



The Regulation and
Quality Improvement
Authority

Ard Cluan
RQIA ID: 1106
5 Limavady Road
Londonderry
BT47 6JU

Inspector: John McAuley
Inspection ID: IN023090

Tel: 028 7134 3297
Email: sboyd@pcibsw.org

**Unannounced Care Inspection
of
Ard Cluan**

03 December 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 3 December 2015 from 1pm to 3:15pm. On the day of the inspection the home was found to be delivering safe, effective and compassionate care. The standard we inspected was assessed as being met. No areas for improvement were identified during this inspection.

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

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last 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 | 0 | 0 |

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service details

| | |
|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| Registered Organisation/ Registered Person: Presbyterian Board of Social Witness Linda May Wray | Registered Manager: Sandra Boyd |
| Person in charge of the home at the time of inspection: Sandra Boyd | Date manager registered: 1 April 2005 |
| Categories of care: RC-DE, RC-I, RC-PH, RC-PH(E) | Number of registered places: 15 |
| Number of residents accommodated on day of inspection: 13 | Weekly tariff at time of inspection: £470 |

3. Inspection focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standard has been met:

Standard 1: Residents' views and comments shape the quality of services and facilities provided by the home.

4. Methods/ processes

Prior to inspection we analysed the following records: the previous inspection report and notifications of incidents and accidents.

We met with ten residents, three members of staff, two visiting relatives and the registered manager.

We inspected the following records: two residents' care records, accident/ incident reports, the record of complaints, monitoring visit reports and record of residents meetings.

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 2 April 2015. July 2015. There were no requirements or recommendations from this inspection.

5.2 Review of requirements and recommendations from the last care inspection

There were no requirements or recommendations made from the last care inspection.

5.3 **Standard 1: Residents' views and comments shape the quality of services and facilities provided by the home.**

Is care safe? (Quality of life)

The registered manager and staff confirmed that residents' views are taken into account in all matters affecting them in so far as practically possible.

Through discussion with the residents they reported to us that their views were actively sought and incorporated into practice. Several residents gave particular examples such as choice of meals and activities.

Residents' meetings are held on a quarterly basis. Their views and wishes were actively sought and recorded. The record of these meetings were inspected and found to be appropriately maintained.

Inspection of the record of complaints found that such expressions were taken seriously and managed appropriately.

Care records inspected in regard to this standard, demonstrated to us that records were up to date and kept under continual review to reflect the changing needs and preferences of the resident.

Is care effective? (Quality of management)

We found that there was a range of methods and processes in place where residents' and their representatives' views were sought. These were reflected within the care management reviews, a suggestion box, record of residents' meetings and the registered provider monthly visits. Staff confirmed that there was an open door policy within the home for residents and relatives who wished to highlight any issues.

The record of registered provider visits was inspected for November 2015. This record was maintained in informative detail with good account of governance.

Copies of review forms were present within each care record. Residents and their representatives attended and participated in their care management review. Evidence was in place that any agreed actions at these meetings were acted upon.

Is care compassionate? (Quality of care)

Discussion with staff demonstrated that they were knowledgeable about residents' needs and a person centred approach was adopted. In our discussions with staff we identified that residents were listened and responded to by staff.

In our observations of care practices we confirmed that residents were treated with dignity and respect. Care duties were conducted at an unhurried pace with time afforded to interactions with residents in a polite, friendly and supportive manner.

Areas for improvement

There were no issues of improvement identified with this standard. This standard was found to be met and considered to be safe, effective and compassionate.

| | | | |
|--------------------------------|----------|-----------------------------------|----------|
| Number of requirements: | 0 | Number of recommendations: | 0 |
|--------------------------------|----------|-----------------------------------|----------|

5.4 Additional areas examined

5.4.1 Residents' views

We met with all the residents. In accordance with their capabilities, residents expressed and indicated that they were happy and content with their life in the home.

Some of the comments made included statements such as;

- "You couldn't ask for any better"
- "I'd recommend this home to anyone"
- "I love it here"
- "This home is simply great".

5.4.2 Relatives' views

We met with two visiting relatives. Both were very complimentary about the standard of care provided and the kindness and support received from staff.

5.4.3 Staff views

We spoke with three care staff members, in addition to the registered manager. Staff advised us that they felt supported in their respective roles. The staff related that they had been provided with the relevant resources to undertake their duties. Staff demonstrated to us that they were knowledgeable of the needs of individual residents.

5.4.4 General environment

We found that the home presented as clean, tidy and adequately heated. Décor and furnishings were found to be of a reasonable standard.

5.4.5 Care practices

We found the atmosphere in the home was friendly and welcoming. We observed staff to be interacting with residents in a respectful, polite, warm and supportive manner.

Care duties and tasks were organised in an unhurried manner. Residents were observed to be comfortable, content and at ease in their environment and interactions with staff. A planned programme of activities was in place with those residents who wished to partake benefitting from same.

Residents were observed to be comfortable, content and at ease in their environment and interactions with staff. A nice homely atmosphere was in place.

5.4.6 Accident / incident reports

We reviewed the accident/incident reports from 2 April 2015 until the date of this inspection. These were found to be appropriately managed and reported.

5.4.7 Staffing

The staffing levels at the time of this inspection consisted of:

- 1 x registered manager
- 1 x senior care assistant
- 1 x care assistant
- 1 x cook
- 1 x catering assistant
- 1 x housekeeper
- 1 x administrator

From general observations of care practices and discussions with staff, these levels were found to be appropriate to meet the assessed needs of residents, taking account of the size and layout of the home.

Areas for Improvement

There were no issues of improvement identified with this standard. These additional areas examined were found to be met and considered to be safe, effective and compassionate.

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|--------------------------------|----------|-----------------------------------|----------|
| Number of requirements: | 0 | Number of recommendations: | 0 |
|--------------------------------|----------|-----------------------------------|----------|

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.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

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|------------------------------------------|--------------|-----------------------|----------|
| Registered Manager | Sandra Boyd | Date Completed | 17/12/15 |
| Registered Person | Linda Wray | Date Approved | 21/12/15 |
| RQIA Inspector Assessing Response | John McAuley | Date Approved | 21/12/15 |

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

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