

Inspection Report

24 March 2022



Rylands

Type of service: Residential Care Home
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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

<p>Organisation/Registered Provider: Rylands</p> <p>Registered Persons: Mr Trevor Duncan Mrs Karen Duncan</p>	<p>Registered Manager: Mrs Valerie Rutherford</p> <p>Date registered: 6 June 2018</p>
<p>Person in charge at the time of inspection: Mrs Valerie Rutherford until 3 pm then Kripa Sulabha, Deputy Manger until the conclusion of the inspection.</p>	<p>Number of registered places: 14</p>
<p>Categories of care: Residential Care (RC) I – Old age not falling within any other category MP(E) - Mental disorder excluding learning disability or dementia – over 65 years PH(E) - Physical disability other than sensory impairment – over 65 years.</p>	<p>Number of residents accommodated in the residential care home on the day of this inspection: 12</p>
<p>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 14 residents. The Old Mill Suite is situated over one floor and residents have access to communal lounges, a dining room and outdoor spaces.</p> <p>There is a Nursing Home which occupies the same building and the Registered Manager for this home manages both services.</p>	

2.0 Inspection summary

An unannounced inspection took place on 24 March 2022, from 10.00 am to 3.40 pm by care inspectors.

The inspection assessed various aspects of the running of the service to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

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.

Residents and relatives spoke very positively about the care in Rylands, one resident described the staff as “excellent” and a relative told us, her mum “gets the best care in the world”.

RQIA were assured that the delivery of care and service provided in Rylands was safe, effective, compassionate and that the home was well led.

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 previous areas for improvement issued, 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 and ‘Tell Us’ cards 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.

The findings of the inspection were discussed with Kripa Sulabha, Deputy Manager at the conclusion of the inspection.

4.0 What people told us about the service

We spoke with eight residents individually, two members of staff and three relatives as part of the inspection process. Residents were very positive about their experience in Rylands. Residents told us they “couldn’t ask for better” in respect of the care they receive and described the staff as “very good” to them. Residents told us that they were happy with the food provided in Rylands.

Two questionnaires were returned with a very satisfied response to all questions regarding care provision; one comment described the staff as always compassionate and caring. No feedback from the staff online survey was received within the allocated timeframe.

A record of compliments and any thank you cards are kept and messages shared with the staff team.

5.0 The inspection

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

The last inspection to Rylands was undertaken on 17 September 2021 by a pharmacy inspector; no areas for improvement were identified.

5.2 Inspection findings

5.2.1 Staffing Arrangements

Safe staffing begins at the point of recruitment. There was evidence that a system was in place to ensure staff were recruited correctly to protect residents.

There were systems in place to ensure staff were trained and supported to do their job. A small number of staff were noted to require updating in a number of the topics. This was discussed with the Manager who confirmed with RQIA the dates that training had been secured. A training matrix was maintained to monitor staff compliance with training.

Discussion with the Manager in regards to staff registration with the Northern Ireland Social Care Council (NISCC) evidenced an overview of staff registration status; however, a review of records did not include all the required information. This was discussed with the Manager how the NISCC audit could be improved; this will be followed up on the next inspection.

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.

Staff told us that the residents' needs and wishes were very important to them. It was observed that staff responded to requests for assistance promptly in a caring and compassionate manner.

The Manager told us she was behind with her schedule for meeting with staff to carry out supervision and appraisal but confirmed this will be prioritised in the coming weeks and will keep RQIA updated with her progress. This will be reviewed at a future inspection.

Staff members left in charge of the residential home in the absence of the Manager are required to have undergone a competency and capability assessment for this role to ensure that they have the necessary knowledge and understanding prior to taking charge of the home. Review of competency and capability assessments evidenced that a number of the assessments were out of date. This was discussed with the Manager who acknowledged this shortfall and provided assurance that the assessments would be updated as soon as possible. Information was received from the Manager on 25 April 2022 confirmed all but two of the assessments have been updated.

5.2.2 Care Delivery and Record Keeping

Staff were observed to be knowledgeable and compassionate towards residents. Positive interactions between staff and residents were observed throughout the inspection. Staff spoken with described the staffing levels in the home as “great” and told us that communication within the home was good. Staff described the Manager of the home as very approachable and stated that they were able to raise any issues of concern and were confident that these would be resolved.

