

Inspection Report

1 August 2023



Faughanvale Community Project

Type of Service: Day Care Service
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Assurance, Challenge and Improvement in Health and Social Care

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1.0 Service information

Organisation/Registered Provider: Faughanvale Community Project Ltd	Registered Manager: Mrs Mary Watson
Responsible Individual: Mrs Rosemary Logue	Date registered: 25 May 2009
Person in charge at the time of inspection:	
Brief description of the accommodation/how the service operates: Faughanvale Community Project is a day care setting which can accommodate up to 35 service users aged from 18 years old. The day care setting provides care and day time activities to those living with learning disability, physical disability and sensory impairment. The day care setting is open every Tuesday, Wednesday and Thursday. The service is commissioned by the Western Health and Social Care Trust (WHSCT).	

2.0 Inspection summary

An unannounced inspection was undertaken on 1 August 2023 between 09.00 a.m. and 11.00 a.m. The inspection was conducted by a care inspector.

The 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, Deprivation of Liberty Safeguards (DoLS), Service user involvement, Restrictive practices, Dysphagia management.

It was positive to note that service users benefited from a well led service. There was a clear leadership and management structure in place which helped to ensure staff were knowledgeable about their role and responsibilities. The service was well organised and had a range of systems in place to support good communication.

Good practice was identified in relation to service user involvement. The manager and responsible individual demonstrated strong caring values and a desire to provide service users with personalised care, and expressed a commitment to providing care in keeping with service users' care and support plans.

We noted some of the compliments received by the setting from various sources:

- "I enjoy the games and the company."
- "I'm very happy with the Day centre and the care."

- “Thanks to the staff for looking after my relative.”

The inspector would like to thank the manager and the responsible individual for their flexibility and support during this unannounced inspection.

3.0 How we inspect.

RQIA’s inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections. In preparation for this inspection, a range of information about the service was reviewed. This included any previous areas for improvement identified, registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning trust.

As a public-sector body RQIA has a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care services, we are committed to ensuring that the rights of people who receive services are protected. This means we will be seeking assurances from providers that they take all reasonable steps to promote people’s rights. Users of day care settings have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted.

Information was provided for service users, relatives, staff and other stakeholders on how they could provide feedback on the quality of services; with questionnaires and an electronic staff survey.

4.0 What did people tell us about the service?

During the inspection we spoke with the registered manager and the registered individual. No other staff or service users were available for comment.

During the inspection we provided a number of questionnaires for service users to complete and share their views in regard to service quality and their lived experiences:

A number of questionnaires were returned stating that service users were happy with the service, we noted the comments received:

Comments received:

- “Very satisfied with the care.”
- “All very good.”
- “It’s great to have this place for my relative.”
- “I get excellent care.”
- “My relative is looked after so well and looks forward to daycare.”
- “The staff and the manager are very good to me.”

- “I am very happy here I can speak to the manager at any time.”
- “It is just perfect.”
- “I am well looked after.”

A number staff questionnaires were returned prior to the issue of this report that show that staff were either satisfied or fully satisfied with the setting.

Comments received:

- “Work going very well, no worries or concerns.”
- “Happy in my work, thank you.”
- “The project is a very well run friendly organisation which shows great empathy with the clients and goes over and above in their care.”
- “No comments, very happy.”

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last care inspection of the day care setting was undertaken on 29 September 2022 by a care inspector. No areas for improvement were identified.

5.2 Inspection findings

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

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’s) regional policy ‘Adult Safeguarding Prevention and Protection in Partnership’ July 2015 and clearly outlined the procedure for staff if they needed to report any concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

Staff were required to complete adult safeguarding training during their induction and every two years thereafter. The manager clear understanding of their responsibility in identifying and reporting any actual or suspected incidences of abuse and the process for reporting concerns.

The manager retained records of any referrals made to the Health and Social Care (HSC) Trust in relation to adult safeguarding. No referrals had been made since the last inspection. The manager had ensured that service users were provided with information about keeping themselves safe and the details of the process for reporting any concerns.

Staff were provided with training appropriate to the requirements of their roles. Where service users required the use of specialised equipment to assist them with moving and handling, this was included within the day care setting's mandatory training programme. A review of records confirmed that where the day care setting is unable to provide training in the use of specialised equipment, if required training will be requested from the HSC Trust.

