

Inspection Report

20 April 2023



Edenvale Care Home

Type of service: Nursing Home
Address: 1-7 Edenmore Road Limavady
Telephone number: 0287772055

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Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation: Ann's Care Homes Limited Responsible Individual: Mrs Charmaine Hamilton	Registered Manager: Mrs Anne Martina Mullan – not registered
Person in charge at the time of inspection: Mrs Anne Martina Mullan	Number of registered places: 55
Categories of care: Nursing Home (NH) LD – Learning disability MP – Mental disorder excluding learning disability or dementia MP(E) - Mental disorder excluding learning disability or dementia – over 65 years PH – Physical disability other than sensory impairment TI – Terminally ill DE – Dementia I – Old age not falling within any other category PH(E) - Physical disability other than sensory impairment – over 65 years.	Number of patients accommodated in the nursing home on the day of this inspection: 35
Brief description of the accommodation/how the service operates: This is a registered Nursing Home which provides nursing care for up to 55 persons. The home is divided into two units. Benbradagh which provides dementia nursing care on the ground floor and Benevenagh which provides general nursing care on the first floor. Patient bedrooms are located over the two floors. Patients have access to communal lounges, dining rooms and a garden.	

2.0 Inspection summary

An unannounced inspection took place on 20 April 2023 from 10.10am to 5.05pm by a care inspector.

The inspection assessed progress with all areas for improvement identified in the home during the previous care inspection and considered if the home was delivering safe, effective and compassionate care and if the service was well led.

Patients were happy to engage with the inspector and share their experiences of living in the home. Patients expressed positive opinions about the home and the care provided. Patients said that staff members were helpful and pleasant in their interactions with them.

Patients who could not verbally communicate were well presented in their appearance and appeared to be comfortable and settled in their surroundings.

The findings of this report will provide the manager with the necessary information to improve staff practice and the patients' experience.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

In preparation for this inspection, a range of information about the service was reviewed to help us plan the inspection.

Throughout the inspection patients, relatives and staff were asked for their opinion on the quality of the care and their experience of living or working in Edenvale Care Home. The daily life within the home was observed and how staff went about their work. A range of documents were examined to determine that effective systems were in place to manage the home.

Questionnaires were provided to give patients and those who visit them the opportunity to contact us after the inspection with their views of the home. A poster was provided for staff detailing how they could complete an on-line questionnaire.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

4.0 What people told us about the service

Patients spoke positively about their experience of life in the home; they said they felt well looked after by the staff who were helpful and friendly. Patients' comments included: "The staff are great", "I am very happy here", "I have everything I need", "I feel very safe here" and "If I need anything the staff are quick to respond".

There were ten questionnaires returned; five from patients and five from relatives. The respondents were very satisfied with the overall provision of care delivery. Comments included: "Continue the first class care", "All areas and aspects of (relative's) care are first class" and "The staff are great and work hard each day".

Staff said that the manager was very approachable, teamwork was great and that they felt well supported in their role. One staff member said: "This is a great place to work" and a further staff member said: "I love it here". There was one response from the staff online survey. The staff member was very satisfied overall. Comments included: "Great working environment".

Three relatives spoken with during the inspection commented positively about the home and the care provided. Comments included: “The care here is outstanding”, “This is a great place”, “Very happy with my (relative’s) care” and “Everyone (staff) is very kind and caring here”.

Comments received during the inspection were shared with the manager.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last inspection to Edenvale Care Home was undertaken on 28 April 2022 by a care inspector; no areas for improvement were identified.

5.2 Inspection findings

5.2.1 Staffing Arrangements

There were systems in place to ensure staff were trained and supported to do their job. For example, staff received regular training in a range of topics including moving and handling, fire safety and adult safeguarding. Staff confirmed that they were provided with relevant training to enable them to carry out their roles and responsibilities effectively. The manager confirmed that there was ongoing monitoring of training to ensure full compliance.

Appropriate checks had been made to ensure that registered nurses maintained their registration with the Nursing and Midwifery Council (NMC) and care workers with the Northern Ireland Social Care Council (NISCC).

Review of two employee recruitment records evidenced that relevant pre-employment checks had been completed.

Staff said they felt supported in their roles and that there was good team work with effective communication between staff and management. Staff also said that, whilst they were kept busy, the number of staff on duty was generally satisfactory to meet the needs of the patients.

The staff duty rota accurately reflected all of the staff working in the home on a daily basis and clearly identified the person in charge when the manager was not on duty. Observation of the delivery of care during the inspection evidenced that patients’ needs were met by the levels and skill mix of staff on duty.

Review of a sample of registered nurses’ competency and capability assessments for taking charge of the home in the absence of the manager found these to have been completed.

