



Unannounced Care Inspection Report 19 November 2019



Hob Green Country Home

Type of Service: Residential Care Home
Address: 41 Kirk Road, Ballymoney, BT53 8HB
Tel No: 028 2766 2620
Inspector: John McAuley

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 registered residential care home which provides care for up to nine residents within the categories of care detailed on its certificate of registration and in section 3.0 of this report.

3.0 Service details

Organisation/Registered Provider: Hob Green Country Home Responsible Individual: Elizabeth Kathleen Mary Lisk	Registered Manager and date registered: Averil Neilly Acting capacity
Person in charge at the time of inspection: Averil Neilly	Number of registered places: 9 Plus 4 places for day service
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE – Dementia MP (E) - Mental disorder excluding learning disability or dementia – over 65 years	Total number of residents in the residential care home on the day of this inspection: 9 plus 4 day care

4.0 Inspection summary

This unannounced inspection took place on 19 November 2019 from 10.00 to 13.20 hours.

The inspection assessed progress with all areas for improvement identified in the home since the last care inspection and sought to determine if the home was delivering safe, effective and compassionate care and if the service was well led with focus on the standard on staffing.

Evidence of good practice was found in relation to the teamwork between staff, their approach to residents in an individualised, unhurried manner and the positive impact of interventions from staff with residents in areas such as attending to personal care. Residents were seen to be treated as individuals and care was delivered in a person centred basis.

No areas of improvement were identified during this inspection.

Residents described living in the home as being a good experience/in positive terms. Residents unable to voice their opinions were seen to be relaxed and comfortable in their surrounding and in their interactions with others/with staff.

Comments received from residents, people who visit them and staff during the inspection, are included in the main body of this report.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and residents' 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 Averil Neilly, manager, as part of the inspection process and can be found in the main body of the report.

4.2 Action/enforcement taken following the most recent inspection dated 30 April 2019.

The most recent inspection of the home was an unannounced care inspection undertaken on 30 April 2019. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of this inspection.

5.0 How we inspect

To prepare for this inspection we reviewed information held by RQIA about this home. This included the findings from the previous inspections, registration information, and any other written or verbal information received, for example notification reports.

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

During the inspection a sample of records was examined which included:

- staff duty rota
- staff training schedule and training records
- two residents' records of care
- complaint records
- compliment records
- governance audits/records
- accident/incident records
- reports of visits by the registered provider/monthly monitoring
- RQIA registration certificate

Areas for improvements 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 the last care inspection dated 30 April 2019

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 27(4)(f) Stated: First time	The registered person shall ensure that all staff are in receipt of up-to-date fire safety drills.	Met
	Action taken as confirmed during the inspection: All staff are in receipt of up-to-date fire safety drills.	
Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011		Validation of compliance
Area for improvement 1 Ref: Standards 20.6 and 20.9 Stated: First time	The registered person shall revise the home's Statement of Purpose and Residents' Guide with details of the new managerial arrangements.	Met
	Action taken as confirmed during the inspection: These documents have been revised accordingly.	

6.2 Inspection findings

6.2.1 Staffing

Throughout this inspection residents advised that they felt safe in the home and well cared for. Residents also advised that staff attended to their needs in a prompt and caring manner.

The manager advised that the staffing levels are stable and are in keeping to the residents' dependencies. Staffing levels over the 24 hour period were discussed. General observations of care practices together with discussions with residents and staff confirmed that adequate staffing levels were in place.

Inspection of the duty rota confirmed that it accurately reflected the staff on duty at the time of this inspection.

A competency and capability assessment is completed for any member of staff with the responsibility of being in charge in the absence of the manager. A sample of one of these assessments was inspected and found to be appropriately in place.

Discussions with staff confirmed that they had received a comprehensive programme of induction on appointment. An inspection of the programme of supervisions and appraisals found these were being maintained in a regular and up-to-date basis for all staff. Staff spoke positively about this provision.

A system of monitoring the registration details of care staff with the Northern Ireland Social Care Trust (NISCC) was in place. This was being audited on a monthly basis.

6.2.2 The environment

The home was clean and tidy with good standard of furnishing and décor being maintained.

Communal areas were comfortable and nicely facilitated. Residents' bedrooms were suitably facilitated and nicely personalised. Toilets and bathrooms were clean and hygienic.

The grounds of the home were well maintained. There were no obvious health and safety risks observed in the internal and external environment.

6.2.3 Residents' views

The inspector met with all the residents in the home at the time of this inspection. All advised that they were very happy with the care provided, that staff were kind and supportive, they enjoyed the meals and that there was a nice atmosphere in the home.

Some of the comments made included statements such as:

- "Everything is very good. you won't find any problems here"
- "I love it here. There's nice company and its lovely and warm"
- "Everything is a 100% here"
- "The staff are lovely and kind"
- "I can't think of a single fault"
- "The meals are lovely"

6.2.4 Relative's views

One visiting relative voiced praised and gratitude for the provision of care and the kindness of staff in the home.

6.2.5 Care practices

Staff spoke positively about their roles and duties, training and managerial support. Staff advised that they believed a good standard of care was provided for and if there were any concerns they would have no hesitation in reporting these to management.

Staff were knowledgeable and had a good understanding of adult safeguarding principles. They were also aware of their obligations in relation to raising concerns about poor practice and whistleblowing.

Discussion with the manager, inspection of accident and incidents notifications, care records and complaints records confirmed that if there were to be any suspected, alleged or actual incidents of abuse these would be fully and promptly referred to the relevant persons and agencies for investigation in accordance with procedures and legislation and written records would be retained.

Staff advised that they were provided with mandatory training and additional training opportunities relevant to any specific needs of the residents. An inspection of staff training matrix confirmed this to be the case. Advice was given to ensure that all staff receive Deprivation of Liberty (DoLs) level 2 training.

The manager stated there were risk management procedures in place relating to the safety of individual residents and the home did not accommodate any individuals whose assessed needs could not be met.

The general atmosphere in the home was relaxed, homely and supportive. Residents were content, relaxed and at ease with their interactions with staff and their environment. Staff interactions were found to be polite, friendly and warm. Staff responded to residents' needs promptly and showed understanding of individual residents' needs.

6.2.6 Care records

A sample of two residents' care records was undertaken. These records were maintained in accordance with regulations and standards.

6.2.7 Accident and incidents

We reviewed the home's accident, incident and notifiable events policy and procedure and found that it included the reporting arrangements to RQIA. An inspection of these events confirmed that these were effectively documented and reported to RQIA and other relevant organisations in accordance with the legislation and procedures. A regular audit of accidents and incidents was undertaken and was inspected as part of the inspection process. The manager advised that learning from accidents and incidents was disseminated to all relevant parties and action plans developed to improve practice.

Areas of good practice

Areas of good practice were found in relation to feedback from residents, general observations of care practices and staffs' knowledge and understanding of residents' needs and prescribed interventions.

Areas for improvement

No areas of improvement were identified during this 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.



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