The Regulation and Quality Improvement Authority

# Inspection Report

**Name of Service:** Elderly Learning Disability Service

**Provider:** South Eastern Health and Social Care Trust (SEHSCT)

**Date of Inspection:** 25 August 2026

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

## 1.0 Service information

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| **Organisation:** | South Eastern Health and Social Care Trust (SEHSCT) |
| **Responsible Person:** | Ms Roisin Coulter |
| **Registered Manager:** | Miss Susin Reid |
| **Service Profile:**<br><br>Elderly Learning Disability Service (ELDS) is a day care service located in Bangor. ELDS provides day care and support for up to 17 adults with Learning Disability. The day care setting operates from Monday to Friday and is commissioned by the SEHSCT. | |

## 2.0 Inspection summary

A care Inspector completed an unannounced inspection on 25 August 2026 between 8.30am and 12.30 p.m.

The last care inspection of the day care setting was undertaken on 07 October 2025 by a care Inspector. The Inspector identified two Areas for Improvement during this inspection.

This inspection was undertaken to evidence how Elderly Learning Disability Services 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, fire risk assessment records 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.

The inspector signed off the previous Quality Improvement Plan (QIP) as having been met.

## 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 Elderly Learning Disability Services 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 'It's lovely here. I enjoy coming'. Another commented that 'I really like it. The staff are great. I enjoy coming'. Another stated that 'It's good here. I came from another centre but this is great. I also enjoy coming'. Throughout the inspection, the Inspector noted that all service users appeared very happy and relaxed. The day care setting is small, across two rooms only, but there appeared to be good communication and rapport between staff and service users.

Members of staff on duty gave very positive feedback about the day care setting and the support provided by the manager. One stated that 'I used to work in Balloo but have been here one year. I had a really good induction. The manager is great'. I have been here since 2022. I'm very happy here. The manager is very helpful'. Another member of staff who works through an agency commented that 'I have been her since January and receive regular supervision. I really enjoy working with the service users'.

One relative of a service user stated that 'It's a lifesaver. ELDS have been great with my relative'. Another commented that 'my relative loves coming and that's enough for me. The staff are lovely'.

One visiting professional who spoke with the Inspector commented that 'I would carry out reviews at ELDS however I do not have many service users that access this service. The staff keep me fully updated and reach out when required. This service is slower paced for the older service users and they provide a good range of appropriate activities/therapies and community based activities.

The service users enjoy coming to ELDS and I have not had any negative experiences to date'. Another stated that 'I have a good few residents on swallow recommendations in ELDS. The

staff are always very compliant with anything I put in place and are quick to contact Speech and Language Therapy if there are any concerns'.

## 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 currently has no vacancies but is in the process of admitting two new service users for whom funding has just been agreed. This will require further recruitment and is being covered by agency in the interim.

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 had recently completed an internal transfer and an Access NI had been completed. The person in charge was knowledgeable in this area.

The manager confirmed that no new members of staff had been recruited since the last inspection. The Inspector gained access to recruitment documentation through the Amiqus system to which the manager had access. The Inspector discussed the separation of the Balloo and ELDS services and the Inspector confirmed that significant progress had been made with the rota between the two services.

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. The Inspector noted that the agency staff member on duty confirmed that they had received the same induction.

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. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date. This included agency staff.

Records of all staff training were retained and the manager reported that both she and one of the senior day care workers 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 their 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 such as Epilepsy and Safety Intervention. 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 appraisals had been completed on an annual basis.

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

### 3.3.2 Care Delivery

The Inspector confirmed that staff met the needs of service users' through a broad range of support activities located in both activity rooms used by the day care setting. The day care setting promotes the independence of the service users. The Inspector was reassured to note that the communication between service users and staff was extremely positive and staff appeared to have in-depth knowledge of the service users' needs and personalities. 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 were held by the day care setting.

### 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 nominated support workers, and updated to ensure they continued to meet the service users' needs. The support workers reviewed support plans monthly and care records evidenced this. Staff were knowledgeable of individual service users' needs, their daily routine wishes and preferences.

Where service users required dietary modification, care plans reflected the Speech and Language Therapy assessment.

The manager confirmed that none of the service users was subject to Deprivation of Liberty Standards (DoLS). She stated that the SEHSCT was actively reassessing all DoLS cases within the trust and services users who had previously been on the DoLS register had now been reassessed as requiring either Flow Charts or Emergency Provision Letters (EPLs). The Inspector viewed these records which were all 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. However the manager reported that there were no current service users who were subject to this type of intervention.

### 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 not received any complaints since the last inspection. The manager confirmed that all staff receive Stage 1 complaints training. The manager has completed further complaints training in the model for complaints handling, which has been developed by the Office of the Northern Ireland Ombudsman.

The Inspector's review of incident records, which are completed via the SHSCT datix system, identified that the manager had managed these appropriately. There was evidence that the manager audited incidents on a monthly 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. There was a nominated Adult Safeguarding Champion (ASC). The day care setting had not managed any safeguarding incidents since the last inspection. 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 23 September 2024 and was due for review in October 2026. There was evidence that staff in Bayview Resource Centre (where ELDS is situated) completed fire safety checks as required. ELDS staff also completed fire safety checks for their two rooms. The Inspector confirmed that ELDS staff had completed training in 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 Miss Susin Reid (Registered 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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