At times some residents may be required to use equipment that can be considered to be restrictive. For example, bed rails and alarm mats. It was established that safe systems were in place to manage this aspect of care.

Staff met at the beginning of each shift to discuss any changes in the needs of the residents. In addition, resident care records were maintained which accurately reflected the needs of the residents. Staff members 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.

Examination of records and discussion with the Manager 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.

The dining experience was an opportunity for residents to socialise, music was playing, and the atmosphere was calm, relaxed and unhurried. It was observed that residents were enjoying their meal and their dining experience. Staff had made an effort to ensure residents were comfortable, had a pleasant experience and had a meal that they enjoyed.

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 admission to the home. Following this initial assessment care plans were developed to direct staff on how to meet residents’ needs; and included any advice or recommendations made by other healthcare professionals. Residents care records were held confidentially.

Care records were well maintained, regularly reviewed and updated to ensure they continued to meet the residents’ needs. Residents, where possible, were involved in planning their own care and the details of care plans were shared with residents’ relatives, if this was appropriate.

Residents’ individual likes and preferences were reflected throughout the records. Care plans were detailed and contained specific information on each residents’ care needs and what or who was important to them.

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.

5.2.3 Management of the Environment and Infection Prevention and Control

Examination of the home's environment included a sample of resident bedrooms, communal lounge, dining room, bathrooms and storage spaces. The home was found to be clean, warm, well-lit, and free from malodour.

Corridors within the home were clean and free from clutter. Fire safety measures were in place and well managed to ensure residents, staff and visitors to the home were safe. A fire risk assessment had been completed 28 July 2021 with actions addressed by the Manager.

Resident's bedrooms were clean, tidy and personalised with items of interest and importance to each resident, such as family photos, furniture, books and sentimental items from home.

The enclosed courtyard was accessible, clean and tidy, with some plants and a variety of seating.

Measures were in place to manage the risk of COVID-19. For example, the home participated in the regional testing arrangements for residents and staff. Personal Protective Equipment (PPE) was available at the front entrance of the home for all visitors along with temperature checks and health declaration forms. PPE stations were available throughout the home and staff members were observed to be wearing PPE appropriately and taking appropriate opportunities for hand hygiene. Governance records showed that IPC, PPE and hand hygiene audits were completed.

Visiting arrangements were managed in line with Department of Health (DoH) and IPC 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.

Discussion with residents confirmed that they were able to choose how they spent their day. Some residents preferred to spend their days in their bedrooms while some took opportunities to visit the lounge.

The home has dedicated activity staff members in post. It was observed that staff ensured a social atmosphere in communal areas with music playing or televisions on. Residents were seen enjoying some colouring activities in preparation for Mother's Day. Other activities displayed on the schedule included; armchair exercises, quizzes, reminiscence, arts and crafts.

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

5.2.5 Management and Governance Arrangements

There has been no change in the management of the home since the last inspection.

Staff members were aware of their role in the home and how to raise any concerns or worries about residents, care practices or the environment. Staff described the Manager as “very good and approachable”. Staff also advised that they felt able to raise any concerns and were confident these would be resolved.

There was evidence that a system of auditing was in place to monitor the quality of care and other services provided to residents.

Each service is required to have a person, known as the adult safeguarding champion, who has responsibility for implementing the regional protocol and the home’s safeguarding policy. The Manager and Deputy Manager are identified as the appointed safeguarding champions for the home. It was established that good systems and processes were in place to manage the safeguarding and protection of vulnerable adults.

Review of the home’s record of complaints confirmed that these were well managed and used as a learning opportunity to improve practices and/or the quality of services provided by the home.

It was established that the Manager had 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.

The home was visited each month 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.

6.0 Conclusion

Residents presented as happy and comfortable in the home environment. Residents spoke very positively about their experience in Rylands and the care they receive. Positive interactions were observed throughout the inspection between staff and residents.

The environment was clean and well maintained. Staff members were observed to respond to residents in a timely manner and were skilled in their communication with residents.

Based on the inspection findings and discussions held, RQIA is satisfied that this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the Manager.

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 Kripa Sulabha, Deputy Manager, at the conclusion of the inspection.



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