

Inspection Report

Name of Service: Fortwilliam Centre

Provider: Belfast Health and Social Care Trust

Date of Inspection: 12 December 2024

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:	Belfast Health and Social Care Trust
Responsible Individual:	Mrs Maureen Edwards
Registered Manager:	Mrs Christine Noble (acting)
This is a Day Care Setting that provides day care services for adults who have a learning disability. Some of the people who use the service also have assessed needs related to a physical disability or mental illness.	

2.0 Inspection summary

An unannounced inspection took place on 12 December 2024 between 9.30 a.m. and 2:00 p.m. This was conducted by a care Inspector.

The inspection examined the day centre'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 were also reviewed.

The inspection was undertaken to evidence how the day care setting is performing in relation to the regulations and standards, and to assess progress with the area for improvement identified during the last care inspection on 4 December 2023.

An area for improvement was identified, relating to recruitment records.

As a result of this inspection, the area for improvement previously identified was assessed as having been addressed by the provider.

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.

To prepare for this inspection we reviewed information held by RQIA about this day care setting. This included the previous areas for improvement issued, registration information, and any other written or verbal information received from service users, relatives, staff or the commissioning Trust.

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 survey.

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

We spoke to a range of service users and staff to seek their views of the day care setting. The information provided indicated that there were no concerns.

Service users spoke positively about their experience of the day care setting; one told us that they loved the staff while another said that they had painted the Christmas decorations.

Staff spoke very positively in regard to the care delivery and management support in the day care setting. One told us that they felt they loved coming and working there, while another stated that the centre was great.

There were no responses to the questionnaires or the electronic survey.

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 4 December 2023 by a care inspector. A Quality Improvement Plan (QIP) was issued. This was approved by the care inspector and was validated during this inspection.

Areas for improvement from the last inspection on 4 December 2023		
Action required to ensure compliance with The Day Care Setting Regulations (Northern Ireland) 2007		Validation of compliance
Area for Improvement 1 Ref: Regulation 26 (4) (d) (f) Stated: First time	The registered person shall make adequate arrangements for the testing of fire equipment, and ensure, by means of fire drills and practices that all persons employed in the day care setting are aware of the procedure to be followed in case of fire.	Met

	Action taken as confirmed during the inspection: Inspector confirmed records relating to the testing of fire equipment and fire evacuation drills had been undertaken were available and up to date at the time of inspection.	
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3.4 Inspection findings

3.4.1 Staffing Arrangements

A review of the day care setting's staff recruitment records confirmed that no new staff had commenced employment since the last inspection; however, a review of the documentation in relation to staff that were provided from recruitment agencies was undertaken. One such document was unclear in relation to training completed and did not contain a photograph of the worker or assurances that references had been obtained. The induction for this worker also contained incorrect service name information. An area for improvement has been identified.

3.4.2 The 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 adult safeguarding policy and procedures were reflective of the Department of Health's (DoH) regional policy and clearly outlined the procedure for staff in reporting concerns. The organisation had an identified Adult Safeguarding Champion (ASC).

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.

Staff were provided with training appropriate to the requirements of their role. The manager confirmed that no users required the use of specialised equipment to assist them with moving.

A review of care records identified that risk assessments and care plans were kept up to date.

All staff had been provided with training in relation to medicines management. The manager advised that no service users currently receive medications in the day care setting.

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 Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles.

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

3.4.3 The arrangements for promoting service user involvement

From reviewing service users' care records and through discussions with service users, it was good to note that service users had an input into devising their own plan of care. The service users' care plans contained details about their likes and dislikes and the level of support they may require.

The day care setting had undertaken an evaluation of the service and produced a report which included feedback from service users with recommendations and actions.

It was also positive to note that the day care setting had service user meetings on a regular basis which enabled the service users to discuss what they wanted from attending the day centre and any activities they would like to become involved in.

3.4.4 The arrangements to ensure robust managerial oversight and governance

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

The Annual Quality Report was reviewed and was satisfactory.

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

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

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. No complaints were received since the last inspection.

We discussed the acting manager arrangements that have been ongoing since 7 November 2022.

4.0 Quality Improvement Plan/Areas for Improvement

An area for improvement has been identified where action is required to ensure compliance with Regulations and Standards.

	Regulations	Standards
Total number of Areas for Improvement	1	0

The area for improvement and details of the Quality Improvement Plan were discussed with Mrs Christine Noble, Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Quality Improvement Plan	
Action required to ensure compliance with the Day Care Setting Regulations (Northern Ireland) 2007.	
Area for improvement 1 Ref: Regulation 21 (2) (b) Schedule 2 Stated: First time To be completed by: Immediately from the date of inspection	<p>The Registered Person shall ensure that the information and documents specified from recruitment agencies in relation to Schedule 2 have been confirmed as having been obtained.</p> <p>Ref: 3.4.1</p> <p>Response by registered person detailing the actions taken: The Registered Manager has received updated documentation from the Recruitment Agency which includes the required information in relation to Schedule 2. The Registered Manager will ensure moving forward that all newly appointed Agency Staff profiles will include this information.</p>



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