

Inspector: Bronagh Duggan Inspection ID: IN022344

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Golan View RQIA ID: 1229 72 Farmhill Road Arvalee Omagh BT79 0NW

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# Unannounced Care Inspection of Golan View

4 February 2016

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

An unannounced care inspection took place on 4 February 2016 from 10.15 to 13.15. 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.

One area for improvement was identified and is set out in the Quality Improvement Plan (QIP) appended to this report. This related to the gathering of representatives views and opinions at least annually and to compile this information within a report. This report should be made available for residents and representatives.

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

Other than those actions detailed in the previous 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	0	1
recommendations made at this inspection		•

The details of the QIP within this report were discussed with the registered manager / provider Mrs Ann McGrath as part of the inspection process. The timescales for completion commence from the date of inspection.

#### 2. Service details

Registered Organisation/Registered Person: Mrs Ann McGrath	Registered Manager: Mrs Ann McGrath
Person in charge of the home at the time of inspection: Mrs Ann McGrath	Date manager registered: 1 April 2005
Categories of care: RC-I, RC-MP, RC-MP(E), RC-PH	Number of registered places: 3
Number of residents accommodated on day of inspection:	Weekly tariff at time of inspection: £470 per week

#### 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' 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 returned Quality Improvement Plan, there were no notifications of accidents or incidents received since the previous inspection.

During the inspection we met with two residents, and the registered manager. There were no visitors to the home during the period of inspection.

The following records were examined during the inspection: two care records, minutes of residents meetings, completed resident satisfaction questionnaires, staff training records, complaints records, the homes Statement of Purpose, Residents Guide, accident and incident records and the homes Fire Safety Risk Assessment.

#### 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 6 August 2015. The completed QIP was returned and approved by the care inspector.

# 5.2 Review of requirements and recommendations from the last care inspection on 6 August 2015.

Previous Inspection	Validation of compliance	
Recommendation 1 Ref: Standard 23.3	The registered manager should ensure that all care staff complete infection control training in keeping with RQIA mandatory training guidance.	
	Action taken as confirmed during the inspection: The registered manager confirmed all staff had completed training in infection control. Records confirming the completion of training were available.	Met

# 5.3 Standard 1: Residents' views and comments shape the quality of services and facilities provided by the home.

## Is care safe? (Quality of life)

In our discussions with the registered manager she confirmed that individual choices, preferences or issues of concern identified by residents were listened to and readily acted on. The registered manager confirmed that as the home caters for a maximum of three residents they are actively involved in the day to day running of the home and participate in the services provided. We inspected two care records. These records included up to date needs assessments, risk assessments and care plans. There was evidence of recent care reviews for both residents. The care records were found to be kept under continual review to reflect the needs and preferences of residents. Care records inspected were signed appropriately by the residents.

The registered manager discussed the direction and philosophy of care within the home. This includes the creation of a homely environment where residents are encouraged to actively participate. The registered manager demonstrated a good awareness of the values of independence, choice and consent. These values were also outlined in the homes Statement of Purpose and Residents Guide.

## Is care effective? (Quality of management)

The registered manager confirmed residents' were consulted regularly with regards to the running of the home. We inspected the minutes of residents meetings. These reflected that meetings were held on a regular basis with residents views actively sought. Residents care reviews were up to date and showed that residents were satisfied with their placements. We inspected a selection of resident satisfaction questionnaires which are completed on an annual basis. We discussed the content of the questionnaires with the registered manager and suggested widening the scope of the questions to residents as this would be helpful in gaining greater information. The registered manager confirmed that she would look at the content of the questionnaires.

We discussed with the registered manager the opportunities to gather the views of residents and their representatives. The registered manager confirmed that residents' representatives are invited to residents care reviews which are held at least annually and have the opportunity to share their views when they visit the home. We made a recommendation that a questionnaire should be developed and provided to representatives at least annually to gather their views and opinions about the running of the home. The information which is gathered from these questionnaires should then be compiled within a report and be made available for residents and their representatives.

#### Is care compassionate? (Quality of care)

In our discussions with the registered manager she confirmed that the residents' individual needs and preferences are at the centre of care provision in the home.

From our observations of care practices and interactions we found residents were treated with dignity and respect when being supported in the home. Residents were observed relaxing and engaging in events around the home.

# Areas for improvement

Overall this standard was assessed as being met. We identified one area of improvement in relation to this standard. This included obtaining the views and opinions of representatives and compiling this information into a report which should be made available for residents and representatives.

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Number of requirements:	0	Number of recommendations:	1 1

#### 5.4 Additional areas examined

#### 5.4.1 Residents views

We met with two residents who in accordance with their capabilities indicated that they were happy with their life in the home, their relationship with staff and the provision of care. One resident shared with us how they like to spend their day actively involved in the home and the local community.

Some comments received from the residents included:

- "I like it here."
- "I am happy here; I have everything that I need. I would be involved in the meetings. I like to look after the hens, and birds. I like it very much."

#### 5.4.2 Staff views

There were no additional staff members on duty other than the registered manager.

#### 5.4.3 General environment

We found the home was clean and tidy, the décor and furnishings were of a good standard.

#### 5.4.4 Fire safety

We inspected fire safety training records which confirmed that staff training was maintained on an up to date basis. We noted residents in the home had also completed the fire safety training. The homes Fire Safety Risk Assessment was updated in October 2015 no recommendations were made.

#### 5.4.5 Complaints

We reviewed complaint records available in the home. No complaints had been made from the previous inspection.

#### 5.4.6 Accidents and incidents

We reviewed the accident and incident records maintained in the home. The registered manager confirmed there had been no recent accidents or incidents in the home and records available confirmed this.

#### Areas for improvement

We identified no areas for improvement from the additional areas examined.

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Number of requirements:	0	Number of recommendations:	0

#### 6. Quality Improvement Plan

The issue identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Ann McGrath registered 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 RQIA's office 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			
Recommendations			
Recommendation 1	The registered manager should ensure that a questionnaire is developed and provided to representatives at least annually to gather		
Ref: Standard 1.6,1.7	their views and opinions about the running of the home. The information which is gathered from these along with residents'		
Stated: First time	questionnaire responses should be compiled within a report and be made available for residents and their representatives.		
To be completed by:			
4 May 2016	Response by Registered Person(s) detailing the actions taken: Residents and their representatives will be given updated questionnaires annually		
Registered Manager co		Date completed 2/3/2016	
Registered Person app		Date approved	
RQIA Inspector assess	sing response Bronagl Daggan	Date approved 14/3/16	

<sup>\*</sup>Please ensure this document is completed in full and returned to <u>care.team@rgia.org.uk</u> from the authorised email address\*