

Inspection Report

Name of Service: Faughanvale Community Project

Provider: Faughanvale Community Project Ltd

Date of Inspection: 25 February 2025

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:	Faughanvale Community Project Ltd
Responsible Individual/Responsible Person	Mrs Rosemary Logue
Registered Manager:	Mr Raymond McKenna (Acting Manager)
Service Profile: 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 25 February 2025 between 10.55am and 3.20pm 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 and Dysphagia management was also examined.

Good practice was identified in relation to service user involvement, the range of activities to avail of and staff interaction with service users. There were good governance and management arrangements in place.

There were no areas for improvement identified during this inspection. We would like to thank the manager, service users and staff team for their help and support in the completion of the 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 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 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, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors will seek the views of those attending and working within the day care setting and examine a sample of records to evidence how the day care setting is performing to the regulations and standards.

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

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

We spoke to a number of service users, relatives and staff to seek their views of visiting, attending and working within the day care setting.

Service users said that they were happy with the care and support provided, that they enjoyed the range of activities to avail of, and that staff were approachable and kind. Some comments included "I come here twice a week. I like it and the staff are good" and "They are brilliant – only for it I wouldn't be here."

Staff spoke very positively in regard to the care delivery and management support in the day care setting. One comment included the following statement; "this place lifts you and the staff are all great – it's a great place to work - I love it."

We did not receive any responses to the staff electronic survey.

A number of relatives contacted for feedback indicated that they were very satisfied with the level of care provided at the day care setting. Two comments included the following statements; "It is a really good service – they are so caring – they do lots of crafts that suit my relative and I have seen an improvement since they joined." And; "it is peace of mind for me knowing my relative is safe. If I have worries, I can ring them and they are great."

3.3 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 1 August 2023 by a care inspector. No areas for improvement were identified.

3.4 Inspection findings

3.4.1 Adult Safeguarding and Incident Reporting

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 and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

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. Staff were required to complete adult safeguarding training during their induction and every two years thereafter.

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.

On review of the management of accidents and incidents within the day care setting, it was identified that one service user who had experienced a fall did not have their care plan / risk assessment updated in a timely manner after the event. The policy for reporting and recording of incidents and accidents was examined and found to require review. This was discussed in detail with the manager and the policy has since been reviewed, alongside the process for management of incidents / falls, to ensure staff competence in management of such occurrences within the day care setting.

Discussion with the manager indicated they were aware of incidents that must be reported RQIA in keeping with the regulations.

3.4.2 Mental Capacity and Restrictive Practice

The Mental Capacity Act (MCA) provides a legal framework for making decisions on behalf of service users who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, service users make their own decisions and are helped to do so when needed. When service users lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

Staff had completed appropriate DoLS training appropriate to their job roles. At the time of inspection there were no service users that were subject to DoLS or restrictive practices within the day care setting.

3.4.3 Staff Selection, Training and Recruitment Records

A 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. Checks were made to ensure that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC) or the Nursing and Midwifery Council (NMC) or any other relevant regulatory body. There was a system in place for professional registrations to be monitored by the manager. Staff were aware of their responsibilities to keep their registrations up to date.

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 day care setting's policies and procedures. There was evidence of a robust induction programme for new staff, 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.

Staff were provided with training appropriate to the requirements of their role. The day care setting held a record of training for all staff on a central register which was checked and updated after each training event. The manager advised and shared plans to change this recording system over to an electronic matrix which will aid in the regular review of the training needs of all staff and in identifying those who require to complete refresher training prior to its expiry date. This will be reviewed at a future inspection.

The manager confirmed that no service users required the use of specialised equipment to assist them with moving, however should this be required, training was included within the day care setting's mandatory training programme.

All staff had been provided with training in relation to medicines management. The manager advised that no service users required their medicine to be administered orally with a syringe and was aware that should this be required, a competency assessment would be undertaken before staff completed this task.

3.4.4 Dysphagia Management

There were no service users that required input from a Speech and Language Therapist (SALT) or recommendations regarding food and fluids consistency. A review of training records confirmed that staff had completed training in Dysphagia and in relation to how to respond to choking incidents.

3.4.5 Care Records and Service User Input

A review of service users' care records identified that each service user had person centred support plan to enable them to follow and participate in all aspects of their care. Whilst care plans contained details about their likes and dislikes and the level of support that service users may require, one care plan / risk assessment examined required to be reviewed as it lacked detail around supervision levels and whether there were any aids or equipment required for safe mobilising. The manager welcomed this advice and agreed to review this care plan immediately, as well as all other care plans, to ensure any changes in care needs are noted, care plans are updated and are kept under regular review. This will be reviewed at a future inspection.

It was positive to note that services users and /or their relatives participated, where appropriate, in the review of the care provided on an annual basis in line with the commissioning trust's requirements.

The day care setting held service user meetings on a regular basis which enabled the service users to give their views on what they wanted from attending the day care setting as well as identifying any activities they would like to become involved in. Some matters discussed included planning for the harvest festival, singing in a choir, seasonal crafts, flower arranging, musical activities, gardening activities, board games and drama.

3.4.6 Quality and Management of the Environment

The day care setting was observed to be clean and tidy and suitably furnished, warm and comfortable and free of clutter. There was evidence that fire safety checks had been completed as required. Staff had completed training in regard to fire safety and had participated in a fire evacuation drill. Throughout the inspection, fire doors were observed to be unobstructed. The day room was brightly decorated and offered a wide range of activities and arts and crafts to participate in, making it a pleasant and welcoming environment.

Hazardous substances were noted to be stored appropriately in accordance with Control of Substances Hazardous to Health (COSHH) guidance.

3.4.7 Governance and Managerial Oversight

There were monitoring arrangements in place in compliance with regulations and standards. A review of the reports of the agency's quality monitoring established that there was engagement by senior staff with service users, service users' relatives, staff and Health and Social Care Trust representatives. The reports included details of a review of service users' care records; accident/incidents; safeguarding matters; staff recruitment and selection; and staffing arrangements including training.

No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedures.

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

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. Records reviewed and discussion with the person in charge indicated that no complaints were recorded since the previous care inspection. Discussion with staff confirmed that they knew how to receive and respond to complaints and were aware of their responsibility to report all complaints to the manager or the person in charge.

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

We discussed the acting management arrangements which have been ongoing since 3 April 2024; RQIA will keep this matter under review.

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 Mr Raymond McKenna, Acting Manager, and Mrs Mary Watson, senior day care worker, as part of the inspection process and can be found in the main body of the report.



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