There was evidence that staff received regular supervisions and appraisals and a matrix system was in place to record staff names and when the supervision/appraisal had taken place.

5.2.2 Care Delivery and Record Keeping

There was clear evidence of a relaxed, pleasant and friendly atmosphere between patients and staff. The inspector also observed where staff facilitated the patient's favourite music or television programme for those patients who were on bed rest. Staff were knowledgeable of individual patients' needs, their daily routine wishes and preferences.

Patients who were less able to mobilise require special attention to their skin care. Review of two patient's care records relating to pressure area care evidenced that patients were being repositioned as per care plan. However, the recording charts did not include a section to record the condition of the patient's skin. Details were discussed with the manager and following the inspection written confirmation was received of the action taken to address this.

Falls in the home were monitored monthly to enable the manager to identify if any patterns were emerging which in turn could assist the manager in taking actions to prevent further falls from occurring. There was a system in place to ensure that accidents and incidents were notified to patients' next of kin, their care manager and to RQIA, as required.

Good nutrition and a positive dining experience are important to the health and social wellbeing of patients and the lunchtime dining experience was seen to be calm and relaxed. Patients who choose to have their lunch in their bedroom had trays delivered to them and whilst the meals were covered on transport desserts were uncovered. This was discussed with the manager who agreed to address this and to monitor going forward.

There was a choice of meals offered, the food was attractively presented by the catering staff and smelled appetising. Staff knew which patients preferred a smaller portion and demonstrated their knowledge of individual patient's likes and dislikes. Whilst most staff were seated when assisting patients with their meals, two staff members was observed standing. This was discussed with the staff who acknowledged that they should have been seated and took immediate action to address this. Details were shared with the manager who agreed to monitor this during her daily walk around.

Staff said they were made aware of patients' nutritional needs to ensure that recommendations made by the Speech and Language Therapist (SALT) were adhered to. Discussion with staff evidenced that they were providing the correct diet as recommended by SALT.

Patients' needs were assessed at the time of their admission to the home. Following this initial assessment, care plans were developed to direct staff on how to meet patients' needs and included any advice or recommendations made by other healthcare professionals.

Review of three patient care records evidenced that care plans and risk assessments were reviewed on a regular basis. A small number of discrepancies were identified and discussed with the manager who agreed to have these reviewed. Following the inspection written confirmation was received that relevant care records had been reviewed and updated.

Daily records were kept of how each patient spent their day and the care and support provided by staff. The outcome of visits from and consultations with any healthcare professional was also recorded.

5.2.3 Management of the Environment and Infection Prevention and Control

Observation of the home's environment included reviewing a sample of bedrooms, bathrooms, storage spaces and communal areas such as lounges. The home was warm, clean and comfortable. Patients' bedrooms were personalised with items important to the patient. The manager confirmed that refurbishment was ongoing to ensure that the home is well maintained.

A number of maintenance related issues were identified during the inspection requiring repair/replacement. Following the inspection, the manager provided written confirmation of the action taken to address these issues.

Corridors were clear of clutter and obstruction and fire exits were also maintained clear. Review of the most recent fire risk assessment completed on 3 November 2022 evidenced that any actions required had been signed/dated by management as having been completed.

There was a good supply of personal protective equipment (PPE) and hand sanitising gel in the home. Staff use of PPE and hand hygiene was regularly monitored by management and records were kept. The manager also said that any issues observed regarding infection prevention and control (IPC) measures or the use of PPE was immediately addressed.

5.2.4 Quality of Life for Patients

Discussion with patients confirmed that they were able to choose how they spent their day. For example, patients could have a lie in or stay up late to watch TV. Patients confirmed that they could remain in their bedroom, go to a communal room or outdoors as desired.

Observation of life in the home and discussion with staff and patients established that staff engaged with patients individually or in groups; patients were afforded the choice and opportunity to engage in social activities, if they wished.

Patients commented positively about the food provided within the home with comments such as; "The food is nice", "Good food" and "I really enjoyed my lunch".

5.2.5 Management and Governance Arrangements

There has been a change in the management of the home since the last inspection. Mrs Anne Martina Mullan has been the manager since 7 January 2023. The manager said they felt well supported by senior management and the organisation.

There was evidence that the manager had a system of auditing in place to monitor the quality of care and other services provided to patients. Where deficits were identified the audit process included an action plan with the person responsible for completing the action and a time frame for completion with follow up to ensure the necessary improvements had been made.

The home was visited each month by a representative of the responsible individual to consult with patients, their relatives and staff and to examine all areas of the running of the home. The reports of these visits were completed and available for review by patients, their representatives, the Trust and RQIA.

6.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Anne Martina Mullan, manager, as part of the inspection process and can be found in the main body of the report.



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