



# Unannounced Care Inspection Report 21 July 2019



## Newcroft Lodge

**Type of Service: Residential Care Home**  
**Address: 126 Church Road, Holywood BT18 9BY**  
**Tel No: 02890424614**  
**Inspector: John McAuley**

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Assurance, Challenge and Improvement in Health and Social Care

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 32 residents living with dementia.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> South Eastern HSC Trust  <b>Responsible Individual:</b> Seamus McGoran	<b>Registered Manager and date registered:</b> Samuel David McMahon 1 April 2005
<b>Person in charge at the time of inspection:</b> Sandra McGivern, senior care assistant	<b>Number of registered places:</b> 32 Plus 3 places for day service
<b>Categories of care:</b> Residential Care (RC) DE – Dementia	<b>Total number of residents in the residential care home on the day of this inspection:</b> 23

### 4.0 Inspection summary

This unannounced inspection took place on Sunday 21 July 2019 from 10.00 to 14.00 hours.

The inspection assessed progress with the one area of improvement identified in the home since the last care inspection and 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 the relaxed ambience in the home helped by the organised unhurried team work with staff on duty. Good practice was also found in relation to the cleanliness and upkeep of the environment and observations of the dining experience.

No areas requiring improvement were identified during this inspection.

Residents described living in the home as being a good experience/in positive terms. Residents unable to voice their opinions were seen to be relaxed and comfortable in their surroundings and in their interactions with others/with staff. Some of the comments included:

“This is a very good place. Everything is very good.”

“It is spotlessly clean. I love it here.”

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
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Sandra McGivern, senior care assistant, as part of the inspection process and can be found in the main body of the report.

#### **4.2 Action/enforcement taken following the most recent inspection dated 23 January 2019**

The most recent inspection of the home was an unannounced care inspection undertaken on 23 January 2019. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of this inspection.

#### **5.0 How we inspect**

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

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
- three residents' records of care
- complaint records
- compliment records
- a sample of governance audits/records
- accident/incident records
- the most recent reports of visits by the registered provider/monthly monitoring
- RQIA registration certificate

The one area of improvement identified at the last care inspection was reviewed and assessment of compliance recorded as met, partially met, or not met.

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 23 January 2019

Areas for improvement from the last care inspection		
Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 10.3  <b>Stated:</b> First time	The registered person shall ensure that care plans are sufficiently detailed to specify how behaviours that challenge present and how staff should respond to ensure consistency of approach.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> An inspection of a sample of residents' care plans confirmed this information was recorded in sufficient detail.	

## 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 advised and indicated that they felt safe in the home and that staff were responsive to their needs and were kind and supportive.

#### Staffing

Inspection of the duty rota confirmed that it accurately reflective the staff on duty at the time of this inspection.

The senior care advised that staffing levels were in keeping with resident dependencies and the size and layout of the home. The staffing levels over the 24 hour period were discussed. Discussions with residents and staff confirmed that they felt there was adequate staffing in place to meet residents' needs.

The senior care assistant in charge acted with competence and confidence throughout this inspection.

## **Staff induction, supervision and appraisal**

Discussions with staff confirmed that they had received a comprehensive programme of induction on appointment. An inspection of the programme of supervisions and appraisals found these were being maintained in a regular and up-to-date basis for all staff. Staff spoke positively about this provision.

A system of monitoring the registration details of care staff with the Northern Ireland Social Care Trust (NISCC) was in place. This was being audited on a monthly basis.

## **Staff training**

Inspection of staff training records found that mandatory requirements and additional training areas were being met. A matrix of staff training is in place which identifies when staff have last received their mandatory training and when up-date training is required.

## **Safeguarding**

Discussions with staff confirmed that they had knowledge and understanding of safeguarding principles. Staff were aware of their obligations to report any concerns and advised that they found management to be approachable. They also advised that they would have no hesitation to report any concerns and that they would have confidence in management in dealing with such appropriately. Staff were knowledgeable of the Health and Social Care Trust's role in safeguarding and these contacts' details were displayed.

## **Environment**

The home was clean and tidy with a good standard of décor and furnishings being maintained.

Residents' bedrooms were comfortable and personalised.

Communal areas were nicely facilitated and provided a relaxing space for residents to enjoy the company of one another, if desired.

There was good provision of infection prevention and control aids and equipment throughout the environment. Added to this there was accessible information available to residents, their representatives, visitors and staff on the need for good infection prevention and control practices.

The grounds of the home were accessible and well maintained.

## **Fire safety**

An inspection of the home's most recent fire safety risk assessment, dated 26 March 2019, was undertaken. Corresponding evidence was in place to confirm that the six recommendations made as a result of this assessment had been addressed.

An inspection of fire safety records confirmed that all staff were in receipt of up-to-date fire safety training and drills. Fire safety checks on the environment were also carried out by staff on a regular and up-to-date basis.

## Areas of good practice

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

## Areas for improvement

There were no areas of improvement identified in relation to this domain during this inspection.

