The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: **Arden Centre**

Provider: **Western HSC Trust**

Date of Inspection: **6 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:	Western Health and Social Care Trust
Responsible Individual:	Mrs Karen Hargan
Registered Manager:	Ms Amy McCool
Service Profile: Arden Centre is a day care setting that provides therapeutic activities and support to service users who are living with enduring mental health issues. The centre is open Monday to Friday and is managed by the Western Health and Social Care Trust (WHSCT).	

2.0 Inspection summary

An unannounced inspection was undertaken on 6 August 2026, between 10.00 am and 2.50 pm by a care Inspector.

The last care inspection of this day care setting was undertaken on 24 April 2025. 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 evidenced that safe, effective and compassionate care was delivered to service users and that the day care setting was well led. Details and examples of the inspection findings can be found in the main body of the report.

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.

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 Arden 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 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.

On the day of the inspection a large number of service users were engaging in a community outing. The two service users who choose not to participate in the planned outing were observed making use of the facilities available within the day care setting. They appeared relaxed and at ease in their interactions with each other as well as staff. Whilst engaged in a game of pool the service users told the Inspector that they enjoyed attending the centre, discussed activities that were available and spoke positively about staff. The service users stated that they had no concerns regarding the support offered by the day care setting nor did they have any suggestions as to how the service could be improved upon.

One service user who provided feedback following the inspection spoke highly of both the staff, “you couldn’t get nicer”, and the new registered manager describing her as an attentive listener who always helps and “always has a smile on her face”. This service user described a cultural shift within the service since the appointment of the new manager with them feeling more empowered to provide their opinion regarding the service. They advised as to the continuous planning of activities and the choice provided to service users. The only improvement suggested related to the acquirement of transportation; this is something for which the service are pursuing.

Feedback contained within recently returned service user surveys included positive comments regarding service user’s experience of Arden Centre. Staff were described as “friendly”, “very kind and helpful”, whilst another service user advised “staff are brilliant and go out of their way to help”. One service user detailed how attending the day care setting was important to them in that it provided them opportunity to socialise and engage with others.

Staff spoke positively about the collaborative teamwork evident amongst the staff team. They described having confidence in the reliability and competency of their colleagues, advising that support was readily available when needed.

In discussing service users, staff spoke compassionately and demonstrated a good understanding of the lived experiences and support needs of individual service users. Staff described person-centred approach which aided recovery and promoted the wellbeing of service users.

Staff told us how rewarding they found their work and described the trust placed in them by service users as a privilege. It was positive to hear staff describe the various outcomes achieved by service users and the efforts made by the day care setting to develop and expand service users experiences and support networks.

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 and that they were satisfied with the staffing levels.

Review of the agency'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.

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 agency's policies and procedures. There was a robust, structured induction programme which also included shadowing of a more experienced staff member. Written records were retained by the agency of the person's capability and competency in relation to their job role.

There was a system in place for professional registration 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. Records of all staff training were retained and the manager maintained oversight of the training matrix to ensure compliance. This training included Deprivation of Liberties Safeguards (DoLS), adult safeguarding, and dysphagia, at a level appropriate to their job roles.

It was positive to find that staff had completed training which promoted best care delivery in respect of the bespoke needs of service users. For example, staff had completed The Decider training which advises upon Cognitive Behavioural Therapy (CBT) and Dialectical Behavioural Therapy (DBT) skills to help people manage emotions, reduce impulsive behaviours and improve mental health outcomes. Furthermore additional training surrounding Trauma Informed Care and Dissociative Identity Disorder (DID) was also scheduled.

There was a system in place to monitor supervision compliance and review of records illustrated supervision was undertaken at a frequency stipulated by the organisations policy and procedures. Records also evidenced staff had engaged in appraisals.

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 in which service user matters were discussed; records were held and minutes maintained of the meetings for staff, unable to attend, to read for information sharing.

There was a system in place to ensure that the activities offered to service users were varied and tailored towards their needs and preferences. It was positive to find evidence of service user consultation occurring, with service users' meetings scheduled on a regular basis, in which service users' opinions were sought about all aspects of service provision, including activities.

Information was shared in advance to service users regarding planned activities. It was positive to observe staff promoting service user autonomy and choice in relation to how they wish to spend their time within the day care setting. Staff demonstrated genuine interest and enthusiasm in relation to the service users' individual interests and preferences, promoting meaningful engagement and person-centred support.

Whilst attending Arden Centre service users had engaged in holistic therapies, basic cooking skills and physical activities such as chair yoga. Service users had also engaged in an artistic workshop facilitated by the WHSCT Recovery College which feedback indicated resulted in positive outcomes, seeing service users' hoping to repeat this course again soon. It was also positive to find awareness sessions had been facilitated in relation to matters impacting service users, such as Pain Management and Diabetes.

We were advised how the availability of transport for a two week period further expanded opportunities and experiences available to service users, for example on the day of inspection a number of service users were attending an outdoor physical activity centre.

There was a system in place for managing instances where a service user did not attend the day centre as planned. This included a system for signing in and out the service users who attend.

3.3.3 Management of Care Records

Service users care records were held confidentially in line with data protection regulations.

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; this also included their consent for external professionals, including RQIA to access their care records. It was also positive to find that consent was sought as to what, if any, information service users wished to be shared with their next of kin. 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.

Care records were person centred, well maintained and regularly reviewed and updated to ensure they continued to meet the service users' needs. 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.

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.

There were ample spaces within the downstairs areas available to service users, which included use of a kitchen area for preparation of food, a large sitting area and another large room with a pool table.

Rooms available to service users on the first floor contained gaming consoles and DJ equipment, however furnishing within the first floor rooms appeared sparse. The possible usage of space available to service users was explored with the manager who agreed to pursue this further with their line management.

The manager advised that the day care setting is currently seeking an accessibility upgrade to the doors in an effort to increase independence of those service users with mobility issues. This will be reviewed at a future inspection.

There was evidence that staff had completed training in relation to infection prevention and control and had reviewed associated policies and procedures during induction.

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 11 December 2025; there was evidence that recommendations within the fire risk assessment had been consistently actioned. There was evidence of regular fire safety checks being undertaken and information was retained in relation to fire evacuation drills undertaken. 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. Ms Amy McCool had been acting manager within this day care setting since 1 October 2024 however her registered manager application was approved on 8 July 2025.

Staff consulted commented positively about the manager and described how her enthusiasm and commitment to expand opportunities and enhance the quality of life for service users had a positive impact on the service. She was described as being well organised, detail-oriented and knowledgeable. Staff also told us that they felt well supported by the manager.

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. The day care setting was also found to retain a record of compliments received, one of which stated the "(Manager) is like a breath of fresh air, nothing is too much for her and she helps us in any way she can. (Staff) always have us doing things or going out somewhere. They are so good to us".

There was a system in place to ensure any incidents or accidents which may arise within the day care setting were appropriately managed. These were also reviewed as part of the monthly quality monitoring process. Discussion with staff illustrated their knowledge of organisational policies and procedures relating to incident and accident management as well as their confidence in being able to appropriately respond to such an occurrence.

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.

Feedback was available to review from service user surveys that had been distributed by the day care setting. Advice was given regarding the analysis of the feedback received and other key performance indicators within an annual quality report. This will be review at a future inspection.

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 Ms Amy McCool, Registered Manager as part of the inspection process and can be found in the main body of the report.

The Regulation and Quality Improvement Authority

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