The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: Ballyowen Day Centre

Provider: Belfast HSC Trust

Date of Inspection: 1 September 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 Individual:	Jennifer Welsh
Registered Manager:	Mr Rory John Paul Kavanagh
Service Profile: Ballyowen Day Centre is a day care setting that provides care and daytime activities for people over 65 years of age living with a range of medical needs. The day care setting is operational Monday to Friday.	

2.0 Inspection summary

An unannounced inspection took place on 1 September 2026, between10am and 3pm. A care Inspector carried out the inspection.

The last care inspection of the day care setting was undertaken on 24 October 2025 by a care Inspector. The Inspector did not identify any areas for improvement during this inspection.

This inspection examined the agency's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction and training and adult safeguarding. The reporting and recording of accidents and incidents, complaints, whistleblowing, service user involvement, restrictive practices and dysphagia management were also reviewed.

No areas for improvement were identified.

Good practice was identified in relation to service user involvement. It was noted that staff actively encouraged participation in meaningful activities.

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 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 centre. This includes 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 working in and attending Ballyowen; and review/examine a sample of records to evidence how the centre is performing in relation to the regulations and standards.

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

We spoke to a range of service users, relatives and staff to seek their views of visiting and working within Ballyowen Day Centre.

The information provided indicated that there were no concerns in relation to the day care setting. Service users told us that they liked coming to Ballyowen and meeting other people and staff. One told us that the food is "100%" and another said staff were "good to you". They also commended the varied activities on offer in the centre.

Relatives spoke very positively about the communication with staff and said the centre was "great social outlet". They outlined how important the centre was to their family and how nice staff were. One relative outlined transport issues, which affected service users' attendance. The inspector discussed these comments with the manager for review and action.

Staff were very complimentary about the support offered by management. They described a happy strong team who love their work and were proud of the service offered to service users. Comments received included: "I think it is just a privilege to work with the elderly".

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.

It was noted that there was sufficient staff in the day care setting to respond to the needs of the service users in a timely way; and to provide service users with a choice on how they wished to spend their day.

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 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.

It was identified that an enhanced AccessNI checked was required in respect of one ancillary staff member. Assurances were provided post inspection that this check was being carried out as required. Going forward the manager must ensure that these checks are in place for all staff, including ancillary staff working within the setting.

The manager confirmed that one new member of staff had been redeployed to the centre since the last inspection and a fresh Enhanced Access NI check had been completed. There was evidence that all newly appointed staff completed a structured orientation and induction programme, having regard to the Northern Ireland Social Care Council's (NISCC) Induction Standards for new workers in social care. This ensures that staff are competent to carry out the duties of their job in line with the day care setting's policies and procedures. This robust, structured, induction programme 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.

Review of a sample of staff training records concluded staff had received mandatory and other training relevant to their roles and responsibilities. Competency assessments were undertaken on all staff to ensure that they were competent in their roles and responsibilities.
Staff meetings were held regularly and minutes maintained of the meeting.

3.3.2 Are there systems in place for identifying and addressing risks?

The day care setting was observed to be clean and tidy, suitably furnished, warm and comfortable and free of clutter. There was evidence that systems and processes were in place to manage infection prevention and control. Fire safety checks were undertaken on a regular basis; and all staff had participated in a fire evacuation drill. Throughout the inspection, fire doors were observed to be unobstructed.

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 of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns. The organisation had an appointed 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 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. There was evidence that incidents were audited on a regular basis, to establish any patterns/trends. It was good to note that these were reviewed in detail as part of the monthly quality monitoring process.

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. The Inspector confirmed that the agency had an effective system and process to manage the safeguarding and protection of adults at risk of harm.

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. 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.

Some service users were assessed by Speech and Language Therapist (SALT) with recommendations; some required their food and fluids to be of a specific consistency. Staff were familiar with how food and fluids should be modified and 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. A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents.

3.3.3 Care Delivery.

A review of service users' care records identified that each service user had a detailed, person centred support plan to enable them to participate in all aspects of their care. 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 are kept under regular review and services 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. There was also evidence of regular contact with service users and their representatives, in line with the commissioning trust's requirements.

It was good to note that the day care setting had service user meetings on a regular basis, which supported service users to make choices around the activities they would like to participate in when at the day centre. Interactions with service users were observed to be friendly and supportive. Staff were skilled in communicating with service users; they were respectful, understanding and sensitive to service users' needs. Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or the care being provided.

3.3.4 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Mr Rory Kavanagh has been the registered manager in this day care setting since 4 October 2017.

There were monthly monitoring arrangements in place in compliance with the regulations and standards and a review of the reports of established that there was engagement with service users, service users' relatives, staff and HSC Trust representatives. The robust reports included details of a review of service user care records; accident/incidents; safeguarding matters; staff recruitment and training, and staffing arrangements.

The manager was aware that RQIA must be informed of any safeguarding incident that is reported to the Police Service of Northern Ireland (PSNI). There were systems in place to ensure that notifiable events were investigated and reported to RQIA or other relevant bodies appropriately.

There was evidence that the agency responded to any concerns, raised with them or by their processes, and took measures to improve practice and the quality of services provided by the agency, as necessary. The Inspector noted efforts had been made to enhance staff relationships and strengthen the team by facilitating discussions around the Values Charter.

A system was in place for managing instances where a service user did not attend the day care setting as planned.

Service users care records were stored securely and accessible to authorised personnel in accordance with data protection regulations.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure.

Staff had completed appropriate Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. The manager reported that none of the service users were subject to DoLS.

The Annual Quality Report was reviewed and was satisfactory.

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

4.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Rory Kavanagh, (Manager), as part of the inspection process and can be found in the main body of the report.



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