

Inspection Report

8 November 2022



Weavers House Residential Care Home

Type of service: Residential Care Home
Address: 40 Moneymore Road, Cookstown, BT80 8EH
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www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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: Kathryn Homes Ltd Responsible Individual Stuart Johnstone	Registered Manager: Ms Andrea Harkness Date registered: 12 June 2020
Person in charge at the time of inspection: Ms Andrea Harkness	Number of registered places: 47 A maximum of 23 residents in RC-I category and a maximum of 24 residents in RC-DE category. 1 named resident in category RC-PH.
Categories of care: Residential Care (RC) I – Old age not falling within any other category. DE – Dementia.	Number of residents accommodated in the residential care home on the day of this inspection: 44
Brief description of the accommodation/how the service operates: This home is a registered Residential Care Home which provides health and social care for up to 47 residents. The home is divided in two units over two floors. Lissan suite located on the first floor provides care for older people. Mill suite located on the second floor provides care for people with dementia. There is a Nursing Home located within the same building and the registered manager for this home manages both services.	

2.0 Inspection summary

An unannounced inspection took place on 8 November from 10.00 am to 4.15 pm. The inspection was carried out by a care inspector.

The inspection sought to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

The home was warm and free from malodour and bedrooms were tastefully personalised. We observed that staff were professional and polite as they completed their duties and they told us they were supported in their roles by the manager.

Residents were seen to be well cared for and said that living in the home was a good experience. There was clear evidence of attention to personal care and dressing and additional assistance and support was provided where this was required, in a compassionate manner. The feedback from residents confirmed that they were satisfied with the care and service provided in Weavers House Residential Care Home.

There were no areas requiring improvement identified during this inspection.

3.0 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.

To prepare for this inspection we reviewed information held by RQIA about this home. This included the returned quality improvement plan, registration information, and any other written or verbal information received from residents, relatives, staff or the Commissioning Trust.

Throughout the inspection RQIA will seek to speak with residents, their relatives or visitors and staff for their opinion on the quality of the care and their experience of living, visiting or working in this home.

Questionnaires were provided to give residents and those who visit them the opportunity to contact us after the inspection with their views of the home. A poster was provided for staff detailing how they could complete an on-line questionnaire.

The daily life within the home was observed and how staff went about their work.

A range of documents were examined to determine that effective systems were in place to manage the home.

4.0 What people told us about the service

We met with 26 residents and six staff either individually or in small groups.

Residents told us that they felt safe and well cared for. They described the staff as being respectful, helpful and friendly. Residents stated that they enjoyed the food and there was always a choice of food available. Residents commented that the care delivery was to a high standard and that there were lots of activities available in the home. Comments included: "It's a good place; there is plenty of food. I am well looked after." "I love it here; I am very happy and very safe in here."

Staff spoke positively about working in the home and advised there was good team work within the home. Discussion with the staff confirmed that they were knowledgeable in relation to the specific needs of the residents. Staff said that the manager was very approachable and that they felt well supported in their role. Comments included: "This is a good staff team; we all communicate well together. We all get on well and help each other out. There is enough staff on duty."

No completed questionnaires or responses to the on-line staff survey were received following the inspection.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 20 July 2021		
Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011) (Version 1:1)		Validation of compliance
Area for Improvement 1 Ref: Standard 8.2 Stated: First time	The registered person shall ensure that the daily evaluations of care are meaningful and reflective of the current situation of the resident.	Met
	Action taken as confirmed during the inspection: There was evidence that this area for improvement was met.	
Area for improvement 2 Ref: Standard 27.1 Stated: First time	The registered person shall ensure that the following matters are addressed: <ul style="list-style-type: none"> • Broken bins in bathroom areas need to be replaced • Attend to the identified malodour • Prescribed creams should be safely stored • Appropriate cleaning measures should be in place in the dining areas between each mealtime. 	Met
	Action taken as confirmed during the inspection: There was evidence that this area for improvement was met.	

5.2 Inspection findings

5.2.1 Staffing Arrangements

Safe staffing begins at the point of recruitment. There was evidence that a robust system was in place to ensure staff were recruited correctly and all necessary checks were carried out before staff commenced employment.

There were systems in place to ensure staff were trained and supported to do their job. There was evidence in place to verify that staff received regular supervision and appraisal. In addition staff received training in a range of topics including moving and handling, fire safety and adult safeguarding.

Staff were appropriately registered with their professional body. Newly appointed staff were supported to register with the Northern Ireland Social Care Council (NISCC) within the required timeframe.

Staff said there was good team work and that they felt well supported in their role, were satisfied with the staffing levels and the level of communication between staff and management.

The staff duty rota accurately reflected the staff working in the home on a daily basis. The duty rota identified the person in charge when the manager was not on duty. The manager told us that the staffing arrangements were reviewed regularly to ensure that any changing needs of the residents were met. It was noted on the day of the inspection that there was enough staff in the home to respond to the needs of the residents in a timely way.

It was observed that staff responded to requests for assistance promptly in a caring and compassionate manner, for example, staff were observed to attend to residents personal care needs promptly and during the lunchtime meal staff were observed responding quickly to the requests of residents for drinks.

Residents said that they felt safe in the home and that staff were always available and were kind to them. One comment made was "I feel safe in here and I am happy enough."

5.2.2 Care Delivery and Record Keeping

The home had a calm and relaxed atmosphere. Positive interactions were observed between residents and the staff.

