



The **Regulation** and
Quality Improvement
Authority

Inspector: Ruth Greer
Inspection ID: IN022251

The Cottages
RQIA ID: 1224
Shepherds Way
Dungiven Road
Derry
BT47 5GW

Tel: 02871344484

Email: alice.boyle@westerntrust.hscni.net

**Unannounced Care Inspection
of
The Cottages**

23 February 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 23 February 2016 from 10 30 to 13 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. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report.

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

There was one recommendation made as a result of the last inspection. There was evidence that this had been addressed satisfactorily.

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	1	0

The details of the QIP within this report were discussed with Janet Doherty, senior in charge of the home and Margaret Murphy, line manager as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service details

Registered Organisation/Registered Person: Western Health and Social Care Trust	Registered Manager: Alice Boyle
Person in Charge of the Home at the Time of Inspection: Janet Doherty	Date Registered: 15 June 2015
Categories of Care: RC-LD, RC-LD(E)	Number of Registered Places: 7
Number of Residents Accommodated on Day of Inspection: 6	

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 had been met:

Standard 8 - Resident records and reporting arrangements

4. Methods/processes

Prior to inspection we analysed the following records: Notifications of accidents/incidents since the previous inspection and the quality improvement plan of that inspection.

During the inspection the inspector met with one resident, three care staff, one administrative staff and spoke with one resident's representative.

The following records were examined during the inspection: Four care files, complaints, monthly monitoring reports and accidents/incidents.

5. The inspection

5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an unannounced care inspection 9 June 2015. The completed QIP was returned and approved by the care inspector.

Areas to follow up/be addressed were in relation to the annual quality review reports

5.2 Review of requirements and recommendations from the last Care inspection

Previous Inspection Recommendations		Validation of compliance
Recommendation 1 Ref: Standard 1 .7 Stated First time To be Completed by: 15 July 2015	The annual monitoring report for year 2014/2015 should be held in the home Action taken as confirmed during the inspection: Annual monitoring reports were available for inspection.	Met

5.3 Standard 8 : Residents Records and Reporting Arrangements

Is care safe? (Quality of life)

Four residents' files were chosen for review. All contained a recent photograph of the resident. The assessment and care plans had been signed by the resident and/or their representative. This home provides a rolling programme of respite care for a core group of service users. The home receives an assessment and care plan at the time of the initial referral. However in the files examined there had been no update in information from the Trust at the point of each readmission. A requirement has been made in this regard. Information was noted within the care files about the resident's life history and of the person (s) in their family to be contacted where required. Daily progress notes are maintained and these were found to reflect any changed or unusual circumstances in behaviour or health and the actions taken by staff to deal with these. Care notes showed where risk had been identified and set out the care plan to deal with that risk. An inventory is made of all belongings brought to the home residents.

Is care effective? (Quality of management)

The home had a policy which provided guidance for staff in the event of accidents/ falls including who to contact and the reporting arrangements required to other agencies. Staff with whom we spoke were aware of the process in dealing with any accident in the home. Management arrangements are in place to ensure that a senior staff member and/ or the manager are on duty at all times. On the day of the inspection the line manager, Margaret Murphy, was undertaking an unannounced monthly monitoring inspection in line with Regulation 19 of the Residential Care Homes Regulations (N I) 2005. This process forms part of a robust quality assurance system by the Trust.

Is care compassionate? (Quality of care)

There was evidence that staff were compassionate in dealing with one resident in the home at the time. They also provided support and re assurance, by telephone, to the parent of another resident. Staff with whom we spoke felt that the care in the home is compassionate and that due to the small numbers of residents accommodated staff can get to know them all individually. Observation of practice on the day, in addition to discussions with residents and staff, confirmed that care is provided in a respectful and friendly manner.

Areas for improvement

One area of improvement was identified in relation to updating care plans before residents are admitted for respite.

Number of requirements:	1	Number of recommendations:	0
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5.4 Additional areas examined

5.4.1 Residents

We spoke with one resident who was in the home at the time of the inspection. The resident had limited verbal communication. However; he/she was at ease with in the surroundings. Staff knew the best communication method for this resident and it was evident that staff knew how to respond to non-verbal clues.

5.4.2 Relatives

We spoke by telephone with the parent of another resident who was at day care. The relative spoke very positively of the care provided to his daughter. The relative stated that he had no concerns in regard to the respite care experienced. The relative said "the home is a god send As a family we couldn't do without the break and X really enjoys coming here. The staff are great"

5.4.3 Environment

The home was bright, warm and clean. Communal areas were homely, well-furnished and nicely decorated. There were no hazards or mal odours noted in any part of the building.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Janet Doherty, senior in charge and Margaret Murphy, line manager as part of the inspection process. 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 and The Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The DHSSPS 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 requirements and 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

Statutory Requirements

Requirement 1 Ref: Regulation 15 (2) (b) Standard 6.6 Stated: First time To be completed by: 23 February 2016	Before each admission the care needs of each resident should be reviewed. This information should be in place before any admission takes place. This must include confirmation (where applicable) when no change to the care plan has occurred since the previous admission.		
	Response by Registered Person(s) detailing the actions taken:		
Registered Manager completing QIP		Date completed	
Registered Person approving QIP		Date approved	
RQIA Inspector assessing response		Date approved	

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

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