The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: **Age NI**

Provider: **Age NI**

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

Organisation/Registered Provider:	Age NI
Responsible Individual/Responsible Person: -	Ms Linda Robinson
Registered Manager:	Mrs Karen Graham
Service Profile: Age NI is a day care setting which provides day care for service users living with dementia. The day care setting is operational on a Monday, Wednesday and Friday.	

2.0 Inspection summary

An unannounced inspection was undertaken on 21 August 2026, between 10.20 am and 2.10 pm by a care Inspector.

The last inspection of the day care setting was undertaken on 27 January 2025 by a care Inspector. No areas for improvement were identified. This inspection was undertaken to evidence how the day care setting 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 led.

The inspection established that care delivery was safe and that effective and compassionate care was delivered to service users. Improvements were required, however, regarding the suitability of furniture utilised by the day care setting.

It was established that the 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 Age NI was a positive experience. Refer to Section 3.2 for more details.

Full details, including a new area for improvement identified, 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 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/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.

Service users in attendance spoke with the inspector and advised how much they enjoyed attending the day care setting, which one service user described as "a wonderful place". Service users told us that attendance provided structure to their day and provided opportunity to engage and socialise with their peers. Several service users reiterated how meaningful the company of others was to them.

The service users spoke positively about the manager and staff describing them as "very helpful" and "always ready to listen if you have any problems". Staff felt that their opinions were actively sought and feedback appropriately responded to.

One service user told us "most of all I thoroughly enjoy the food", in consultation with the other service users in attendance the consensus was positive regarding the quality and quantity of food provided by the day care setting. Service users advised that they were happy with transport provided which was described as reliable.

Feedback recorded from a service user representative described how attendance benefited their loved one who they advised "really looks forward to going to the centre". They described staff as "very good" and expressed that they felt their loved one was "very well cared for and supported in the centre".

Discussion with staff demonstrated their strong commitment to, and passion for, the service provided by the day care setting. Staff were experienced and knowledgeable regarding the individual needs of service users and demonstrated an understanding of the impact that their diagnoses could have on their day-to-day lives.

Staff undertook a range of duties and responsibilities in addition to the provision of direct care, including food preparation, cleaning and transportation. They demonstrated a robust awareness of the contingency arrangements in place and expressed confidence in their ability to appropriately respond to and manage incidents, accidents and safeguarding concerns.

Positive working relationships were apparent between staff and the manager. Staff spoke warmly and positively about their roles and consistently conveyed a genuine enjoyment of their work.

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.

Staff said there was good team work and that they felt well supported in their role. Staff were observed to be responsive to service user needs, responding to requests for assistance in a prompt, caring and compassionate manner.

Review of the day care setting'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. Similar processes were also undertaken for volunteers.

There was a system in place for professional registrations to be monitored by the manager.

Staff provided positive feedback regarding the training they received and confirmed that it enabled them to fulfil the duties and responsibilities of their roles. This training included Deprivation of Liberty Safeguards (DoLS), adult safeguarding, and dysphagia, at a level appropriate to their job roles.

The training matrix provided was found not to include information relating to personal care or participation in fire evacuation drills. The manager agreed to update the training matrix to include information relating to all training completed by staff. There was a plan in place to ensure new employees completed all mandatory training. This will be reviewed again during a future inspection.

Competency assessments were undertaken on all staff to ensure that they were competent in their roles and responsibilities. There was evidence of competency assessments in place for staff expected to act up in the absence of the manager.

Procedures were established for evaluating staff performance in accordance with the day care setting's policies and procedures. A review of the staff appraisal and supervision records confirmed that these had been carried out.

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. There was evidence of regular staff meetings for which service user matters were discussed.

Staff were knowledgeable of individual service users' needs, their daily routines, wishes and preferences. There was good communication between staff throughout the day to ensure all necessary tasks were being completed as expected.

There was a system in place to ensure that the activities offered to service users were varied and geared towards service user needs and preferences. It was positive to find evidence of service user consultation occurring, with service user meetings scheduled on a regular basis, for which service users' opinions were sought about not only activities but all aspects of service provision.

This included recall and reminiscence activities, life story work, quizzes as well as engagement in events within the local community.

Staff were observed informing service users that the inspection was taking place, explaining the role of the inspector and purpose of inspection whilst encouraging service users to talk to the Inspector.

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. 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.

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.

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 user's preferences and choices around how their support was provided. The details of care plans were shared and signed by service users and/or their representatives as appropriate.

It was recognised that a number of service users had recently started to avail of the day care setting and as such their plans not yet finalised. The manager was aware as to timeframe

stipulated by the organisation following service commencement and provided assurances that adherence would be achieved.

Two service user records sampled were overdue review. When highlighted to the manager they advised that this was due to changes impacting the Trust community team however provided assurances that dates had been secured. This will be reviewed again at a future inspection.

3.3.4 Quality and Management of the Environment

The day care setting was observed to be clean and tidy, warm and comfortable and free of clutter. The presentation of the day care setting was homely in nature.

Fabric-covered seating was observed within the day care setting. Concerns were raised with the manager regarding the suitability of fabric seating in relation to infection prevention and control and fire safety requirements. The manager acknowledged the concerns and agreed to take immediate action to address these matters. An area for improvement was identified to ensure suitability of furnishings within the day care setting.

It was identified that the water temperature within one of the bathrooms was excessively high and presented a potential scalding risk to service users. This was brought to the attention of the manager, who provided assurance that appropriate signage, consistent with that already displayed in the other bathroom, had been requested. In the interim, the manager agreed to implement suitable temporary signage to alert individuals to the potential risk. This will be reviewed again at a future inspection.

A fire risk assessment had been completed on 17 October 2025; it was identified that recommendations within the fire risk assessment were being monitored or had been appropriately actioned. There was evidence of regular fire safety checks being undertaken. The fire escape was 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 Karen Graham has been the registered manager in this day care setting since 28 September 2010.

Staff consulted commented positively about the manager and described her as supportive and highly committed. Service users described her as “kind” and approachable.

There was a process in place to ensure any complaints received by the day care setting were appropriately managed in line with the day care setting’s policies and procedures. Positive feedback from service users and their representatives was observed within documentation yet had not on all occasion been recorded as compliments. The value of recording of compliments was discussed with the manager who agreed to address this going forward.

There was a system in place to ensure any incidents or accidents which may arise within the day care setting were appropriately managed. Staff were also aware as to statutory reporting requirements.

There was a protocol in place for staff to follow when 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. These protocols ensure that staff respond consistently and in a timely manner, supporting the safety and welfare of service users.

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. The annual safeguarding position report had been completed satisfactorily.

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.

The annual quality report was reviewed and noted to include stakeholder feedback with the returns assessing staff attitude, programme of activities, transport and length of journey in a range between good and excellent.

4.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with the Regulations.

	Regulations	Standards
Total number of Areas for Improvement	1	0

An area for improvement and details of the Quality Improvement Plan were discussed with Mrs Karen Graham, Registered Manager, 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 13(7) **Stated:** First time **To be completed by:** Immediate from the date of the inspection	The registered person shall make arrangements to ensure furniture within the day care setting is non-absorbent, fluid-resistant and easy to clean to enable adequate infection control measures and practices to be deployed effectively. Ref: 3.3.4
	Response by registered person detailing the actions taken: All furniture witihn the cnetre is now non-absorbent, fluid resistant and easy to clean to ensure adequate infection control measures in place

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The Regulation and Quality Improvement Authority

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