The Regulation and Quality Improvement Authority

Inspection Report

Name of Service: **Fairfields Home Care**

Provider: **Care Facilities & Management Limited**

Date of Inspection: **31 July 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:	Care Facilities & Management Limited
Responsible Individual:	Mr Philip McGowan
Registered Manager:	Mr Philip McGowan
Service Profile: Fairfields Home Care is a Domiciliary Care Agency. The agency provides personal care and social support to adults living in their own homes in the Cookstown and surrounding area.	

2.0 Inspection summary

An unannounced inspection took place on 31 July 2025, between 10.45 a.m. and 1.30 p.m. The inspection was conducted by a care Inspector.

The inspection was undertaken to evidence how the agency is performing in relation to the regulations and standards; and to assess progress with the area for improvement identified, by RQIA, during the last care inspection on 19 March 2024; and to determine if the agency is delivering safe, effective and compassionate care, and if the service is well led.

As a result of this inspection, the previous area for improvement was assessed as having been addressed by the provider and no new areas for improvement were identified. Details can be found in the main body of this report.

It was evident that staff promoted the dignity and well-being of service users, and that staff were knowledgeable and well trained to deliver safe and effective care.

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 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 agency. This included the previous area for improvement issued, 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 for or being supported by the agency; and review/examine a sample of records to evidence how the agency is performing in relation to the regulations and standards.

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

As part of the inspection process, we spoke to a service user's relative and staff members to seek their views of the care and support provided by the agency.

The service user's relative told us that they had no concerns about the care and support provided. Comments included, "The carers are very good; new staff always introduce themselves; the communication with the agency is good."

Staff told us they had no concerns about the agency and feel they are well supported by the manager and the supervisor. One told us that training is good and they are given enough time to carry out their care tasks during care calls.

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

3.3 Inspection findings

3.3.1 Staffing Arrangements

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. There was evidence of systems in place to manage staffing.

An area for improvement arising from the previous inspection related to staff recruitment. Following a review of the agency's staff recruitment records, it was 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. This area for improvement has been met.

There was evidence that all newly appointed staff had completed a structured orientation and induction, having regard to the Northern Ireland Social Care Council's (NISCC) Induction Standards for new workers in social care, to ensure they were competent to carry out the duties of their job in line with the agency's policies and procedures. There was a structured induction programme, which also included shadowing of a more experienced staff member. Written records were retained by the agency of the person's capability and competency in relation to their job role.

Review of records and discussion with the manager confirmed that there is a system in place to ensure all staff receive appropriate training to fulfil the duties of their role on an ongoing

basis. This includes a programme of refresher/update training for staff, which is monitored by the manager to ensure that staff are compliant with attending the training updates.

Staff spoke positively about the training they receive and confirmed they received sufficient training to enable them to fulfil the duties and responsibilities of their role. Staff said they felt well supported in their role.

3.3.2 Management of Care Records and Care Delivery

Service users' needs were assessed when they were first referred to the agency 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. Staff recorded regular evaluations about the care and support provided.

Care records were well maintained, regularly reviewed and updated to ensure they continued to meet the service users' needs. The details of care plans were shared and signed by service users and/or their representatives as appropriate.

Care reviews had been undertaken in keeping with the agencies policies and procedures. There was also evidence of regular contact with service users and their representatives, in line with the commissioning Trust's requirements.

Service users care records were stored securely and accessible to authorised personnel in accordance with data protection regulations.

3.3.3 Quality of Management Systems

There has been a change in the management of the agency since the last inspection. Mr Philip McGowan has been the manager in this agency since 20 January 2025.

Staff consulted with commented positively about the manager and described him as supportive.

The agency had a range of policies and procedures available for staff to guide them in their practice. These policies were noted to be maintained in a manner that was accessible to staff.

Review of a sample of records evidenced that a system for reviewing the quality of care and staff practices was in place.

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

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

Agencies are required to have a person known as the Adult Safeguarding Champion (ASC), who has responsibility for implementing the regional protocol and the agency's adult

safeguarding policy. Discussions with the manager established that they were knowledgeable in matters relating to 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. They could also describe their role in relation to reporting poor practice.

There was evidence that the agency responded to any concerns, raised with them or by their processes, and took measures to improve practice and/or the quality of services provided by the agency, as necessary.

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 Mr Philip McGowan, Manager/Responsible Individual, as part of the inspection process, and can be found in the main body of the report.

The Regulation and Quality Improvement Authority

The Regulation and Quality Improvement Authority

James House
2-4 Cromac Avenue
Gasworks
Belfast
BT7 2JA

Tel: 028 9536 1111

Email: info@rqia.org.uk

Web: www.rqia.org.uk

Twitter: @RQIANews