	Regulations	Standards
<b>Total numb of areas for improvement</b>	0	0

### 6.4 Is care effective?

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

Discussions with staff confirmed that they had good knowledge and understanding of residents' needs and prescribed care interventions. Staff also advised that there was good communication and teamwork between staff members for the benefit of residents.

## Care records

An inspection of a sample of three residents' care records was undertaken. The care records were methodical and detailed in the information recorded. These records also were maintained in line with the regulations and standards. They included an up to date assessment of needs, life history, risk assessments and care plans.

Care needs assessment and risk assessments, for example safe moving and handling, nutrition, and falls, were reviewed and updated on a regular basis or as changes occurred.

The care records also reflected the multi-professional input into the residents' health and social care needs and were found to be updated regularly to reflect the changing needs of the individual residents.

There was evidence that residents and/or their representatives were encouraged and enabled to be involved in the assessment, care planning and review process, where appropriate. Signatures of participation in this process were included the two care records inspected.

## Effectiveness of care

Throughout this inspection there were examples of good delivery and effectiveness of care observed. Care practices such as safe moving and handling and infection prevention and control were found to be maintained in line with good practice.

Staff took time to interact with residents and consent was requested when seeking to undertake tasks with personal care or with assistance with mobility.

Residents were dressed well in matching clean attire. Glasses and walking aids were also clean and appeared in good working order.



## Dining experience

An appetising, wholesome dinner time meal was provided for at the time of this inspection. This contained good provision of choice as well as staff facilitating choice with the provision of condiments, sauces and types of vegetables to accompany the meal. The dinner room was tidy with tables nicely set. There was a nice ambience in place for residents to enjoy their meal and throughout this inspection residents gave positive feedback on this provision.

The catering facility was tidy, clean and organised.

## Areas of good practice

There were examples of good practice found throughout the inspection in relation to staff's knowledge and understanding of residents' needs, prescribed care interventions and how this impacted on the culture and ethos of the home.

## Areas for improvement

There were no areas of improvement identified in relation to this domain during this inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	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.**

General observations of care practices throughout this inspection found residents were supported in an organised, unhurried manner. Staff interactions with residents were found to be friendly, warm, polite and supportive. A nice, homely ambience was in place with residents being comfortable and at ease in their environment and interactions with staff.

## Residents' Views

Discussions were undertaken with 18 residents in the home at the time of this inspection. In accordance with their capabilities residents confirmed that they were happy with 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 included:

- "This is a very good place. Everything is very good."
- "It is spotlessly clean. I love it here."
- "It's a very good home."
- "I have no problems here."
- "I love it here. It is like a hotel."
- "This is wonderful and so too are the staff."



**Relatives' views**

Discussions with three visiting relatives were all positive and complimentary in regard to the care in the home, the staff and the overall atmosphere in the home. One of the comments made included the statement:

- “The care is very good, as are the staff. There are no worries here.”

**Social needs**

There were good provisions of activity aids, equipment and diversional appliances throughout the home. These included games, books, televisions and arts and crafts materials.

One staff member described with enthusiasm her interest and role in facilitating activities. An example of this was an activity event held once a week known as the “VIP club”. This involved a group of residents engaged in crafts, light exercises and lunch for the day. Added to this a group of residents recently had a trip out to Newcastle and a trip was planned for this Saturday to Bangor and Portaferry.

At the time of this inspection, residents were content and relaxed in their environment, some were enjoying the company of one another and some were relaxing in their bedrooms or in the communal areas. The genre of music played in communal areas was appropriate for the age group and tastes of residents. In one lounge, some residents enjoyed hymns being played and joined along with same. A visiting hairdresser was also in attendance for those residents who wished to avail of this service. One resident was going out later with their family for the afternoon.

**Areas of good practice**

There were examples of good practice in respect of this domain found throughout this inspection in relation to feedback from residents and general observations of care practices.

**Areas for improvement**

There were no areas of improvement identified in relation to this domain during this inspection.

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of areas for improvement</b>	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.**

During this inspection staff praised the management arrangements and its support. Feedback was given to the registered manager via telephone following this inspection.

## Monitoring visits

A monthly monitoring visit on the behalf of the responsible individual is undertaken in accordance with regulation. The report of 31 May 2019 was inspected. This report was informative and detailed with a corresponding action plan in place with issues identified.

## Accidents and incidents

These reports were inspected from the previous inspection on 23 January 2019. All these events were considered to be appropriately managed and reported to the relevant persons/agencies. An analysis of accidents is carried out on a monthly basis to identify any trends or patterns and subsequent actions.

## Staff views

Staff spoke positively about their roles, duties, staffing levels, provision of training, support and morale. Good support and teamwork was observed with staff members throughout this inspection.

Staff advised that they believed a good standard of care was provided for, that there was a nice atmosphere in the home and that residents' care and well-being was paramount.

## Areas of good practice

There were examples of good practice found throughout the inspection in relation to feedback from staff and general observations of care practices.

## Areas for improvement

There were no areas of improvement identified in relation to this domain during this inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

## 7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included as part of this inspection report.



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