

**Unannounced Care Inspection
of
Oriel House**

25 February 2016

1. Summary of Inspection

An unannounced care inspection took place on 25 February 2016 from 10:30 to 13:45. Overall 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 DHSPSS 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: Oriel House Margaret Theresa Thompson Gary Thompson (registration pending)	Registered Manager: Hazel Rice (Acting)
Person in Charge of the Home at the Time of Inspection: Fiona Mourzakitio Care Assistant until 11:30am then Hazel Rice	Date Registered: Registration pending
Categories of Care: RC-MP, RC-PH, RC-I	Number of Registered Places: 8
Number of Residents Accommodated on Day of Inspection: 7 plus 1 resident at day care placement	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' Involvement

4. Methods/ Process

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

We met with six residents, two members of staff and the registered manager.

We inspected the following records: three residents' care records, complaints records, record of residents' meetings, accident and incident records and fire safety records.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was unannounced pharmacy inspection dated 18 January 2016. The completed QIP was returned and approved by the pharmacist inspector.

5.2 Review of Requirements and Recommendations from the last Care Inspection on 29 September 2015

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 30 (1) (d)	Any incident of challenging behaviour must be reported without delay to RQIA.	Met
	Action taken as confirmed during the inspection: An inspection of the accident / incident records confirmed that such events were notified to RQIA.	
Requirement 2 Ref: Regulation 14	A care review meeting must be put in place with the identified resident and aligned social worker.	Met
	Action taken as confirmed during the inspection: This care review meeting was put in place.	

5.3 Standard 1- Residents' Involvement

Is Care Safe? (Quality of Life)

The registered manager 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. Residents gave examples such as the planning of activities and events.

Residents' meetings are held on a regular basis. Residents' views and wishes were actively sought and recorded. The record of these meetings was found to be maintained satisfactory with agreed actions delegated as necessary.

Care records inspected in regard to this standard, demonstrated to us that records were up to date and kept under review to reflect the changing needs and preferences of the resident. Discussions with the registered manager confirmed that any identified issues of need are acted upon, in consultation with 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, record of residents' meetings and day to day management with the registered person.

Discussions with the registered manager and an inspection of the record of complaints found that expressions of dissatisfaction are taken seriously and managed appropriately.

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 and the registered manager 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
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5.4 Additional Areas Examined Additional Areas Examined

5.4.1 Residents' Views

We met with six residents. All the residents expressed that they were happy and content with their life in the home.

Some of the comments made included statements such as:

- "They are all very good to me here"
- "I like it here"
- "Everyone is very kind"
- "Everything is grand"
- "The meals are lovely".

5.4.2 Staff Views

We spoke with two staff members, in addition to the registered manager. Staff advised us that they felt supported in their respective roles and that they felt a good standard of care was provided. Staff related that they had been provided with the relevant resources to undertake their duties.

5.4.3 General Environment

We found that the home presented as clean and tidy. Décor and furnishings were found to be of a good standard.

The carpet in one of the bedrooms was heavily stained. However the registered manager informed us that plans were in place to replace this surface, which is good.

5.4.4 Staffing

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

- 1 registered manager
- 1 x care assistant
- 1 x domestic
- 1 x cook.

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

5.4.5 Accident/ Incident Reports

We inspected these reports from 29 September 2015 until the date of this inspection. These reports were found to be appropriately managed and reported.

5.4.6 Fire Safety

Fire safety training including fire safety drills was maintained on an up to date basis.

There was observed to be no obvious fire safety risks observed in the environment, such as wedging opening of fire safety doors, at the time of this inspection.

The registered manager reported to us that a fire safety risk assessment was undertaken the previous week and they were awaiting the report of this. Advice was given in ensuring that there is written evidence in place to correspond with any recommendations made from this assessment. Advice was also given to organise the fire safety records in a more accessible basis as these were cluttered with old information. The registered manager agreed to take these issues forward.

5.4.7 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.

An appetising dinner time meal was provided for in a nicely appointed dining room.

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.

Registered Manager	Hazel Rice	Date Completed	03/03/16
Registered Person	Teresa Thompson	Date Approved	03/03/16
RQIA Inspector Assessing Response	John McAuley	Date Approved	03/03/16

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