

# Unannounced Care Inspection Report 10 March 2020



## Fairways - The Cloonavin Green Project

**Type of Service: Domiciliary Care Agency**  
**Address: 6 Cloonavin Green, Coleraine, BT52 1RG**  
**Tel No: 02870359417**  
**Inspector: Jim McBride**

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It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

## 1.0 What we look for



## 2.0 Profile of service

Fairways the Cloonavin Green Project is a supported living type domiciliary care agency, located in Coleraine. Staff also provide an outreach service for ten individuals, who are living in the local area.

The agency's aims to provide care and housing support to 33 service users with mental health and learning disability needs in their own homes with the overall goal of promoting independence and maximising quality of life; this includes helping service users with tasks of everyday living, emotional support and assistance to access community services. The service users' care and support is commissioned by the Northern Health and Social Care Trust (HSC).

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Fairways Cloonavin Ltd  <b>Responsible Individual:</b> Mr Robert Anthony (Tony) Dunlop	<b>Registered Manager:</b> Miss Victoria Jane Derbyshire
<b>Person in charge at the time of inspection:</b> Miss Victoria Jane Derbyshire	<b>Date manager registered:</b> 10 January 2011

### 4.0 Inspection summary

An unannounced inspection took place on 10 March 2020 from 09.00 to 11.00.

This inspection was underpinned by the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, the Domiciliary Care Agencies Regulations (Northern Ireland) 2007 and the Domiciliary Care Agencies Minimum Standards, 2011.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the agency was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to: Access NI and staff registrations with the Northern Ireland Social Care Council (NISCC).

The findings of this report will provide the agency with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Miss Victoria Jane Derbyshire, registered manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

### 5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this agency. This included the previous inspection report, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on discussion with service users, and staff to find out their views on the service. We also highlighted recent comments from relatives and HSC professionals involved with the service.

We ensured that the appropriate staff checks were in place before staff visited service users.

- Recruitment records specifically relating to Access NI and NISCC registration.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service. We added comments received from HC professionals involved with the service.

We ensured that the appropriate staff checks were in place before staff visited service users.

- Recruitment records specifically relating to Access NI and NISCC registration.

A poster was provided for staff detailing how they could complete an electronic questionnaire. No responses were received prior to the issue of this report.

Ten questionnaires were also provided for distribution to the service users and their representatives; no responses were returned within the timeframe for inclusion within or these report, three responses were received that clearly shows good satisfaction levels.

#### **Comments:**

- "I'm keeping well and healthy."

During the inspection the inspector met with two service users and one staff member. The inspector also spoke with one relative.

#### **Service user comments:**

- "Staff always listen to me."
- "All the staff are excellent."
- "I have no complaints."
- "I'm treated with respect."
- "I'm always asked how I feel."
- "I enjoy living here and feel well supported by staff."

#### **Staff Comments:**

- "I had a good comprehensive induction that prepared me for my role."
- "I shadowed other experienced staff that was helpful."
- "Good care and support, and focusses on outcomes for the service users."
- "I'm supported well by the manager and staff."

#### **Relative's comments:**

- "I could not speak highly enough about the service."
- "My relative is getting in really well."
- "I have no complaints the staff are always approachable."

**HSC Staff comments:**

- “Staff commitment is strong.”
- “Everyone is clearly well informed and training was positive.”
- “The staff are great willing to help, well skilled and well informed.”
- “I’m very satisfied with the commitment from the team at Cloonavin.”

The inspector would like to thank the registered manager, service users, service user’s relatives and staff for their support and co-operation throughout the inspection process. The findings of the inspection were provided to the manager at the conclusion of the inspection.

**6.0 The inspection**

This inspection focused solely on issues previously outlined in section 4.0.

**6.1 Inspection findings**

Discussions with the manager and a review of records confirmed that there was a system in place to ensure that relevant pre-employment checks with Access NI had been undertaken prior to employment. There was a system in place to ensure that staff were registered with NISCC and were monitored on a regular basis.

**Areas for improvement**

No areas for improvement were identified during the inspection.

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of areas for improvement</b>	0	0

**7.0 Quality improvement plan**

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.



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