

Inspection Report

Name of Service: Lakeview Adult Placement Agency

Provider: Western Health and Social Care Trust

Date of Inspection: 9 February 2026

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:	Western Health and Social Care Trust
Responsible Individual/Responsible Person:	Mr Neil Guckian
Registered Manager:	Ms Glenda Barnett
Service Profile: The Western HSC Trust Adult Placement Scheme (APA) offers long and short term placements to service users who are adults with a Learning Disability who been assessed and referred by a HSC Trust professional. The longer term placements are within a host family home registered by the WHSCT, who ensure the host families are able to provide suitable care, accommodation and support for the service users who are placed with them.	

2.0 Inspection summary

An announced inspection took place on 9 February 2026, between 11.00 am and 1.50 pm by care Inspector.

The last care inspection of the adult placement agency was undertaken on 26 March 2025 by a care Inspector. No areas for improvement were identified. This inspection was undertaken to evidence how the adult placement agency is performing in relation to the regulations and draft standards; and to determine if the adult placement agency is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that safe, effective and compassionate care was delivered to service users and that the agency was well led. Details and examples of the inspection findings can be found in the main body of the report.

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 agency was performing against the regulations and draft 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, draft standards and best practice.

To prepare for this inspection we reviewed information held by RQIA about this agency. This included registration information, and any other written or verbal information received from service users, relatives, carers, staff or the commissioning Trust.

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

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

Feedback was received from service user representatives, carers, and staff regarding the agency.

Service users described the service as "very good." Comments included, "I'm always well looked after."

Carers expressed positive views about the agency's service. One carer noted good communication with the manager and praised the service highly, stating that the manager is readily available to address any concerns. The carer stated, "I cannot praise the service highly enough; they regularly call to check if everything is going well. The training provided is both good and enjoyable to complete."

Staff reported no concerns about the care and support offered by the agency. Comments included: "The service is very good. I enjoy working here. The manager is very good and supportive."

The information provided indicated that there were no concerns in relation to the agency.

3.3 Inspection findings

3.3.1 Staffing and Carer Arrangements

Safety in Adult Placement Agencies begins at the point of staff and carer recruitment and continues through to induction with regular training, continued monitoring and support for carers and supervision for agency staff.

A review of records evidenced that robust arrangements were in place for the recruitment of staff and carers. No new staff have been recruited since the last inspection. For newly appointed carers, arrangements included obtaining full employment histories, criminal record checks (AccessNI) for all household members over 10 years old, suitable references, proof or declaration of medical fitness, and the applicant's driving licence, if applicable. Additionally, Ministry of Transport (MOT) and insurance certificates were required for any vehicles in the household used for transporting service users.

Applications to become an Adult Placement Carer were scrutinised by a panel prior to approval. Additionally, a system was established to match the specific needs of service users with suitable carers.

A review of carers' training records confirmed they were up to date. Carers who spoke with us confirmed that they received sufficient training for their roles. A review of a sample of training records established that carers had received mandatory training relevant to their roles and responsibilities.

Arrangements were in place for each placement to be regularly monitored by agency staff to ensure service users received safe and effective care and that carers were sufficiently supported by the agency.

Procedures were in place for appraising staff performance, and supervisions were undertaken in accordance with the agency's policy and procedures.

Staff reported feeling well supported in their roles by the manager.

3.3.2 Care Delivery/Management of Care Records

The care plans for service users included details of their likes, dislikes, preferences, and the level of care and support they require. Care records demonstrated that service users or their representatives, where possible, were involved in planning their own care. Efforts were made to ascertain their preferences and choices regarding how their support was provided. The care plans and associated risk assessments were detailed, promoting the dignity and well being of the service user.

Care records were person centred, regularly reviewed, and updated to ensure they continued to meet the service users' needs. There was evidence of regular contact with service users and their representatives.

Good nutrition and a positive dining experience are important to the health and social well-being of service users. Service users may require a range of support with meals, which may include simple encouragement through to full assistance from carers, and their diet may be modified. Advice was given to the person in charge to ensure that Speech and Language Therapist (SALT) assessments are referenced in the care plan. It was positive to note that carers had received training in dysphagia.

Care reviews had been undertaken in accordance with the agency's policies and procedures.

3.3.3 Quality of Management Systems

There have been no changes to the managerial arrangements within the agency since the previous inspection. Staff described the manager as "very good and supportive."

Monitoring arrangements were in place in compliance with regulations and draft standards. Records reviewed showed that monitoring visits were undertaken regularly. During these visits, agency staff members visited the carer's home while the service user was present to observe

daily tasks and verify that carers met the required standards. Reports related to the agency's monitoring visits were reviewed and found to be robust.

There was a system of internal audits and an annual satisfaction survey, during which feedback from service users, their relatives, carers, and other stakeholders was sought. This feedback was incorporated into an annual "Monitoring Quality in Adult Placement Agencies" report.

The person in charge was aware of the types of incidents required to be notified to RQIA. No incidents had occurred that required investigation under the Serious Adverse Incidents (SAI) procedure.

A system was in place to ensure that complaints were managed in accordance with the agency's policy and procedure. No complaints have been received since the last inspection.

3.3.4 Systems in place for identifying and addressing risks

Adult placement agencies are required to have a designated person known as the Adult Safeguarding Champion (ASC), who is responsible for implementing the regional protocol and the agencies adult safeguarding policy. An ASC was appointed for the agency, and it was established that effective systems and processes were in place to manage the safeguarding and protection of adults at risk of harm.

Staff and carers are required to complete adult safeguarding training and receive regular updates thereafter. Staff indicated they have a clear understanding of their responsibilities in identifying and reporting any actual or suspected incidents of abuse. They could describe their role in relation to reporting poor practice and their understanding of the agency's policy and procedure regarding whistleblowing. Carers are required to complete adult safeguarding training during their induction programme and they receive updates thereafter, in line with legislation and draft standards. It was good to note that carers also received training in children's safeguarding.

The agency retained records of any referrals made to the Health and Social Care (HSC) Trust in relation to adult safeguarding. A review of these records indicated that the referrals had been managed appropriately.

The Mental Capacity Act (Northern Ireland) 2016 (MCA) provides a legal framework for making decisions on behalf of service users who may lack the mental capacity to do so themselves. The MCA requires that, as far as possible, service users make their own decisions and are supported in doing so when needed. When service users lack the mental capacity to make particular decisions, any decisions made on their behalf must be in their best interests and as least restrictive as possible. Arrangements are in place to ensure that service users requiring high levels of supervision, monitoring, or restriction have their capacity considered and, where appropriate, assessed. It was good to note staff and carers have completed Deprivation of Liberty Safeguards (DoLS) training appropriate to their roles. The agency maintains a DoLS register.

There were systems in place to ensure that notifiable events were reported to RQIA or other relevant bodies.

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

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 the person in charge, as part of the inspection process and can be found in the main body of the report.



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