

# Unannounced Care Inspection Report 1 October 2019











# **Longfield Care Home**

Type of Service: Residential Care Home Address: 2 Longfield Road, Eglinton,

Derry BT47 3PY Tel No: 028 7181 2552 Inspector: John McAuley

www.rqia.org.uk

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 from their responsibility for maintaining compliance with legislation, standards and best practice.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

#### 1.0 What we look for



#### 2.0 Profile of service

This is a registered residential care home which provides care for up to 11 residents living with dementia. The home shares the same building with a registered nursing home.

#### 3.0 Service details

Organisation/Registered Provider:	Registered Manager and date registered:
Four Seasons Bamford Ltd	Louise McCloskey
	19 April 2018
Responsible Individual:	
Maureen Claire Royston	
Person in charge at the time of inspection:	Number of registered places:
Martina Duffy, team leader	11
Categories of care:	Total number of residents in the residential
Residential Care (RC)	care home on the day of this inspection:
DE – Dementia	11

# 4.0 Inspection summary

This unannounced inspection took place on 1 October 2019 from 09.40 to 13.30 hours.

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

Evidence of good practice was found in relation to how residents were at ease, comfortable and content with their interactions with staff and in their environment. This was brought together by staffs' knowledge and understanding of their needs and social well-being, and positive staff teamwork.

One area requiring improvement was identified in relation to notification of the managerial arrangements in the home.

Residents described and indicated that living in the home as being a good experience/in positive terms.

Comments received from residents, people who visit them and staff during the inspection, are included in the main body of this report.

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

# 4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1	0

Details of the Quality Improvement Plan (QIP) were discussed with Martina Duffy, team leader, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

## 4.2 Action/enforcement taken following the most recent inspection dated 7 March 2019

The most recent inspection of the home was an unannounced care inspection undertaken on 7 March 2019. There were no further actions were required to be taken following this inspection.

# 5.0 How we inspect

To prepare for this inspection we reviewed information held by RQIA about this home. This included the findings from the previous inspections, registration information, and any other written or verbal information received, such as notification reports.

During our inspection we:

- where possible, speak with residents, people who visit them and visiting healthcare professionals about their experience of the home
- talk with staff and management about how they plan, deliver and monitor the care and support provided in the home
- observe practice and daily life
- review documents to confirm that appropriate records are kept

During the inspection a sample of records was examined which included:

- staff duty rota
- staff training schedule and training records
- one staff member's recruitment and induction records
- three residents' records of care
- complaint records
- compliment records
- governance audits / records
- accident / incident records
- reports of visits by the registered provider/monthly monitoring reports
- RQIA registration certificate

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

# 6.0 The inspection

# 6.1 Review of areas for improvement from the last care inspection dated 7 March 2019

There were no areas for improvements made as a result of the last care inspection.

# 6.2 Inspection findings

#### 6.3 Is care safe?

Avoiding and preventing harm to residents and clients from the care, treatment and support that is intended to help them.

Throughout this inspection residents and one visiting relative advised that residents felt safe in the home and well cared for. Residents also advised that staff attended to their needs in a prompt and caring manner.

## **Staffing**

The team leader advised that the staffing levels are very stable and are in keeping to the residents' dependencies. Staffing levels over the 24 hour period were discussed. General observations of care practices together with discussions with residents and staff confirmed that adequate staffing levels were in place.

An inspection of the duty rota found this accurately reflected staff on duty.

A competency and capability assessment is in place for any member of staff in charge of the home in the absence of the manager. An inspection of a sample one of these assessments found this to be appropriately in place.

All care staff are registered with the Northern Ireland Social Care Council (NISCC), as evident with an inspection of staff registration details. Discussions with staff also confirmed that they had knowledge and understanding of their obligations with registration and their accountability towards same.

#### Staff support

A programme of staff supervision and appraisal is in place. An inspection of the matrix of these found these to be maintained on an up-to-date basis. Staff also spoke positively on this provision and also added that they felt well supported on a day to day basis.

All newly appointed members of staff receive an induction and a sample of one of these records was inspected on this occasion. This was recorded in comprehensive detail.

