

Inspector: Alice McTavish Inspection ID: IN023693

Cumulus Heights RQIA ID: 11984 Killough Road Down BT30 6WT

Post-Registration Announced Care Inspection of Cumulus Heights

1 October 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1. Summary of inspection

RQIA received application for the registration of Cumulus Heights as a residential care home. to provide accommodation and support to individuals with learning disability and autism. The home officially opened on 19 August 2015.

Residents of Inismor, a residential care home owned and operated by Mainstay DRP, closed on 19 August 2015 with eight residents transferred to Cumulus Heights, House Four. Two respite care homes, also owned and operated by Mainstay DRP, moved services to Cumulus Heights on 24 August 2015. Ardcora Bungalow is now known as House Five and Iniscora Bungalow is known as House Three.

Ms Laura Torney has been appointed by Mainstay DRP as residential services manager for Cumulus Heights. Ms Torney has submitted application to RQIA to become registered manager of Cumulus Helghts.

An announced post registration care inspection took place in Cumulus Heights on 1 October 2015 from 10.20 to 13.30. On the day of this inspection we found the home to be delivering safe, effective and compassionate care.

The 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 pre- registration report/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: Mainstay DRP / Mrs Helen Taylor	Registered Manager: Miss Laura Torney (Registration pending)
Person in charge of the home at the time of inspection: Miss Laura Torney	Date manager registered: Registration is pending

Categories of care: RC-LD, RC-LD(E)	Number of registered places: 19
Number of residents accommodated on day of inspection: 15	Weekly tariff at time of inspection: £641 - £1121

3. Inspection focus

The inspection sought to assess progress with the issues raised during and since the preregistration care inspection of 17 August 2015, also to assess progress with the day to day operations in the home in relation to the transition to the new facilities.

4. Methods/process

Prior to inspection we analysed the following records: the returned Quality Improvement Plan from the last inspection, notifications of accidents and incidents.

We met with two residents, four care staff and the manager (registration pending). No visiting professionals and no resident's visitors/representative were present.

The following records were examined during the inspection: care records relating to Personal Emergency Evacuation Plans (PEEPs), staff training records, staff competency and capability records, staff duty records, staff duty handover records.

5. The inspection

5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an announced pre- registration care inspection dated 17 August 2015. The completed QIP was returned from the home to RQIA. Actions taken by the home to address requirements were approved by the care inspector.

5.2 Review of requirements and recommendations from the last care inspection

Previous inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 13 (7)	The registered person must ensure that hand wash dispensers, hygiene bins and wipeable dispensers for any paper products are supplied and fitted in all communal bathrooms throughout the building.	
	Action taken as confirmed during the inspection: Inspection of the premises confirmed that hand wash dispensers, hygiene bins and wipeable dispensers for any paper products were supplied and fitted in all communal bathrooms throughout the building.	Met

Requirement 2 Ref: Regulation 13 (4)	The registered person must ensure that the medicines trolley is suitably secured in the identified room within the building. Action taken as confirmed during the inspection: Inspection of the premises confirmed that the medicines trolley was suitably secured in the identified room within the building.	Met
Requirement 3 Ref: Regulation 27 (4) (a)	The registered person must ensure that the Personal Emergency Evacuation Plans (PEEPs) of each resident is reviewed and revised. Action taken as confirmed during the inspection: Inspection of the care records confirmed that the Personal Emergency Evacuation Plans (PEEPs) of each resident was reviewed and revised.	Met
Requirement 4 Ref: Regulation 27 (2) (c)	The registered person must ensure that the care call system is fully operational. Action taken as confirmed during the inspection: Inspection of the premises confirmed that the care call system was fully operational.	Met

5.3 Inspection findings

Theme: The transition from three services to one amalgamated service is appropriately managed for residents, respite users, residents' families and staff.

Is care safe? (Quality of life)

The manager advised us that the eight residents who had previously lived in Inismor had made a successful transition to Cumulus Heights. This had been aided by the good preparatory work undertaken by staff, particularly in assisting residents to visit the new build and to choose their own soft furnishings and bathroom accessories. The residents had participated in a day trip on the day of the move and did not witness the disruption of the move from Inismor. Whilst the residents had talked fondly about their previous home, they had not expressed an interest in revisiting it.

The manager described the process of transition for those residents who use respite care services in House Five (formerly Ardcora Bungalow) and House Three (formerly Iniscora Bungalow). There are approximately 60 residents who use respite care services. One respite user experienced great difficulty in accepting the new facilities. The manager described in detail

how staff had anticipated these difficulties and additional staff support had been made available. Staff had spent a great deal of time in providing the resident with support and reassurance. This approach was ultimately successful.

