

Inspection Report

Name of Service: Pavestone Centre

Provider: Northern HSC Trust

Date of Inspection: 2 June 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:	Northern HSC Trust
Responsible Individual:	Ms Jennifer Welsh
Registered Manager:	Mrs Colette Fairley
Service Profile: This is a day care setting with 60 places that provides care and day time activities for people living with physical disabilities and mental ill health. The ethos of the service is re-enablement with the aim to support service users to gain skills to find employment or return to work. Service users are actively involved in producing a range of craft items such as jewellery, candles, ceramics, linen cushions and soaps that are sold in local businesses in the area and wooden crosses that are supplied to a number of hospitals and hospices.	

2.0 Inspection summary

An unannounced inspection took place on 2 June 2025, between 9.50 am and 1.30 pm by a care Inspector.

The last care inspection of the day care setting was undertaken on 19 January 2024 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 found that safe, effective and compassionate care was delivered to service users and that day care setting was well led. Details and examples of the inspection findings can be found in the main body of the report.

Service users said that the care and support provided by the Pavestone Centre was an excellent experience. Service users who were unable to voice their opinions were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Refer to Section 3.2 for more details.

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 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 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 told us that they were very happy attending the Pavestone Centre. Service users described having 'fun' and 'learning new skills' and having 'made good friends'. The staff were described as being 'very helpful' and 'friendly'; and the service users described how the staff encourage them to try their best and that they 'reassure' the service users. One comment made by a service user noted that 'the staff care about each individual' and that the centre is a 'valuable place' and that it is 'of benefit socially'.

Service users who were unable to voice their opinions were observed to be relaxed and comfortable in their surroundings and in their interactions with staff.

Staff told us that they loved their jobs and if there were any concerns, they would be sorted 'quick smart'.

3.3 Inspection findings

3.3.1 Staffing Arrangements (recruitment and selection, induction and training)

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.

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. Observation of the delivery of care evidenced that service users' needs were met by the number and skills of the staff on duty.

There was a process in place to ensure that recruitment was managed appropriately; this ensured that all pre-employment checks, including criminal record checks (AccessNI), are completed and verified before staff members commenced employment and have direct engagement with service users.

Newly appointed staff, including those supplied by recruitment agencies, had completed a structured orientation and induction, to ensure they were competent to carry out the duties of their job.

Records of all staff training were retained and were noted to be up to date. Staff confirmed that got sufficient training for their roles.

Competency assessments were undertaken on all staff to ensure that they were competent in their roles and responsibilities.

Procedures were in place for appraising staff performance; and all staff received regular supervision.

3.3.2 Care Delivery

There was a meeting held at the beginning of each shift, called a 'Safety Brief'; this included the sharing of information about any changes to the service users' care, that the staff needed to assist them in their roles. The Safety Brief meeting also included a 'Safety Pause' which was used to communicate any specific information pertaining to service users' that may have a modified diet. Staff also attended 'safety pauses' prior to mealtimes.

Good nutrition and a positive dining experience are important to the health and social wellbeing of service users. Observation of the lunch time meal, review of records and discussion with service users, staff and the manager evidenced that there were robust systems in place to manage service users' nutrition and mealtime experience.

Regular staff meetings were held and minutes maintained of the meetings for staff, unable to attend, to read for information sharing.

Staff were knowledgeable of individual service users' needs, their daily routine wishes and preferences. Staff interactions with service users were observed to be friendly and supportive.

Service users' needs were met through a range of individual and group activities such as learning new skills in a number of different workshops, such as clay, wood, fibre, wax and soap. Service users were also supported to develop gardening skills, arts and crafts. Service users attended the Giant's Causeway Visitors Centre, where many of the products the service users make, are sold. Service users also attended ten pin bowling in The Jet Centre and New Age Kurling.

The day care setting also provided a Leisure Enhancement Service, which was led by Occupational Therapists.

Activities provided under this service aims to improve the service users' capabilities in exploring new or old leisure options. Some of the activities offered under this scheme included Archery, fishing and chutney making.

3.3.3 Management of Care Records

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 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.

Staff recorded regular evaluations about the care and support provided.

It was good to note that the eating and drinking care plan referenced the specific level of diet noted within the Speech and Language Therapy (SALT) Care Plan.

There was a system in place to track when service users' annual reviews were due.

3.3.4 Quality of Management Systems

There has been no change in the management of the day care setting since the last inspection. Mrs Colette Fairley has been the manager in this day care setting since 30 January 2022. Staff spoken with commented positively about the manager, describing her as 'fantastic' and 'fabulous'.

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.

There was a process in place to manage any complaints; none had been received since the last care inspection.

Review of incident records identified that they were managed appropriately.

The annual quality report was reviewed and noted to include stakeholder feedback.

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. A specific individual was identified as the day care setting's ASC. It was established that good systems and processes were in place to manage the safeguarding and protection of adults at risk of harm.

There was a protocol in place for staff to follow where service users were found not to be at home. 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.

There was evidence that the manager responded to any concerns, raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services provided within the day care setting.

3.3.5 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.

Review of records and discussion with the manager confirmed that environmental and safety checks were carried out, as required on a regular basis, to ensure the day care setting was safe to attend. For example, fire safety checks, electrical installation checks and water temperature checks.

There was evidence that systems and processes were in place to manage infection prevention and control which included regular monitoring of the environment and staff practice to ensure compliance.

A fire risk assessment had been completed on 6 February 2025. 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.

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 Mrs Colette Fairley, Manager, as part of the inspection process and can be found in the main body of the report.



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