



The Regulation and
Quality Improvement
Authority

Anniscliff House
RQIA ID: 1340
141 Moneysharvin Road
Maghera
BT46 5HZ

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**Unannounced Care Inspection
of
Anniscliff House

14 January 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 14 January 2016 from 10:30pm 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 for 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 Persons: Bernadette Mc Gilligan and Jacqueline Davies	Registered Manager: Bernadette Mc Gilligan
Person in charge of the home at the time of inspection: Bernadette Mc Gilligan	Date manager registered: 1 April 2005
Categories of care: RC-MP, RC-LD(E), RC-DE, RC-I, RC-MP(E)	Number of registered places: 17
Number of residents accommodated on day of inspection: 14	Weekly tariff at time of inspection: £470

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 previous inspection report and notifications of incidents and accidents.

We met with 14 residents, two visiting relatives, four members of staff and the registered manager. Verbal feedback of the findings of the inspection was given to the registered manager and Mrs Rosemary O'Kane, the proprietor.

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

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 22 September 2015. The completed QIP was returned and was approved by the care inspector.

5.2 Review of Requirements and Recommendations from the Last Care Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 30 (1) (d)	Any incident of verbal outbursts or challenging behaviour that affects residents must be reported to RQIA.	Met
	Action taken as confirmed during the inspection: An inspection of the home's incident records from 22 September 2015 to date of inspection, together with an inspection of a sample of three residents' care records found that incidents were appropriately reported.	

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 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' meetings are held on a regular basis. Residents' views and wishes were actively sought and recorded. The record of these meetings for 5 January 2016 and 23 November 2015 were inspected. These were found to be maintained satisfactory with agreed actions delegated as necessary. Added to this agreed actions or issues raised by residents were duly recorded in the three residents' care records inspected.

The record of the staff meeting on 16 January 2016 was inspected. This record contained evidence that residents' views, comments and suggestions were discussed and care planned with staff.

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.

The annual quality assurance report for 2015 was in place. This document incorporated the views of residents and their representatives.

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, a suggestion box, and record of 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.

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 confirmed that residents were listened to and their views were responded to.

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 14 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:

- "I love it here"
- "You couldn't ask for any better"
- "They are all great here"
- "The food is lovely"
- "The care is very good".

5.4.2 Relatives' Views

We met two visiting relatives in the home at the time of this inspection. Both relatives spoke with praise and gratitude for the provision of care and the kindness and support received from staff. Both relatives talked about how they were kept well informed of any issues and were reassured about the standard of care provided.

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.

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.

Residents' bedrooms were personalised and comfortable.

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 care assistant
- 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 Accident/ Incident Reports

An inspection of these reports from 22 September 2015 to the date of this inspection was undertaken. These were found to be appropriately recorded and reported.

The registered manager reported to us that one incident, as dated 25 December 2015, is under investigation with the Northern Health and Social Care Trust.

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 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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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.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	BERNADETE MC GILLIGAN	Date Completed	14/3/16
Registered Person	BERNADETTE MC GILLIGAN	Date Approved	14/3/16
RQIA Inspector Assessing Response	John McAuley	Date Approved	18/3/16

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

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