Is care effective? (Quality of management)

The manager had identified that House Five in Cumulus Heights, formerly Ardcora Bungalow, a respite service for individuals with a higher level of challenging behaviour, was a particularly busy service and that the staff would greatly benefit from further training. The manager had availed of a three day training course in Care and Responsibility (managing violence and aggression) and had arranged for the staff to undertake two days of breakaway training in mid - October 2015.

A number of residents in Cumulus Heights had particular swallow or dietary needs. Speech and Language Therapy training was provided in July 2014. Personalised place mats had recently been provided for all residents; these gave staff a visual reminder of Speech and Language Therapy recommendations and included guidance as to the level of supervision required to ensure the safety of residents during mealtimes.

The manager advised us that staff had been encouraged to identify any further training needs; requests for further training would be actively considered.

The manager advised us that a new template for the completion of staff competence and capability had been devised. Inspection of this confirmed that all areas had been included. The manager advised that all staff who were given the responsibility of being in charge of the home for any period in the absence of the manager had undergone this assessment. The manager confirmed that there were robust arrangements in place at all times, including at weekends, for senior managers to be on call, if required.

The home's policy for training in relation to violence and aggression was updated in September 2015 and included the need for RQIA and the trust to be notified of any occasion in which restraint is used. A review of the accident and incident notifications since the previous inspection established that these had been reported and managed appropriately.

The home's complaints policy and procedure was examined by us and was found to be satisfactory. Information regarding complaints was also contained in the Residents Guide. There were systems in place to ensure that records were retained of complaints, investigations, outcomes and lessons learned.

The home had received several written compliments. Staff advised us that residents' families and commissioning trust staff had provided numerous verbal compliments about the manner in which the transition had been managed.

Is care compassionate? (Quality of care)

The manager advised that eight residents were currently accommodated within the residential care unit of Cumulus Heights. Three additional beds had been commissioned by trusts for long term accommodation. This would bring the residential care unit to full occupancy. The respite units would continue to provide services to established users of those services.

The manager advised us that the three new residents were already familiar with the Mainstay DRP as they previously used the respite services. They were able to view their rooms and the general facilities and to spend time with the group of residents prior to admission.

The families of the three new residents were provided with the opportunity to view the home and to be involved in making practical preparations for the admission of their relatives. A provisional care plan had been devised for each new resident and shared and agreed with the resident and with the family.

The needs of the existing residents were considered and the residents prepared in advance for the addition of new residents. In order to facilitate successful admissions for all parties, dates for admission were planned on a phased basis. Each new resident admitted will be closely monitored; staffing levels could be increased during this period to assist in managing the transitions into long term residential care. Each new resident will have a care review after admission.

5.4 Additional areas examined

5.4.1 Residents' views

We met with two residents who expressed their complete satisfaction with their new environment and all aspects of the care provided.

Some comments included:

- "It's great here. I love it. My room is great, I have more space and I can sit outside on the terrace and enjoy the good weather and look across to the mountains; it's great."
- "it's really nice here, they (staff) look after me well."

5.4.2 Staff views

In addition to the manager and the senior residential worker, we met with three staff members. Staff members reported that they had become accustomed to the new facilities; they were enjoying seeing the residents derive pleasure from living in more spacious accommodation and having more personal space. The staff members reported that the residents had appeared to accept the changes well.

One respite resident had had the opportunity to visit friends in House Four, formerly Inismor residential unit, and the experience was greatly enjoyed by the residents who welcomed the visit. The positive approach by staff in facilitating the visit was to be commended.

5.4.3 Staffing

At the time of inspection the following staff members were on duty:-

- 1 manager
- 1 senior residential worker
- 2 residential workers
- 3 assistant residential workers
- 1 cook
- 1 domestic

Three residential workers and three assistant residential workers were scheduled to be on duty later in the day. Two residential workers and three assistant residential workers were scheduled to be on overnight duty. The manager advised us that staffing levels were appropriate for the number and dependency levels of the residents accommodated. The manager confirmed that staffing levels had been closely monitored during the transition with appropriate adjustments made to meet the needs of the residents.

5.4.4 Care practices

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

5.5.5 General environment

We found the home to be clean and tidy and well maintained. Décor and furnishings were of a high standard.

Areas for improvement

No areas for improvement were identified within the additional areas examined.

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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. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.				
Registered Manager	Law	a Toppey.	Date completed	
Registered Person	Halo	I location	Date approved	14/10/15
RQIA inspector assessing response	Alie	Marish	Date approved	09/11/15

Please provide any additiona	l comments or o	bservations you m	nay wish to ma	ake below:
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