



The Regulation and
Quality Improvement
Authority

Fairways - Duncreegan
RQIA ID: 1339
Duncreegan
10 Mark Street
Portrush
BT56 8BT

Inspector: Ruth Greer
Inspection ID: IN022189

Tel: 02870824287
Email: soniabradley@fairways-ni.org.uk

**Unannounced Care Inspection
of
Fairways Duncreegan**

15 October 2015

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 15 October 2015 from 10 30 to 1 30. On the day of the inspection the home was found to be delivering safe, effective and compassionate care. The standard inspected was assessed as being fully met.

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 were no requirements or recommendations made as a result of the previous inspection in May 2015.

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: Tony Dunlop	Registered Manager: Sonia Bradley
Person in Charge of the Home at the Time of Inspection: Mrs Bradley – Mr Dunlop was present in the home for a period during the inspection	Date Manager Registered: Mrs Bradley has been manager of the home since July 1995
Categories of Care: RC-LD, RC-LD(E)	Number of Registered Places: 21
Number of Residents Accommodated on Day of Inspection: 20	Weekly Tariff at Time of Inspection: £426 - £528

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 1 Residents' involvement - 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: notifications of accidents/incidents

During the inspection the inspector met with ten residents, three care staff, two catering staff, one administrative staff, and one resident's representative.

The following records were examined during the inspection:

- Care notes (5)
- Minutes of residents meetings
- Satisfaction questionnaires
- Minutes of reviews
- Internal quality assurance documentation
- Staff induction records
- Standard Operating Policy
- Statement of purpose

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 12 May 2015. No requirements or recommendations were made as a result of that inspection.

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

Is care safe? (Quality of life)

The home had a comprehensive induction programme for all new staff. Our inspection showed that the induction template incorporates the values of good social care. The induction also sets out the importance of including families in all aspects of care.

Inspection of the training records showed that all mandatory training for staff is up to date. A training consultant was conducting a session on manual handling during this inspection. Residents' views are fully taken into account in all matters affecting them. Residents' meetings are held regularly the most recent on 13 July 2015. The minutes of that meeting reflected residents' opinions. One agenda item promoted the complaints procedure and residents were encouraged to express any dissatisfaction they may have with a staff member. Yearly reviews of care are undertaken by the community named worker. Minutes of the reviews were seen in the files we inspected. The minutes had been signed by the residents and/or their representative.

Is care effective? (Quality of management)

The manager has devised and implemented various quality assurance systems. One was an annual satisfaction questionnaire which is forwarded to residents and their relatives. We reviewed some of the completed questionnaires from the audit of June 2015. Comments were all very positive. One example "Staff care of my relative goes beyond the call of duty" The manager analyses the responses and uses this information in her overall quality assurance monitoring in the home. There are several policy documents which underpin the home's ethos and model of care.

The Statement of Purpose
Quality Policy Statement
Standard Operating Policy

Our inspection of these documents evidenced that quality is the underlying principle of the homes care delivery. The documents reflected the expectations of the management in regard to staff practice. For example "Staff will acknowledge the intrinsic value of people by promoting their uniqueness and self-esteem" The Standard Operating Policy sets out the core values of independence, risk taking, equality, rights, dignity, respect and privacy.

Is care compassionate? (Quality of care)

There were 13 residents in the home for the duration of this inspection. One resident who has lived in the home for many years had deteriorated since the previous inspection. We observed staff providing care for this resident in a gentle, friendly and compassionate manner. Staff with whom we spoke felt that care in the home is compassionate. The practice observed on the day was caring, friendly and respectful.

Areas for improvement

There were no areas of improvement noted and the standard inspected is assessed as met.

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

5.3.1. Residents

We spoke with all the residents in the home at the time. All spoke positively about the care they receive and their life experience. Residents were involved in the daily tasks. For example one resident was helping in the kitchen and one resident was setting tables for lunch. There was a feeling from the residents that this is truly “their home”. Residents demonstrated a good rapport with staff. Comments made by residents included the following-

“I’m still happy here”

“I went out with X (staff member) and got lovely new clothes”

“I like the dinners”

“I like my bedroom”

5.3.2 Relatives

One relative was visiting and was happy to share his/her views. The relative stated that his loved one had “vastly improved” due to the care provided by the home. The relative stated that he/she was always welcome and kept fully informed of the progress of his family member. The relative stated –

“How could you not say great things about this home – the girls (staff) are angels”

5.3.3 Staff

On the day the following staff were on duty –

Manager x 1

Senior care assistant x 1

Care assistant x 2

Domestic x 2

Catering x 2

Administrative x 2

The manager confirmed that this is satisfactory to meet the needs and numbers of persons accommodated.

Staff with whom we spoke reported that they feel a good standard of care is provided for residents and ample training opportunities for themselves. Staff stated that they feel supported by management and they are aware that residents’ rights and preferences are the basis of all care provided. Observation of staff practice found it to be caring and respectful and delivered at the resident’s pace. One staff member stated-

“We all know that anything less than the very best for these residents is not acceptable, Sonia (manager) just wouldn’t have it”

5.3.4 Environment

The environment internally was found to clean and fresh smelling. There are several lounge areas with a variety of seating arrangements to suit individual residents. Residents have personalised their bedrooms. There were no hazards noted on our inspection of the home.

5.3.5 Complaints

There have been no complaints recorded since the previous inspection

5.3.6 Accidents/incidents

Inspection of the accident record showed that these have been responded to and recorded appropriately.

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 within this report do not absolve the registered person/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 person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Sonia Bradley	Date Completed	22/12/15
Registered Person	Tony Dunlop	Date Approved	22/12/15
RQIA Inspector Assessing Response	Ruth Greer	Date Approved	06/01/16

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

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