

# Unannounced Care Inspection Report 28 February 2020











# **Limetree House**

Type of Service: Residential Care Home Address: 133/133A Comber Road, Dundonald,

**BT16 2BT** 

Tel no: 028 9048 9380 Inspector: Alice McTavish

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

#### 1.0 What we look for



#### 2.0 Profile of service

This is a residential care home with 35 beds that provides care for residents living with dementia.

#### 3.0 Service details

| Organisation/Registered Provider: Limetree Responsible Individual:                 | Registered Manager and date registered: Graham Moore 25 September 2017                   |  |
|--|--|--|
| Gertrude Alexandra Priscilla Nixon   |  |  |
| Person in charge at the time of inspection:<br>Terri Sailes, Senior Care Assistant | Number of registered places: 35  |  |
| Categories of care: Residential Care (RC) DE – Dementia                            | Total number of residents in the residential care home on the day of this inspection: 33 |  |

# 4.0 Inspection summary

An unannounced inspection took place on 28 February 2020 from 12.30 to 14.35.

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

The inspection sought primarily to assess progress with issues raised during the last care inspection; it also sought to spend time with the residents of Limetree House, to observe daily life in the home and to obtain the views of residents and staff about this service.

Residents said that the care in Limetree House was very good and that staff treated them very well.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and resident experience.

# 4.1 Inspection outcome

|                                       | Regulations | Standards |
|---------------------------------------|-------------|-----------|
| Total number of areas for improvement | 0           | 0         |

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Graham Moore, manager, by telephone after the inspection.

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

#### 4.2 Action/enforcement taken following the most recent care inspection

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 5 November 2019.

## 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: the findings of the last care inspection, notifications of accidents and incidents, registration information and any verbal or written information received.

During our inspection we:

- where possible, speak with residents, people who visit them and visiting healthcare professionals about their experience of the home
- talk with staff and management about how they plan, deliver and monitor the care and support provided in the home
- observe practice and daily life
- review documents to confirm that appropriate records are kept

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

During the inspection the inspector met with the person in charge, three residents, three members of care staff and two members of domestic staff. No visiting professionals and no residents' relatives were present.

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

### 6.0 The inspection

# 6.1 Review of areas for improvement from previous inspection(s)

| Areas for improvement from the last care inspection |   |               |  |  |
|---|---|---------------|--|--|
| <u>-</u>  | e compliance with the DHSSPS Residential  | Validation of |  |  |
| Care Homes Minimum Sta<br>Area for improvement 1    | The registered person shall ensure the  | compliance    |  |  |
| Ref: Standard 25.8 Stated: First time               | <ul> <li>Meetings for the full staff team are held at least quarterly</li> <li>A signing in sheet is kept for each meeting</li> <li>The meeting minutes record the names of staff present and absent</li> <li>A system is put in place to evidence that minutes are shared with those staff who did not attend</li> </ul> Action taken as confirmed during the inspection: Inspection of documentation confirmed that this was addressed. | Met           |  |  |

# 6.2 Inspection findings

We walked around the home and found it to be warm, clean and tidy. The décor and furniture were in good condition. Lounges, dining areas and residents' bedrooms were comfortable. Residents had their own possessions in their rooms.

We saw that most residents were enjoying the company of other residents in the lounges. We also saw some residents relaxing in their bedrooms or other areas of the home. We saw that there was a variety of activities arranged and occurring throughout the home. We saw and heard that there were numerous warm and supportive interactions between residents and staff.

The residents that we spoke with indicated that they were happy living in the home. We spoke at length with one resident who was able to describe how staff in Limetree House provided the highest levels of care. This resident said "The staff are absolutely brilliant. They are very kind and are available to help me, if I need it, day and night. I have lots to do to keep me busy and occupied....I also have a key for my room and this gives me privacy, which is important for me."

We spoke with staff who spoke of the support given by management in the highest terms. A member of staff said "This is an excellent place to work in...I didn't have any experience working in care before I came here, but I have no regrets...Graham (manager) and Deborah (deputy manager) are great managers, very committed and supportive to the whole staff team...our residents are lovely, we look after them as if they were our own granny or granddad".

Another member of staff reported that she had a relative who lived in the home and that she was very happy with the care – "At first I was uncomfortable with the thought of helping my (relative) with personal or intimate care because that would not have been what my (relative) would have wanted, but my colleagues were understanding about this... there is no favouritism shown here, and all the residents are treated equally. I go home at night knowing that my (relative) is well looked after and treated well and I have trust in my colleagues that they treat everyone very well".

Ten questionnaires were returned from residents and their relatives. All respondents indicated that they were either satisfied or very satisfied with the care and services provided in Limetree House. A resident's relative commented "Very happy with mum's care. Staff lovely and so helpful."

Three questionnaires were returned by staff. All respondents indicated that they were satisfied or very satisfied that the home was providing safe, effective and compassionate care and that the service was well led.

#### **Areas for improvement**

No areas for improvement were identified during the inspection.

|                                       | Regulations | Standards |
|---------------------------------------|-------------|-----------|
| Total number of areas for improvement | 0           | 0         |

# 7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.





The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111

Email info@rqia.org.uk

Web www.rqia.org.uk

@RQIANews