involvement in planning their own care, with efforts made to ascertain their preferences around how their support was provided. One service user's plans reviewed appeared incomplete, assurances however were obtained subsequent to the inspection by the manager.

Review of records identified that the care plans were reflective of the recommendations outlined within the Speech and Language Therapy (SALT) Care Plan. Detailed information was also apparent within service user plans to enable staff to safely support with moving and handling tasks.

A number of service users Personal Emergency Evacuation Plans (PEEPs) were not found on Epic, the electronic recording system utilised by the Trust. Hard copies were produced however the total of plans and total number of service users registered with the day care setting did not appropriately correspond. The person in charge agreed to immediately review the PEEPs and archive those plans no longer required. Assurances were provided following the inspection that this had been addressed. This will be reviewed again at a future inspection.

There was a system in place to track the dates records were due to be renewed, It was positive that to find signatures of service users and/or their representatives apparent on review documentation.

There were no restrictive practice interventions deployed within the service. The press release button for the front door of the day centre was discussed with the person in charge, however they assured service users could freely access this button and exit the service at any time.

It was positive that in discussion with staff they appeared knowledgeable as to interventions deemed restrictive as well as to requirements stipulated within the Regional Policy on the use of Restrictive Practices in Health and Social Care Settings. Staff were also aware as to processes associated with Deprivation of Liberty Safeguards (DoLS) and had completed relevant training.

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.

Wall displays at the entrance of the day care setting included photos of service users now as well as when they were younger, completed as part of reminiscence work. Photographs and displays were evident throughout the day care setting which showed local areas in previous years which may be of interest to service users.

A large sitting area was found to be homely in nature, containing suitable furniture, a large television, access to floor games and other resources. The dining room was spacious with good lighting whilst a further large room was available just off the dining room, leading to the entryway with tables and chairs. There was a number of bathrooms available, with equipment available for those who have mobility needs.

There was evidence that all staff had completed training to manage infection prevention and observations saw staff appropriately donning and doffing personal protective equipment (PPE) throughout the day.

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 24 November 2025; there was evidence that action had been taken in respects to the majority of recommendations contained. Two recommendations remained outstanding; discussion occurred surrounding this and the person in charge agreed to follow up to achieve resolve. This will be reviewed at a future inspection.

There was evidence of fire safety checks being undertaken on a regular basis. Documentation was also available in respects to fire evacuation drills conducted. 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. Mrs Sonia Marie McDermott has been the manager in this day care setting since 23 January 2020.

Staff consulted commented positively about the manager describing her as supportive, approachable and able to provide guidance.

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.

Review of incident records identified that they were managed appropriately. There was evidence that incidents and accidents were audited on a regular basis as part of the monthly quality monitoring process to establish any patterns/trends.

There was a 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.

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. There was an identified individual appointed as 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.

Review of a sample of records evidenced that a 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. Review of a sample of reports however identified a lack of service user representative feedback included. This was highlighted to the person in charge who agreed to discuss this with the monitoring officer to address. This will be reviewed at a future inspection.

The annual quality report was reviewed and noted to include stakeholder feedback. Means to further improve the standard of this report was discussed with the person in charge at the time of the inspection. This will be reviewed at a future inspection.

4.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with the Regulations and the Standards.

	Regulations	Standards
Total number of Areas for Improvement	1*	1*

* the areas for improvement included have been stated for a second time

Areas for improvement and details of the Quality Improvement Plan were discussed with Christina Shields, Senior Day Care Worker, 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 (1)(b) 2(b) 3(d) **Stated:** Second time **To be completed by:** Immediate from the date of inspection	The Registered Person shall ensure that Enhanced AccessNI pre-employment checks are satisfactorily carried out for all staff before they commence employment. Ref: 3.3.1
	Response by Registered Person detailing the actions taken: All staff have enhanced AccessNI pre employment checks carried out prior to employment. The manager has requested a record of these checks for Bus Drivers from Transport Department and has raised this area of improvement to line management.

Action required to ensure compliance with The Day Care Settings Minimum Standards August (revised) 2021	
Area for improvement 1 **Ref:** Standard 21.1 **Stated:** Second time **To be completed by:** Immediate from the date of inspection	The Registered Person shall ensure that an Induction proforma is developed and implemented for new Senior Day Care Worker posts. Ref: 3.3.1
	Response by registered person detailing the actions taken: A working group which includes day care managers and governance is continuing to develop an induction proforma for new Band 5 Senior Day Care Worker posts.

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

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