



The Regulation and
Quality Improvement
Authority

Barnlee
RQIA ID: 1135
37 Lisnaskea Road
Barnhill
Lisnaskea
BT92 0HD

Inspector: Laura O'Hanlon
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**Unannounced Care Inspection
of
Barnlee**

19 January 2016

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 19 January 2016 from 10.30 to 16.00. On the day of the inspection the home was found to be delivering safe, effective and compassionate care in relation to the standard we inspected; which was assessed as being met.

An area for improvement was identified and is set out in the Quality Improvement Plan (QIP) appended to this report. A recommendation was made to address the malodour in one identified area of the home.

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	1

The details of the QIP within this report were discussed with Geraldine O'Neill, registered manager and Charlene Drumm, senior care assistant. The timescales for completion commence from the date of inspection.

2. Service details

Registered Organisation/Registered Person: FACT, Ruth Hill	Registered Manager: Geraldine O'Neill
Person in charge of the home at the time of inspection: Geraldine O'Neill	Date manager registered: 1 April 2005
Categories of care: RC-LD, RC-LD(E), RC-PH, RC-PH(E)	Number of registered places: 23
Number of residents accommodated on day of inspection: 22	Weekly tariff at time of inspection: £470.00 - £2782.08

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/process

Prior to inspection we analysed the following records: the previous inspection report, the returned quality improvement plan and the notification of accidents and incidents.

We met with twelve residents, one set of relatives, two visiting professionals, four members of the care staff, the deputy manager and the registered manager.

We inspected the following records: five care records, accident /incident reports, registered provider visits, fire safety records, complaints/compliments records and the 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 17 September 2015. The completed QIP was returned and was approved by the care inspector.

5.2 Review of requirements and recommendations from the last care inspection dated 17 September 2015

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 19 (1) (a)	The registered person must ensure that a contemporaneous record is maintained of all care and treatment provided to each resident.	Met
	Action taken as confirmed during the inspection: An inspection of five care records confirmed that a contemporaneous record was maintained of all care and treatment provided to each resident.	

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 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. An example of this was in regard to purchasing of new furniture for the sitting room. Samples of furniture had been sourced and will be discussed and agreed at the next residents' meeting. One resident whose bedroom is undergoing refurbishment had been involved within this process.

The senior care assistant confirmed that the last residents' meeting was convened on 8 January 2016. The residents' views and wishes were actively sought and recorded in regard to facilities and services, menu planning and activity provision. A record of this meeting was available during the inspection.

A suggestion box is used within the home.

The five 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. Care records were current and comprehensive. This is to be commended.

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 the registered provider monthly visits. The registered manager and senior care assistant confirmed that there was an open door policy within the home for residents and relatives who wished to highlight any issues.

Copies of review forms were observed within each care record. Residents were present and participated in their care management review where possible.

The senior care assistant shared with us the annual quality review report dated 2014 - 2015. This reflected the views of residents, representatives and other external visitors to the home.

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 to and responded to by staff.

Staff shared with us examples of how they incorporate their knowledge of values into their practice with residents. This included knocking on doors before entering, asking residents what they want to wear each day, seeking their preferences at meal-times and when they would like assistance to have a shower or get dressed.

In our discreet 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 areas for improvement identified within the standard inspected. This standard was assessed as being met.

Number of Requirements:	0	Number of Recommendations:	0
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5.4 Additional areas examined

5.4.1 Residents' views

We met with twelve residents. We observed residents relaxing in the communal lounge area. The reflexologist was present in the home during the inspection. A number of residents were listening to music in the sitting room.

In accordance with their capabilities, residents expressed that they were happy and content with their life in the home. They expressed their satisfaction with the facilities and services provided and their relationship with staff. Residents were praising of the staff and advised that their wishes were respected in so far as possible. One comment made was:

- “All the staff are very good, if I ask for something I always get it.”

5.4.2 Relatives views

We met with one set of relatives. These relatives commented on the good standard of care provided to their relative. They confirmed that they are always informed of any changes in the home. They stated that there was plenty of staff on duty. They confirmed that any issues or concerns would be promptly addressed. One comment made was:

- “I am very happy with all the care provided here I have no complaints.”

5.4.3 Views of visiting professionals

We met with two professionals in the home who were delivering specialist training to staff in regard to one resident. The two professionals commented that the staff team were welcoming in their interactions and knowledgeable of the residents' needs. Good communication was maintained by the staff in the home. Any actions agreed were followed up by staff. The two professionals commented positively on the staff's commitment to this particular training.

5.4.4 Staff views

We spoke with four members of care staff, the deputy manager and 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.

The staff stated that they felt supported by the registered manager and deputy manager and advised that they were very approachable. The staff explained how the residents were offered choices on a daily basis. The staff advised us that if a resident has a particular interest for example in music, outings would be arranged to facilitate this.

Some comments made were:

- “An excellent standard of care is provided here. Any areas of concern are actioned promptly.”
- “We are all part of a big family here.”
- “The care is exceptionally good, if I had a family member I would be happy for them to be here.”

5.4.5 Environment

We found that the home presented as clean, organised and adequately heated. We observed residents’ bedrooms to be homely and personalised. Décor and furnishings were found to be of a good standard. Spiritual emblems were noted within residents’ bedrooms.

We identified a malodour within two residents’ bedrooms and the adjoining en suite bathroom area. We made a recommendation to ensure this is addressed.

5.4.6 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. Residents were well dressed with good attention to personal detail noted.

5.4.7 Fire safety

We confirmed that the home’s most recent fire safety risk assessment was dated 24 April 2015. We reviewed the fire safety records and confirmed that fire safety training was undertaken on 1 November 2015. The records indicated that a fire drill took place on 20 December 2015.

5.4.8 Accidents/incident reports

We reviewed the accident/incident records which have occurred since the previous inspection and confirmed that these were appropriately managed and reported. For the purpose of information the registered manager and the senior care assistant were referred to the updated RQIA guidance on reporting of statutory notifications.

5.4.9 Complaints/compliments records

In our inspection of complaint records and discussion with the senior care assistant we confirmed that complaints had been managed appropriately.

5.4.10 Visits by the registered provider

We reviewed the record of these visits. This record confirmed that these visits were unannounced and were undertaken on a monthly basis.

Areas for improvement

One recommendation was made to address the malodour within two residents' bedrooms and the adjoining en suite bathroom area.

Number of Requirements:	0	Number of Recommendations:	1
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6. Quality improvement plan

The issue identified during this inspection is detailed in the QIP. Details of this QIP were discussed with Geraldine O'Neill, registered manager and Charlene Drumm, senior care assistant. 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 DHSPSS 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 actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have 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 in this report do not absolve the registered provider/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the recommendations set out in this report will provide the registered provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan

Recommendations

Recommendation 1 The registered person should ensure that the malodour in one identified area of the home is addressed.

Ref: Standard 27.1

Stated: First time

To be Completed by:
26 January 2016

Response by Registered Person(s) Detailing the Actions Taken:

As discussed on the day of inspection I had been in contact with a cleaning company for a new cleaning product to eliminate the odour.. We have now purchased the product. Cleaning in that area has increased to three times daily and the new product is proving to be effective. I have also been in contact with CHOICE asking their assistance again to see if they can look at the fall of the floor to prevent urine pooling at the back of the toilet.

Registered Manager Completing QIP	Geraldine O' Neill	Date Completed	22.02.2016
Registered Person Approving QIP	Ruth Hill	Date Approved	22.02.2016
RQIA Inspector Assessing Response	Laura O'Hanlon	Date Approved	22.2.16

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