Staff advised that they felt comfortable about reporting concerns or difficulties to the management of the home and that management embrace such in a positive constructive manner.

## Staff training

Inspection of staff records confirmed that a programme of staff training was in place. This programme included mandatory training and additional training areas to meet residents' assessed needs. The records of staff training were maintained appropriately to include the content of the training event, the name of the trainer and signatures of participation. Staff spoke positively about the provision of training.

#### Staff recruitment

An inspection of a sample of a staff member's recruitment records confirmed that staff were recruited in accordance with regulations and standards. The records were maintained in an organised methodical manner.

## Safeguarding

An inspection of staff training records confirmed that staff were in receipt of up-to-date training in adult safeguarding. Staff were aware of the points of contact for such circumstances and these details were readily displayed. Staff also advised that they were aware of the whistleblowing procedure and felt confident in reporting issues of concern if they were to arise.

#### **Environment**

The home was clean and tidy with a good standard of décor and furnishing being maintained. Communal seating lounges were pleasantly furnished with comfortable seating. Residents' bedrooms were well facilitated and personalised. Bathrooms and toilet facilities were clean and hygienic. Infection prevention aids and equipment were readily in place and in ample supplies.

The enclosed grounds of the home were maintained very well.

There were no obvious health and safety risk observed in the environment at the time of this inspection.

#### Fire safety

Staff training records and fire safety records confirmed that all staff were in receipt of up-to-date training in fire safety and fire safety drills.

Fire safety records also confirmed that there were a regular and up-to-date programme of fire safety checks maintained in the environment.

## Areas of good practice

There were examples of good practice found throughout the inspection in relation to staffing, support and training, and the home's environment.

# **Areas for improvement**

No areas for improvement were identified during the inspection in relation to this domain.

	Regulations	Standards
Total number of areas for improvement	0	0

#### 6.4 Is care effective?

The right care, at the right time in the right place with the best outcome.

Residents advised in accordance with their capabilities, that they received good care in the home and that staff were responsive to their needs in a kind caring manner. One visiting relative spoke how his relative's health and well-being had improved greatly since coming into the home.

#### Care records

An inspection of a sample of three residents' care records was undertaken. T hese records were maintained in accordance to regulations and standards. Residents' progress records were maintained well and gave good account of issues of assessed need. These had corresponding statements of care / treatment given with effect of same.

#### Effectiveness of care

General observations of care practices throughout this inspection found that care was delivered in person centred manner. For example, residents' comfort and support was facilitated by choice of seating, interests and wishes.

Good practices pertaining to infection prevention and control and assistance with mobility were observed.

Residents looked comfortable, well dressed and content and engaged in their environment.

A falls risk tool and analysis is in place to identify any trends or patterns that need subsequent actions or interventions.

Discussions with staff confirmed that they had good knowledge and understanding of residents' needs and prescribed care interventions. Staffing in the home is very stable which added to the consistency of staff on duty. General observations of care practices found that there was good team working amongst staff and their interactions with one another were friendly and supportive.

#### Areas of good practice

There were examples of good practice found throughout the inspection in relation to record keeping and staffs' knowledge and understanding of individual residents' needs and prescribed care interventions, as well as teamwork amongst staff.

## Areas for improvement

No areas for improvement were identified during the inspection in relation to this domain.

	Regulations	Standards
Total number of areas for improvement	0	0

## 6.5 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

Discussions with residents throughout this inspection confirmed that they felt staff were kind, caring and treated them with dignity and respect. General observations of care practices also evidenced that this was the case.

#### Residents' views

Residents spoke positively about the provision of care, the kindness and support received from staff, the provision of meals and the general atmosphere in the home. Some of the comments made by residents included statements such as:

- "It's a lovely place. We are very well looked after and the food is great. No problems."
- "It is very good here."
- "I am very happy."
- "The girls (staff) are all great. I get on with every one of them."

