



The Regulation and
Quality Improvement
Authority

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Inspection ID: IN023058

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**Unannounced Care Inspection
of
Rowandale**

12 January 2016

The Regulation and Quality Improvement Authority
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1. Summary of inspection

An unannounced care inspection took place on 12 January 2016 from 10.30am to 1.30pm. 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 substantially met in all areas other than two requirements. These were in relation to putting in place an annual quality assurance report and promotion of resident consultation in the assessment, care planning and reviews of care. These 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

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	2	0

The details of the QIP within this report were discussed with Feargal Lynn, the registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service details

Registered Organisation/ Registered Person: Feargal Joseph Lynn	Registered Manager: Feargal Joseph Lynn
Person in charge of the home at the time of inspection: Senior Care Assistant Michelle Tabb until 12 midday when the registered manager returned from a health care appointment with a resident.	Date manager registered: 9 May 2011
Categories of care: RC-MP(E), RC-DE, RC-I	Number of registered places: 15
Number of residents accommodated on day of inspection: 13	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 13 residents, one visiting relative, four members of staff and the registered manager. Verbal feedback of the findings of the inspection was given to the registered manager.

We inspected the following records: three residents' care records, complaints records, record of residents' meetings and accidents and incident records.

5. The inspection

5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an announced estates inspection on 26 October 2015. The completed QIP was returned and approved by the estates inspector.

5.2 Review of requirements and recommendations from the last care inspection on 25 June 2015

There were no requirements or recommendations made as a result of this inspection.

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

Is care safe? (Quality of life)

The registered 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 also reported that they would feel comfortable and have no anxiety in raising concerns with staff or the registered manager.

Residents' meetings are held on a regular basis. Residents' views and wishes were actively sought and recorded.

Three residents' care records were inspected in regard to this standard. The care records lacked evidence of resident consultation in the assessment, care planning and review aspects of care. A requirement was made for this to be acted upon.

Care review meetings with aligned care managers were in place, with these records maintained appropriately.

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, residents' meetings and the registered manager's day to day management of the home.

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

The home had not put in place the annual quality assurance report. A requirement was made for this to be implemented. Quality assurance questionnaires had been put in place with residents and their representatives with records of these maintained.

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. Observations found clear evidence of residents' wishes and choices being facilitated in for example, the provision of meals.

Areas for improvement

There were two issues of improvement identified within this standard.

Number of requirements:	2	Number of recommendations:	0
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5.4 Additional areas examined

5.4.1 Residents' views

We met with 13 residents. In accordance with their capabilities, residents expressed and indicated that they were happy and content with their life in the home.

Some of the comments made included statements such as:

- “You couldn’t ask for any better. I am very glad I came here”
- “The staff are all great”
- “It’s a lovely size of a home”
- “I am glad to be here, it’s just like being at home”
- “Everyone is very kind and the boss is great”.

5.4.2 Relatives’ views

We met one visiting relative in the home at the time of this inspection. This relative spoke with praise and gratitude for the provision of care and the kindness and support received from staff and registered manager.

5.4.3 Staff views

We spoke with four staff members of various grades, in addition to the registered manager. 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. Staff demonstrated to us that they were knowledgeable of the needs of individual residents.

5.4.4 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.

5.4.5 Staffing

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

- 1 registered manager
- 2 x senior 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 the size and layout of the home.

5.4.6 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 considered to be safe, effective and compassionate.

Number of requirements:	0	Number of recommendations:	0
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6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Feargal Lynn, the 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 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 16(1) Stated: First time To be completed by: 12 April 2016	A review must be put in place with all residents' care records. This review must consequently ensure that there is clear evidence of resident consultation in the assessment, care planning and review stages of care.		
	Response by Registered Person(s) detailing the actions taken: A review schedule is in place for all residents care records including documentary evidence of residents involvement in entire process.		
Requirement 2 Ref: Regulation 17 Stated: First time To be completed by: 12 April 2016	An annual quality assurance report must be put in place and maintained. This report must amongst other details include consultation with residents and their representatives.		
	Response by Registered Person(s) detailing the actions taken: A formal process of engagement with all residents and their representatives has been formulated to feed into a formal quality assurance report for incoming financial year.		
Registered Manager completing QIP	Feargal Lynn	Date completed	030316
Registered Person approving QIP	Feargal Lynn	Date approved	030316
RQIA Inspector assessing response	John McAuley	Date approved	03/03/16

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