

# Unannounced Inspection Report 18 February 2020



## Hillview

**Type of Service: Residential Care Home**  
**Address: 182a Moyarget Road, Ballycastle, BT54 6JQ**  
**Tel No: 028 2075 2058**  
**Inspector: Helen Daly**

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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 Residential Care Homes Minimum Standards, August 2011.

## 1.0 What we look for



## 2.0 Profile of service

This is a residential care home which is registered to provide care for up to three residents with care needs as detailed in Section 3.0

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Hillview  <b>Responsible Individual:</b> Mrs Mary Elizabeth McAllister	<b>Registered Manager:</b> Mr Denis John McAllister
<b>Person in charge at the time of inspection:</b> Mrs Anne-Marie McTaggart, Care Assistant	<b>Date manager registered:</b> 1 April 2005
<b>Categories of care:</b> Residential Care (RC) LD – learning disability LD(E) – learning disability – over 65 years PH – physical disability other than sensory impairment PH(E) - physical disability other than sensory impairment – over 65 years	<b>Number of registered places:</b> 3  RC-LD and RC-LD(E) with associated physical disability

### 4.0 Inspection summary

An unannounced inspection took place on 18 February 2020 from 11.35 to 13.25.

The inspection assessed progress with any areas for improvement identified during and since the last care inspection and to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to the management of medicines, the home's environment and communication between residents and staff.

No areas for improvement were identified at this inspection.

Residents said that they enjoyed living in the home. They were observed to be relaxed and comfortable.

Comments received from residents 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 resident's experience.

#### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Anne-Marie McTaggart, Care Assistant, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

#### 4.2 Action/enforcement taken following the most recent inspection dated 6 June 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 6 June 2019. 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 last inspection findings in relation to care and medicines management and any other written or verbal information received.

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

We met with three residents and one care assistant.

Questionnaires and 'Have We Missed You?' cards were provided to give residents and those who visit them the opportunity to contact us after the inspection with views of the home.

A poster was provided for staff detailing how they could complete an electronic questionnaire.

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

- personal medication records and medication administration records
- the management of medication changes and antibiotics
- medicine management audits
- care plans
- care reviews and resultant action plans
- RQIA registration certificate

Areas for improvement identified at the last care inspection were reviewed and the 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 most recent care and medicine management inspections

Areas for improvement from the most recent care inspection dated 6 June 2019		
Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011		Validation of compliance
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 11.5  <b>Stated:</b> First time	The registered person shall record in the outcome of care review meetings confirmation that any agreed actions had been acted upon and by whom.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> We reviewed the records of care review meetings. The details of who had implemented the agreed actions were recorded.	

There were no areas for improvement identified as a result of the most recent medicines management inspection on 12 June 2018.

## 6.2 Inspection findings

### 6.3 Is care safe?

**Avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.**

On arrival we were greeted by the care assistant who was the person in-charge of the home throughout the inspection. She advised that she felt that there were enough staff to meet the needs of the residents and this was evidenced during the inspection. The resident we spoke with said that they felt well looked after in the home. Residents' needs and requests for assistance were observed to be met in a timely and caring manner.

The home was observed to be clean and warm. All areas inspected were appropriately decorated, clean and fresh smelling. Corridors were free from trip hazards and equipment/cleaning products were stored in areas not accessed by residents. Bedrooms were tastefully decorated.

We reviewed the personal medication records and medication administration records and found that they had been appropriately maintained. Medicines were observed to be stored securely.

### Areas of good practice

There were examples of good practice found throughout the inspection in relation to medicines management and the home's environment.

### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

## 6.4 Is care effective?

**The right care, at the right time in the right place with the best outcome.**

There was evidence that robust systems were in place to manage the ordering of prescribed medicines to ensure adequate supplies were available and to prevent wastage. Antibiotics and newly prescribed medicines had been received into the home without delay and appropriate records maintained.

The audits we completed evidenced that medicines were administered as prescribed.

We reviewed the midday meal in the kitchen/dinette. The dining table was laid appropriately. Food was served directly from the cooker when residents were ready to eat their meal. The care assistant wore an apron and chatted with residents when serving and assisting with the meal. The food served appeared nutritious and appetising.

### Areas of good practice

There were examples of good practice found throughout the inspection in relation to the timely availability of newly prescribed medicines and antibiotics, communication between residents and staff and the encouragement provided by staff to ensure that residents received a nutritious meal.

### Areas for improvement

No areas for improvement were identified during this inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

## 6.5 Is care compassionate?

**Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.**

The administration of medicines to residents had been completed before we arrived in the home. The care assistant advised that residents were given time to take their medicines and medicines were administered as discreetly as possible.

We spoke with three residents. One resident told us that they enjoyed living in the home and that residents were well looked after.

Residents who were unable to express their views were observed to be relaxed and comfortable.

Staff spoke with residents in a manner that was sensitive and understanding of their needs. The care assistant advised that staff were aware of each resident's likes and dislikes and that activities were tailored accordingly.

One resident was assisted to complete a questionnaire. They indicated that they were 'very satisfied' with the care provided by staff in the home.

### Areas of good practice

There were examples of good practice found throughout the inspection in relation to ensuring that residents enjoyed a nutritious meal, listening to and valuing residents and taking account of the views of residents.

### Areas for improvement

No areas for improvement were identified at the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

## 6.6 Is the service well led?

**Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.**

The care assistant advised that there had been no medication related incidents since the last inspection and that staff were aware of how to identify incidents which would then be reported to the registered manager for investigation and follow up. Weekly audits were completed by the care staff.

We discussed the Mental Capacity Act (Northern Ireland) 2016 and the Deprivation of Liberty Safeguards. The care assistant advised that she had completed Level 3 training and that all staff will complete this training before March 2020.

The care assistant advised that she felt that residents were well cared for in the home and that staff were aware of how to report any concerns regarding residents' care. Comments included:

- "I love working here. There is so much job satisfaction. It is like an extended family. We do our best for the residents and we get great support from the owners."

### Areas of good practice

There were examples of good practice found in relation to meeting residents' needs and maintaining good working relationships.

### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	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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