Staff met at the beginning of each shift to discuss any changes to the needs of the residents. Staff were knowledgeable of individual residents' needs, their daily routine wishes and preferences.

It was observed that staff respected residents' privacy by their actions such as knocking on doors before entering, discussing residents' care in a confidential manner, and by offering personal care to residents discreetly.

Staff were skilled in communicating with residents; they were respectful, understanding and sensitive to their needs. Staff interactions with residents were observed to be friendly, polite, warm and supportive. Staff were seen to seek residents' consent when delivering care. We observed residents able to walk around freely and soft music was playing in the background.

Examination of records and discussion with the staff confirmed that the risk of falling and falls were well managed.

Good nutrition and a positive dining experience are important to the health and social wellbeing of residents. Residents may need a range of support with meals; this may include simple encouragement through to full assistance from staff.

Staff were seen to socialise with residents throughout the lunchtime meal. The mealtime was observed to be a pleasant and unhurried experience. Staff had made an effort to ensure residents were comfortable, had a pleasant experience and had a meal that they enjoyed.

A menu was displayed in the dining room with alternative choices catered for. Residents and staff spoke highly of the food provision. The food was attractively presented and smelled appetising. There was a variety of drinks available. Staff were knowledgeable in relation to residents' nutritional requirements and a record of this was maintained in the kitchen. The tables were set with condiments.

Care records were accurately maintained to help ensure that staff had an accurate understanding of residents' nutritional needs. There was evidence that residents' weights were checked at least monthly to monitor weight loss or gain.

Residents' needs were assessed at the time of their pre admission to the home. Following admission care plans were developed in consultation with the resident, their next of kin and their aligned named worker to direct staff on how to meet residents' needs. In addition, any advice or directions by other healthcare professionals was included in the assessment and care plans. Residents' care records were held safely and confidentially.

Residents' individual likes and preferences were reflected throughout the records. Daily records were kept of how each resident spent their day and the care and support provided by staff. The outcome of visits from any healthcare professional was recorded.

Residents commented positively on the care delivery in the home and praised the meal provision. Residents said they felt well looked after and that staff were helpful and friendly.

Staff reported that the care provided to the residents was of a high standard and they were always involved in their care.

5.2.3 Management of the Environment and Infection Prevention and Control

Observation of the home's environment evidenced that the home was clean and tidy. We viewed a sample of the bedrooms, bathrooms, lounges and the dining room.

Residents' bedrooms were personalised and tidy. Communal lounges and dining rooms were welcoming spaces for residents. Residents could choose where to sit or where to take their meals and staff were observed supporting residents to make these choices. Fire exits and corridors were observed to be clear of clutter and obstruction.

Throughout the home there was evidence of accessible PPE and hand sanitisers within each communal area. During the mealtime staff were observed to be wearing the correct personal protective equipment (PPE) and to adhere to the correct infection control guidelines.

Staff were observed to carry out hand hygiene at appropriate times and to use PPE in accordance with the regional guidance. Staff use of PPE and hand hygiene was regularly monitored by the manager and records were kept.

Visiting arrangements were managed in line with Department of Health guidance.

5.2.4 Quality of Life for Residents

The atmosphere in the home was homely and relaxed with residents seen to be comfortable, content and at ease in their environment and interactions with staff. It was observed that staff offered choices to residents throughout the day which included preferences for what clothes they wanted to wear and where and how they wished to spend their time.

Staff were seen to be attentive to residents needs including their social well-being. A programme of activities was in place which mostly involved one to one time with residents or in small groups. We observed some residents listening to music and dancing with staff, while others were reading their daily paper and watching television. There was evidence displayed throughout the home of activities completed by the residents and staff.

The genre of music and choice of television programmes played in the home was appropriate to residents' preferences and this helped create the nice atmosphere in the home.

Visiting arrangements were in place with positive benefits to the physical and mental wellbeing of residents.

Two residents made the following comments; "I am so happy in here and so well cared for" and "I love it here; it's a great place."

5.2.5 Management and Governance Arrangements

There has been no change in the management arrangements since the last inspection; Ms Andrea Harkness is the registered manager.

Staff commented positively about the manager of the home and described her as supportive, approachable and always available for guidance. Staff said that the manager in the home is supportive when it comes to training and development.

There was evidence that a robust system of auditing was in place to monitor the quality of care and other services provided to residents. There was evidence of auditing across various aspects of care and services provided by the home such as regular audits of infection prevention and control, training, supervisions and appraisals.

There was a system in place to manage complaints. The most recent complaints were viewed and this evidenced a good overall summary of the complaint, the actions taken and the outcomes.

It was established that there was a system in place to monitor accidents and incidents that happened in the home. Accidents and incidents were notified, if required, to residents' next of kin, their care manager and to RQIA.

Residents spoken with said that they knew if they had any concerns that they could speak to the staff or the manager of the home. During our discussions with staff it was evident that they were aware of who the person in charge of the home was, their own role in the home and how to raise any concerns or worries about residents, care practices or the environment.

The home was visited by a representative of the registered provider to consult with residents, their relatives and staff and to examine all areas of the running of the home. The reports of these visits were completed in detail; where action plans for improvement were put in place, these were followed up to ensure that the actions were correctly addressed. These are available for review by residents, their representatives, the Trust and RQIA.

7.0 Quality Improvement Plan/Areas for Improvement

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



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