



The Regulation and
Quality Improvement
Authority

Northfield House
RQIA ID: 1010
3 Church Lane
Northfield Road
Donaghadee

Inspector: Patricia Galbraith
Inspection ID: IN22817

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**Unannounced Care Inspection
of
Northfield House**

28 May 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of inspection

An unannounced care inspection took place on 26 May 2015 from 20.00 to 23.40. At the time of the inspection the home was found to be delivering safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report.

This inspection was underpinned by the Residential Care Homes Regulations (Northern Ireland) 2005, and The DHSSPS Residential Care Homes Minimum Standards (2011).

1.1 Actions/Enforcement taken following the last inspection

Following the last inspection a serious concerns meeting was held at RQIA offices on 27 April 2015. At this meeting representatives of the home provided information regarding actions taken to address the issues raised during the previous inspection.

1.2 Actions/Enforcement resulting from this inspection

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

1.3 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	1	0

The details of the QIP within this report were discussed with Angela Cartwright the registered manager as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service details

Registered Organisation/Registered Person: South Eastern Health and Social Care Trust	Registered Manager: Angela Cartwright
Person in Charge of the Home at the Time of Inspection: June Boviard senior carer	Date Manager Registered: 8/9/2009
Categories of Care: RC-LD, RC-I, RC-MP, RC-MP(E), RC-PH, RC-PH(E), RC-A, RC-SI, RC-TI	Number of Registered Places: 41
Number of Residents Accommodated on Day of Inspection: 14	Weekly Tariff at Time of Inspection: £486

3. Inspection focus

The inspection sought to assess progress with the issues raised during and since the previous inspection.

4. Methods/Process

Prior to the inspection we analysed the Quality Improvement Plans from the previous inspections.

During the inspection we met with 13 residents and four care staff of various grades.

We inspected the following:

- 13 care records
- Fire safety risk assessment
- Duty rota
- The Statement of Purpose and Resident's Guide for Northfield House
- The homes policy and procedure on the management of violence and aggression
- The residents call bell system and the on call phone system.

5. The inspection

5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an unannounced care inspection dated 16 April 2015.

5.2 Review of requirements and recommendations from the last care inspection on 22 January 2015

Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 10.1	The registered person is recommended to update the policy/procedure for the management of violence and aggression and the use of restraint to detail that RQIA must be notified on each occasion restraint is used.	Met
	Action taken as confirmed during the inspection: We inspected the policy and procedure and confirmed that the document had been up dated.	

5.3 Review of requirements and recommendations from the last care inspection on 16 February 2015

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 12.2	The registered person must submit a variation application to RQIA applying for a change to the registered categories of care	Met
	Action taken as confirmed during the inspection: The application for variation of categories of care was received at RQIA 19 February 2015.	
Requirement 2 Ref: Regulation 3	The registered person must update and submit a copy of the statement of purpose for Northfield House.	Met
	Action taken as confirmed during the inspection: We inspected the Statement of Purpose and confirmed this had been up dated.	
Requirement 3 Ref: Regulation 4	The registered person must update and submit a copy of the resident's guide for Northfield House.	Met
	Action taken as confirmed during the inspection: The registered manager updated the Residents Guide and sent a copy to RQIA .The Guide contained the relevant information.	
Requirement 4 Ref: Regulation 14 (2)(c)	The registered manager must ensure that the admission of learning disability clients to Northfield House does not pose a risk to either the learning disability clients or the current residents of the home.	Met
	Risk assessments for each individual learning disability client should be maintained in Northfield House.	
	Action taken as confirmed during the inspection: The senior carer confirmed to us risk assessments had been up dated for individual clients.	

<p>Requirement 5</p> <p>Ref: Regulation 20 (1) (a)</p>	<p>The registered manager must ensure that appropriate staffing levels are maintained during night duty to minimise the risks to residents and meet all required care needs.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>In our discussion with the senior carers on both floors they confirmed to us that staffing levels were appropriate to meet the care needs of residents at all times.</p>		
<p>Requirement 6</p> <p>Ref: Regulation 18(2)(h)</p>	<p>The registered manager must ensure that meals are not prepared on the first floor of the home in the makeshift kitchen area.</p>	<p>Met</p>
<p>Snack foods prepared and stored in the main kitchen of the home may however be consumed on the first floor</p> <p>Action taken as confirmed during the inspection:</p> <p>The senior carer confirmed to us all meals for residents on the first floor are made in the main kitchen.</p>		
<p>Requirement 7</p> <p>Ref: Regulation 18 (2) (e)</p>	<p>The registered manager must ensure that laundry of residents clothing including ironing is undertaken in the laundry room of the home.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>The senior carer confirmed to us all residents' laundry is sent to main laundry room.</p>		
<p>Requirement 8</p> <p>Ref: Regulation 13.7</p>	<p>The registered manager must ensure that the first floor bathroom discussed in the report is maintained in an appropriate hygienic state and that all issues raised during inspection are addressed.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>The first floor bathroom was inspected and it was observed to be fit for purpose.</p>		

Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 10.1	The registered person is recommended to update the policy/procedure for the management of violence and aggression and the use of restraint to detail that RQIA must be notified on each occasion restraint is used.	Met
	Action taken as confirmed during the inspection: We inspected the policy and procedure for the management of violence and aggression which confirmed it had been up dated.	

