

Inspection Report

Name of Service:	Faughanvale Community Project
Provider:	Faughanvale Community Project Limited
Date of Inspection:	07 October 2025

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation:	Faughanvale Community Project Limited
Responsible Individual:	Mrs. Rosemary Logue
Registered Manager:	Mr. Raymond McKenna (Acting)
Service Profile – Faughanvale Community Project is a day care setting located in Greysteel, which can accommodate up to 35 service users aged from 18 years old. The day care setting provides care and daytime activities to those living with learning disability, physical disability and sensory impairment. The day care setting is open every Tuesday, Wednesday and Thursday. The Western Health and Social Care Trust (WHSCT) commission the service.	

2.0 Inspection summary

An unannounced inspection took place on 07 October 2025, between 09.00 a.m. and 12.30 p.m. A care inspector carried out the inspection.

The inspection examined the day care setting's governance and management arrangements, reviewing areas such as staff recruitment, professional registrations, staff induction, training and adult safeguarding. It also looked at the reporting and recording of accidents and incidents, complaints, whistleblowing, service user involvement, and Dysphagia management.

The inspector identified good practice in relation to service user involvement, feedback from service users and relatives, and service user care plans. There were good governance and management arrangements in place.

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 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, the inspector reviewed a range of information about the service. 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.

The inspector provided information 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

Throughout the inspection, the inspector sought to speak with service users, their relatives or visitors and staff for their opinions on the quality of the care and support, their experiences of attending, visiting or working in Faughanvale Community project.

The service users gave very positive feedback. One of the service users stated that he 'loves it here and helps the staff'. Another commented that 'I've been here 30 years and love it'. Another said that 'this place has changed my life for the better'.

The inspector also spoke with the relatives of service users. Their feedback was also positive. One stated that 'my relative could not imagine being without it'. Another said that 'Faughanvale is the best place ever'.

Staff gave similarly positive feedback. One stated that she loved it so much 'she could not leave'. Another commented that 'the manager is great and there are no issues accessing training'.

Feedback from questionnaires indicated that service users have no concerns about the care provided in the day care setting, with respondents indicating that they were very satisfied that care provided was safe, effective and compassionate and that the service was well managed.

4.0 Inspection findings

4.1 What are the systems in place for identifying and addressing risks?

The inspector reviewed the day care setting's provision for the welfare, care and protection of service users. 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). The day care setting's annual Adult Safeguarding Position report was reviewed and found to be satisfactory.

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 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 in normal business hours and out of hours. They could also describe their role in relation to reporting poor practice and their understanding of the day care setting's policy and procedure with regard to whistleblowing.

Service users said they had no concerns regarding their safety; they described how they could speak to staff if they had any concerns about safety or their care. The day care setting had provided service users with information about keeping themselves safe and the details of the process for reporting any concerns.

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, the day care setting allow service users make their own decisions and are helped to do so when needed.

Staff had completed Deprivation of Liberty Safeguards (DoLS) training appropriate to their job roles. The manager reported that none of the current service users was subject to DoLS. A resource folder was available for staff to reference.

The manager was aware that RQIA must be informed of any safeguarding incident that is reported to the Police Service of Northern Ireland (PSNI).

4.2 What are the systems in place for the promotion of service user involvement?

The inspector reviewed service users' care records and through discussions with service users, observed 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 keeps care and support plans under regular review and service

users and /or their relatives participate, where appropriate, in the review of the care provided on an annual basis, or when changes occur. The day care setting had undertaken regular reviews in keeping with its policies and procedures. There was also evidence of regular contact with service users and their representatives, in line with the commissioning trust's requirements.

The inspector also viewed evidence of regular service users' meetings, which enabled the staff to keep service users updated on any issues arising that may affect them, as well as providing an opportunity to discuss the provisions of their care.

4.3 What are the systems in place for meeting the Dysphagia needs of service users?

Although there were no service users with Speech and Language Therapy (SALT) recommendations regarding the need for a modified diet, a review of training records and discussions with staff confirmed that they had completed training in Dysphagia and felt competent in relation to how to respond to choking incidents should they occur.

4.4 What systems are in place for recruitment and are they robust?

Whilst there had been no new staff recently recruited into Faughanvale Community Project, a review of recruitment records confirmed that staff had been recruited, inducted and trained in line with the regulations. The inspector 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. The day care setting retained written records of the each staff member's capability and competency in relation to their job role.

A review of the day care setting's staff records confirmed that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC). There was a system in place for registrations to be monitored monthly by the manager. Staff spoken with confirmed that they were aware of their responsibilities to keep their registrations up to date.

4.5 What arrangements are in place for staff induction and training?

The day care setting provided staff with training appropriate to the requirements of their role.

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. This ensures they are competent to carry out the duties of their job in line with the day care setting's policies and procedures. There was a formal induction programme of at least three days, which included shadowing of a more experienced staff member.

The day care setting has maintained a record for each member of staff of all training, including induction and professional development activities undertaken. The inspector reviewed the training matrix maintained by the day care setting and found the majority of training to be up to date.

The manager reported that none of the service users currently required the use of specialised equipment. Staff were aware of how to source such training should it be required in the future.

The day care setting had provided staff with training in relation to medicines management. The manager confirmed that at present staff do not administer medications to service users.

4.6 What are the arrangements to ensure robust managerial oversight and guidance?

There were monitoring arrangements in place in compliance with Regulations and Standards. 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 the care records of service users; accident/incidents; safeguarding matters; staff recruitment, training and supervision, 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 along with current certificates of public and employers' liability insurance.

There was a system in place to ensure that complaints were managed in accordance with the day care setting's policy and procedure. Although Faughanvale Community Project had not received any complaints since the last inspection, the day care setting continues to review these as part of its quality monitoring process.

5.0 Quality Improvement Plan/Areas for Improvement

The inspector did not identify any Areas for Improvement during the inspection. The inspector discussed the findings of the inspection with Mr. Raymond McKenna (Acting Manager) and Mrs. Mary Watson (Senior Carer), as part of the inspection process. These can be found in the main body of the report.



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