



The Regulation and
Quality Improvement
Authority

Redford
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**Unannounced Secondary Care Inspection
of
Redford**

7 January 2016

The Regulation and Quality Improvement Authority
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1. Summary of inspection

An unannounced care inspection took place on 7 January 2016 from 10.30am to 2pm. 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. No areas of improvement were identified during this inspection.

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 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: William James Wallace	Registered Manager: Trevor Gillen
Person in charge of the home at the time of inspection: Perdita Kerr Deputy Manager	Date manager registered: 21 November 2013
Categories of care: RC-DE, RC-I, RC-PH(E)	Number of registered places: 18
Number of residents accommodated on day of inspection: 18	Weekly tariff at time of inspection: £470

3. Inspection focus

The inspection sought 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 previous inspection report and notifications of incidents and accidents.

We met with 12 residents, five members of staff and the registered person. Verbal feedback of the findings of the inspection was given to the senior care assistant, the deputy manager and registered person.

We inspected the following records: three residents' care records, complaints records, record of residents meetings, quality assurance documentation, accident/ incident reports and fire safety records.

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 7 July 2015. No requirements or recommendations were made as a result of that inspection.

5.2 Review of requirements and recommendations from the last Care inspection

No requirements or recommendations resulted from the last inspection dated 7 July 2015.

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)

The deputy manager confirmed that residents' views are taken into account in all matters affecting them in so far as practically possible.

Through discussion with the residents they reported to us that their views were actively sought and incorporated into practice. Residents informed us that they felt comfortable about raising any issues of concern and felt that if so these would be dealt with appropriately.

Residents' meetings are held on a regular basis. Residents' views and wishes were actively sought and recorded. The record of these meetings was inspected. These were found to be maintained in good detail with agreed actions delegated as necessary.

Care records inspected in regard to this standard, demonstrated to us that records were up to date and kept under continual review to reflect the changing needs and preferences of the resident.

Is care effective? (Quality of management)

We found that there was a range of methods and processes in place where residents and their representatives' views were sought. These were reflected within the care management reviews, record of residents' meetings and the registered person visits.

The deputy manager confirmed that there was an open door policy within the home for residents and relatives who wished to highlight any issues.

An inspection of the complaints record found that expressions of dissatisfaction were taken seriously and managed appropriately.

The annual quality assurance document for 2015 was inspected and found to contain the views of residents. These views were obtained from individual quality assurance questionnaires. The questionnaires sought the views of residents about their life in the home, and issues of improvement.

Copies of review forms were present within each care record. Residents and their representatives attended and participated in their care management review. Evidence was in place that any agreed actions at these meetings were acted upon.

Is care compassionate? (Quality of care)

Discussion with staff demonstrated that they were knowledgeable about residents' needs and a person centred approach was adopted. In our discussions with staff we identified that residents were listened and responded to by staff.

In our observations of care practices we confirmed that residents were treated with dignity and respect.

Care duties were conducted at an unhurried pace with time afforded to interactions with residents in a polite, friendly and supportive manner.

Areas for improvement

There were no issues of improvement identified with this standard. This standard was found to be met and considered to be safe, effective and compassionate.

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

5.4.1 Residents' views

We met with 12 residents. In accordance with their capabilities, residents expressed and indicated that they were happy and content with their life in the home and their relationship with staff.

Some of the comments made included statements such as:

- "I love it here"
- "There are no problems at all"
- "They look after us very well "
- "The staff are great"
- "It's a lovely size of a home. We are like all one big family"
- "They are all nice to me. I feel a lot better since I came here".

5.4.2 Staff views

We spoke with five staff members of various grades, in addition to the registered provider. Staff advised us that they felt supported in their respective roles and that they felt a good standard of care was provided. The staff related that they had been provided with the relevant resources to undertake their duties and that there was good staff morale. Staff demonstrated to us that they were knowledgeable of the needs of individual residents.

5.4.3 General environment

We found that the home presented as clean, organised and adequately heated. Décor and furnishings were found to be of a reasonable standard.

5.4.4 Staffing

The staffing levels at the time of this inspection consisted of:

- 1 x deputy manager
- 1 x senior care assistant
- 3 x care assistants
- 1 x domestic
- 1 x cook

From general observations of care practices and discussions with staff and residents these levels were found appropriate to meet the needs of residents, taking account of the size and layout of the home.

5.4.5. Fire Safety

An inspection of the fire safety records found that fire safety training was up to date. There was also a programme of routine of fire safety checks in the environment. These were maintained on an up to date basis.

There was no obvious fire safety risks observed in the environment at the time of the inspection, such as wedging opening fire safety doors.

5.6.6 Accident/ incident reports

An inspection of these reports from 1 November 2015 found these to be appropriately managed and reported.

5.4.7 Care practices

We found the atmosphere in the home was friendly and welcoming. We observed staff to be interacting with residents in a respectful, polite, warm and supportive manner.

Care duties and tasks were organised in an unhurried manner. Residents were observed to be comfortable, content and at ease in their environment and interactions with staff.

Residents were observed to be comfortable, content and at ease in their environment and interactions with staff. A nice homely atmosphere was in place.

Areas for Improvement

There were no areas of improvement identified with these additional areas examined. These areas were considered to be safe, effective and compassionate

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager		Date Completed	
Registered Person		Date Approved	
RQIA Inspector Assessing Response	John McAuley	Date Approved	22/02/16

Please provide any additional comments or observations you may wish to make below:

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