5.4 Review of requirements and recommendations from the last care inspection on 16 April 2015

Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 27 (4) (a) Stated: First time To be Completed by: 17 April 2015	The registered manager must ensure that the numbers of staff on duty meet the requirements within the fire safety risk assessment.	Met
	Action taken as confirmed during the inspection: We inspected the Fire Safety Risk Assessment and confirmed it had been up dated accordingly.	
Requirement 2 Ref: Regulation 27 (2)-(c) Stated: First time To be Completed by: 17 April 2015	The registered manager must ensure that the residents' call bell system is audible throughout the home and that the on call phone system is fit for purpose.	Partially met
	Action taken as confirmed during the inspection: We inspected the on call phone system which was now fit for purpose. The residents' call bell system was not audible throughout the home. This requirement will be restated in the QIP.	
Requirement 3 Ref: Regulation 19 (2) Schedule 4 number 7 Stated: First time To be Completed by: 27 April 2015	The registered manager must ensure that the duty roster accurately reflects the hours of all persons working in the home.	Met
	Action taken as confirmed during the inspection: We inspected the duty rota. The hours worked by all persons were reflected as required.	

Is care safe? (Quality of life)

We inspected 13 residents' care records. Care needs assessments; risk assessments and care plans were in place and were kept under continual review. Documentation was amended as changes occurred to residents' medical conditions. The records were kept up to date to accurately reflect at all times the needs and preferences of the resident. The needs assessments and care plans were signed by the resident or their representative.

Is care effective? (Quality of management)

In our discussions with staff they confirmed that they would be able to recognise the possibility that a resident may need interventions from multi professional agencies. Staff members were knowledgeable about obtaining multi-professional community supports (GP, District Nursing, Occupational Therapy, Speech and Language Therapy, Dietician). A referral is made to the relevant profession in a timely manner.

Is care compassionate? (Quality of care)

In our discreet observations of care practice we found that residents were treated with care, dignity and respect when being assisted by staff. Residents confirmed to us that staff members provided assistance with their care in a sensitive and caring manner.

5.5 Areas for improvement

5.5.1 Residents' views

We met with seven residents individually and with others in groups. In accordance with their capabilities, all indicated that they were happy with their life in the home, their relationship with staff and the provision of care.

Some residents' comments included:

- 'staff are very good'
- 'staff are amazing can't do enough for you'

5.5.2 Environment

The home was found to be clean and tidy. Décor and furnishings are of a good standard.

5.5.3 Care practices

Care duties were conducted at an unhurried pace with time afforded to interactions with residents in a polite, friendly and supportive manner.

5.5.4 Fire safety

The home had a current Fire Safety Risk Assessment. Records also confirmed that fire alarms are tested weekly from different zones and recorded. There were no obvious fire safety risks observed. All fire exits were unobstructed and fire doors closed

6. Quality improvement plan

The issue identified for improvement is detailed in the QIP. Details of the QIP were discussed with June Boviard senior carer as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The DHSSPS Residential Care Homes Minimum Standards (2011). They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions taken by the registered manager/registered person

The QIP should be completed by the registered person/registered manager and detail the action taken to meet the legislative requirement stated. The registered person will review and approve the QIP to confirm that the action has been completed. Once fully completed, the QIP will be returned to care.team@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan

Statutory Requirements

Requirement 1 Ref: Regulation 27 (2)-(c) Stated: Second time To be Completed by: 7 July 2015	<p>The registered manager must ensure that the residents' call bell system is audible throughout the home.</p> <p>Response by Registered Person(s) Detailing the Actions Taken: Work has commenced to increase the audibility of the nurse call bell system. Due to the age of the current system a new system is being integrated with the existing system. The engineer has been waiting for parts to complete the work. The parts are now available and work has recommenced and it is anticipated that the system will be fit for purpose within 7 days of the date of this report.</p>
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Registered Manager Completing QIP	Angela Cartwright	Date Completed	01.07.15
Registered Person Approving QIP	Hugh McCaughey	Date Approved	02.07.15
RQIA Inspector Assessing Response	Patricia Galbraith	Date Approved	02.07.15

Please ensure the QIP is completed in full and returned to care.team@rqia.org.uk from the authorised email address

Please provide any additional comments or observations you may wish to make below:

Please complete in full and returned to care.team@rqia.org.uk from the authorised email address

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