



The Regulation and
Quality Improvement
Authority

Creamery House
RQIA ID: 1145
38 Main Street
Kesh
BT93 1TE

Inspector: Laura O'Hanlon
Inspection ID: IN022227

Tel: 028 6863 2176
Email: lynette.mchugh@westerntrust.hscni.net

**Unannounced Care Inspection
of
Creamery House**

12 November 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 12 November 2015 from 10.30 to 15.30. 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.

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

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.

1.1 Actions/enforcement resulting from this inspection

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

1.2 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: Western Health and Social Care Trust Elaine Way	Registered Manager: Lynette Mc Hugh
Person in Charge of the Home at the Time of Inspection: Lynette Mc Hugh	Date Manager Registered: April 2005
Categories of Care: RC-LD, RC-LD(E)	Number of Registered Places: 11
Number of Residents Accommodated on Day of Inspection: 8	Weekly Tariff at Time of Inspection: £470.00

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 - 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 the notification of accidents and incidents.

We met with five residents, two care staff and the registered manager.

We inspected the following records: three 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 12 May 2015. No requirements or recommendations were made.

5.2 Review of requirements and recommendations from the last care inspection

No requirements or recommendations resulted from last care inspection.

5.3 Standard 1: Residents' involvement - 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 a resident who wanted to visit his place of birth. The registered manager and staff arranged for the resident to visit his place of birth and the resident verified this with a photograph.

The residents and staff confirmed that they had a residents' meeting on the 21 October 2015. Their 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. At the most recent residents' meeting lengthy discussion took place in regard to menus. An action plan was developed by the registered manager following the meeting to address the issues raised.

A suggestion box was on display in the home.

The three 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, record of residents' meetings and the registered provider monthly visits. The manager 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.

The registered manager shared with us the annual quality review report dated April 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 and responded to by staff.

Staff shared with us examples of how they incorporate their knowledge of values in to 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 of improvement identified and this standard is assessed to be met.

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

5.4 Additional areas examined

5.4.1 Residents views

We met with five residents. We observed residents relaxing in the communal lounge area. 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 there wishes were respected in so far as possible. A comment made was:

- "I am very happy in here. I am well looked after."

5.4.2 Staff views

We spoke with two care staff members individually, 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.

The staff stated that they felt supported by the registered manager and advised that she was very approachable. The staff explained how the residents were offered choices on a daily basis. The staff stated that there was ample staff on duty each day. Some comments made were:

- “It’s a homely atmosphere, everybody gets on well and it’s a great group of residents.”
- “The residents are well looked after, all their needs are met. It’s a nice worthwhile job with good satisfaction.”

5.4.3 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 satisfactory standard. Spiritual emblems were noted within residents’ bedrooms.

5.4.4 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 attention to personal detail.

5.4.5 Fire safety

We confirmed that the home’s most recent fire safety risk assessment was dated 29 June 2015.

We reviewed the fire safety records and could confirm that fire safety training was last undertaken on 20 May 2015 and 29 June 2015. Further training was scheduled for 17 November 2015 and 1 December 2015. The records indicated that a fire drill took place on 16 October 2015.

5.4.6 Accidents / Incident reports

We reviewed accident/incident records which have occurred since the previous inspection and found these to be appropriately managed and reported.

5.4.7 Complaints / Compliments records

In our inspection of complaint records and discussion with the registered manager we confirmed that complaints had been managed appropriately.

5.4.8 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

There were no areas of improvement identified with the additional areas examined.

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.

Registered Manager	Lynette McHugh	Date Completed	01/12/15
Registered Person	<i>Carie Hoy</i>	Date Approved	4/12/15
RQIA Inspector Assessing Response	<i>Larso Hudson</i>	Date Approved	16.12.15.

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