It was positive to note that a number of care reviews were undertaken in keeping with the day care setting's policies and procedures. The outcomes for people using the service reflected the principles and values of promoting choice and control, independence and community inclusion.

We also noted that service users are supported to exercise choice and control in regard to decision making and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the setting supported this practice. Service users had the support of a team of staff who were suitably skilled and experienced to meet their assessed needs.

Staff had completed DoLS training appropriate to their job roles. The manager reported that none of the current service users were subject to DoLS arrangements.

Records examined identified that a number of safety checks and audits had been undertaken including fire alarm tests. It was noted that the last full fire evacuation drill was undertaken on the 12 April 2023, all staff included. Fire risk assessments for the centre were completed on the 13 March 2023. Staff fire training has been completed on the 12 April 2023. During the inspection fire exits were observed to be clear of clutter and obstructions.

5.2.2 What are the arrangements for promoting service user involvement?

From reviewing service users' care records it was good to note that service users and families had an input into devising individual activities. The service users' care plans contained details about their likes and dislikes and the level of support they may require.

Care records were written in a respectful way, supporting people to express their views and be involved in making decisions about their care, respecting and promoting people's privacy, dignity and independence. The quality of service provision had also been regularly reviewed through a range of internal and external audits.

It was also positive to note that the day care setting held service user meetings which supported the service users to look at what they wanted to achieve from attending the setting and any activities they would like to become involved in.

Care and support plans were kept under regular review and service users and /or their relatives participated, where appropriate, in the review of the care provided on an annual basis, or when changes occurred.

The setting had completed a comprehensive annual report that was satisfactory.

We noted some of the comments received from service users during a recent quality questionnaire survey:

Service users:

- “I’m very happy here.”
- “I’m always treated like family.”
- “A brilliant service.”
- “I’m grateful for the support and advice all year round.”
- “All great.”
- “Staff are always happy to help.”

5.2.3 Is there a system in place for identifying service users Dysphagia needs in partnership with the Speech and Language Therapist (SALT)?

No service users were assessed by SALT and required no assessments. A review of training records confirmed that staff had completed training on Dysphagia

5.2.4 What systems are in place for staff recruitment and are they robust?

A review of the day care setting’s staff recruitment records confirmed that all pre-employment checks, including criminal record checks (Access NI), were completed and verified before staff members commenced employment and had direct engagement with service users.

5.2.5 What are the arrangements for staff induction and are they in accordance with NISCC Induction Standards for social care staff?

There was evidence that all newly appointed staff had completed a structured orientation and induction, having regard to NISCC’s 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 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.

A record is maintained for each member of staff of all training, including induction and professional development activities undertaken.

5.2.6 What are the arrangements to ensure robust managerial oversight and governance?

There were monthly quality monitoring arrangements in place in compliance with Regulation 28 of The Day Care Setting Regulations (Northern Ireland) 2007. A review of the reports of the day care setting’s quality monitoring established that there was engagement and observations with service users, relatives, HSC and staff. The reports included details of a review of service users’ care records; accident/incidents; safeguarding matters; staff recruitment, training and staffing arrangements.

Comments noted within monthly monitoring reports included:

Service users:

- “It’s great to be back into the swing of things.”
- “I could not live without this place.”
- “I have no complaints or concerns.”

Staff:

- “It’s important to stay abreast of what service users require.”
- “No concerns or complaints.”
- “Dysphagia training was very worthwhile.”

Relatives:

- “Grateful for the great care and support my relative receives.”
- “I have no complaints, but I just have to lift the phone if needed.”
- “Many thanks to everyone.”

HSC Staff:

- “I’m happy the way everything is working.”
- “It has made such a difference for XXX coming to the centre.”
- “XXX is very happy with the centre and loves coming.”

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAIs) or Significant Event Audits (SEAs) procedures.

There was a system in place to ensure that complaints were managed in accordance with the agency’s policy and procedures. No complaints had been received since the last inspection.

The day care setting’s registration certificate was up to date and displayed appropriately as was their current relevant insurance certificate.

6.0 Quality Improvement Plan/Areas for Improvement

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



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