



# **Unannounced Care Inspection Report 16 January 2020**



## **Croft Lodge**

**Type of Service: Residential Care Home**

**Address: 6 Woodcroft Lane, Oldpark Road, Ballymena BT42 1FZ**

**Tel no: 02825637799**

**Inspector: Marie-Claire Quinn**

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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 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 five residents who have been assessed as requiring care under the categories listed in section 3.0 below.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Croft Lodge  <b>Responsible Individual:</b> Sharon Magee	<b>Registered Manager and date registered:</b> Arthur John Magee 1 April 2005
<b>Person in charge at the time of inspection:</b> Arthur John Magee	<b>Number of registered places:</b> 5
<b>Categories of care:</b> Residential Care (RC) I - Old age not falling within any other category DE – Dementia MP - Mental disorder excluding learning disability or dementia MP (E) - Mental disorder excluding learning disability or dementia – over 65 years LD - Learning Disability	<b>Total number of residents in the residential care home on the day of this inspection:</b> 5

### 4.0 Inspection summary

An unannounced inspection took place on 16 January 2020 from 10.50 hours to 13.45 hours.

This inspection was undertaken by the care inspector.

The inspection assessed progress with all areas for improvement identified in the home during and 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.

Evidence of good practice was found in relation to the relaxed, homely and welcoming atmosphere in the home and the positive interactions between residents, staff and visitors.

No areas for improvement were identified during this inspection.

Residents told us they liked living in the home and that they were content and felt well looked after.

Comments received from residents 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 Arthur John Magee, manager, and Sharon Magee, responsible individual, 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 20 June 2019

The most recent inspection of the home was an unannounced care inspection undertaken on 20 June 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 care inspection and any other written or verbal information received, for example serious adverse incidents.

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

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. We received a response from one individual, who confirmed they were very satisfied that the care in the home was safe, effective and compassionate and that the service was well-led. No specific comments about the home were made.

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

- the care records of five residents
- fire risk assessment dated 19 November 2019
- food hygiene certificate dated 5 December 2019
- 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 20 June 2019

Areas for improvement from the last care inspection		
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 6.2  <b>Stated:</b> First time	The registered person shall ensure that an individual care plan includes details of the management of any identified risks and strategies or programmes to manage specified behaviours. This is specifically in relation to support resident's to maintain positive mental health.  Ref: 6.4	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Review of care records confirmed this had been addressed. Please see section 6.2.5 for further information.	

## 6.2 Inspection findings

### 6.2.1 Environment

On arrival to the home we were immediately greeted by the manager. One of the residents was receiving a visitor and it was lovely to see them chatting in the lounge with other residents present.

The home was clean, tidy and warm. Bedrooms and communal areas were well maintained and decorated to a high standard. Residents told us they liked their rooms and always got a good night's sleep due to the peace and quiet.

There were no obvious health and safety hazards in the home. Review of the home's most recent fire safety risk assessment confirmed the home had been assessed as compliant.

### **6.2.2 Care Delivery**

A local hairdresser visits the home on a weekly basis and one resident was getting her hair done when we arrived. All residents looked well-presented and looked after, in clean, comfortable clothing. Some residents required walking aids, which were well maintained. Staff were visible and quick to provide assistance if required.

There were lovely, relaxed interactions between staff and residents. Residents appeared at ease around staff, and there was a family style atmosphere. When we spoke with residents, they confirmed they felt happy living in the home and that they were well looked after. Residents also confirmed they would not hesitate to approach staff if any concerns, and were confident that any issues would be dealt with quickly.

Discussion with staff confirmed that there were sufficient arrangements for the partial implementation of the Mental Capacity Act (NI) 2016. The home continues to liaise with Health and Social Care Trusts to review these arrangements.

### **6.2.3 Dining Experience**

We sat with residents while they enjoyed their lunch time meal of fish fingers, mashed potato and baked beans. The food was well presented and looked appetizing. Residents enjoyed their food and told us all the meals provided by the home were great. Residents confirmed they got enough to eat, and had a good variety of meals they enjoyed.

Food was freshly prepared in the home. The manager outlined how they vary the menu, with occasional treats such as a fry on a Friday.

Residents were able to tell us about their specific likes and dislikes; this was reflected in the care records we reviewed.

The home had also recently received a food hygiene rating of 5 stars.

### **6.2.4 Activities**

Residents told us how they liked to spend their time, which included having visitors, going for a walk, watching television, reading the newspaper and playing word games.

One resident has the option of attending day opportunities, and they decide on the day whether they would like to go.

Resident's religious and spiritual needs are supported in the home with visits from local clergy, Bible reading, listening to gospel music or watching Songs of Praise.

### **6.2.5 Care Records**

An area for improvement had been made at the previous care inspection regarding specific care plans for residents requiring support to manage their mental health. Review of care records confirmed this was now in place. This area for improvement has been met.

### Areas of good practice

There were examples of good practice found throughout the inspection in relation to the relaxed, homely and welcoming atmosphere in the home and the positive interactions between residents, staff and visitors.

### Areas for improvement

No areas for improvement were identified during the 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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