# Relative's views

A visiting relative advised that he was very happy with the care in the home and the staff were kind and supportive. The relative also advised that since his loved one's admission to the home their health and well-being had improved greatly. One of the comments made included the statements:

• "If they were all built the size of this there'd be no problems. All one big family here."

#### **Care practices**

Residents were observed to be comfortable, relaxed and at ease in their interactions with staff and with their environment. Some preferred to enjoy the company of one another in the communal areas, others chose to relax in their bedrooms. Some residents chose to partake in a games activity which they were observed to gain enjoyment from.

Staff interactions were polite, friendly, warm and supportive. Staff gave respect to residents by seeking their agreement in engaging in assistance with care. Choice was also evident in the provision of residents' meals and snacks, such as that available for the day time meal or the provision of the mid-morning drinks.

Photographs were displayed of activities and events held in the home and resident participation.

Daily newspapers were available and the genre of the television programmes and choice of music on the radio was appropriate to the age group and taste of residents.

Discussions with staff also confirmed that they had knowledge of residents' personal background and interests that helped them meet their social well-being. Residents' bedrooms were personalised to a good effect in that it added to residents' comfort, make-up and individuality.

# Areas of good practice

There were examples of good practice found throughout the inspection in relation to feedback from residents and one visiting relative, and the general observation of care practices and atmosphere in the home.

## **Areas for improvement**

No areas for improvement were identified during the inspection in relation to this domain.

	Regulations	Standards
Total number of areas for improvement	0	0

#### 6.6 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

The team leader in charge was available to support and facilitate this inspection.

The home's certificate of registration was displayed in a conspicuous place in the reception area.

#### Managerial arrangements

The registered manager manages both the residential home and the registered nursing home.

During this inspection it was revealed that the manager had a period of absence that needed to been notified to RQIA with the subsequent interim management arrangements. This had not been notified in accordance with regulation and was made an issue of improvement. On a positive note it was reported that the manager was due to return for duty by the end of the week.

#### **Monitoring visits**

An inspection of the last three months monitoring visits' reports on the behalf of the responsible individual was undertaken. These visits were conducted on an unannounced basis. The reports were recorded in good detail and had an action plan in place for any issues identified.

Added to this there was corresponding evidence recorded in response to the action plan and dates of when actions had been addressed.

#### **Audits**

A good programme of audits was in place. These included a manager's walkabout audit, falls, infection prevention and control, staff training, health and safety and audits of care records.

# **Complaints**

Discussions with the team leader together with an inspection of the records of complaint found that expressions of dissatisfaction were taken seriously and managed appropriately.

The complaints procedure was readily displayed in the home for residents and their visitors.

#### Accident/incidents

An inspection of the last three months accidents / incident reports confirmed that these were managed appropriately and reported to the relevant persons, including the resident's next of kin, their aligned named worker and / or RQIA.

#### Staff views

Discussions with staff during this inspection confirmed that they felt positive about their roles and duties, the staffing levels, support, teamwork and morale. Staff advised that a good standard of care was provided for and they would have no difficulties recommending the home. Staff also advised that if there were any concerns they would have no difficulties raising these with management and that they felt confident these would be acted on appropriately.

## Areas of good practice

There were examples of good practice found throughout the inspection in relation to the governance arrangements and maintenance of good working relationships.

## **Areas for improvement**

One area of improvement was made in relation to notification of the registered manager's absence and the subsequent managerial arrangements.

	Regulations	Standards
Total number of areas for improvement	1	0

# 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Martina Duffy, team leader, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the residential care home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

## 7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

# 7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

# **Quality Improvement Plan**

# Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005

## Area for improvement 1

**Ref**: Regulation 31(2)

Stated: First time

To be completed by: 7

October 2019

The registered person shall notify without delay any period of expected absence of the registered manager for 28 days and more. In doing so the registered person shall notify RQIA of the subsequent proposed interim managerial arrangements.

Ref: 6.6

The Registered Manager had been on a period of unplanned absence, which was less than 28 days and had not been anticipated to be for this time at the outset. Any further unplanned absence will be notified without delay.

<sup>\*</sup>Please ensure this document is completed in full and returned via Web Portal\*





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