



Unannounced Care Inspection Report 24 October 2019



The Roddens

Type of Service: Residential Care Home

**Address: 22 Queen Street, Newal Road,
Ballymoney, BT53 6JB**

Tel No: 028 2766 3520 or 028 9442 6273

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 29 residents.

3.0 Service details

Organisation/Registered Provider: Northern HSC Trust Responsible Individual(s): Anthony Baxter Stevens	Registered Manager and date registered: Philip Dawson 27 November 2017
Person in charge at the time of inspection: Philip Dawson	Number of registered places: 28
Categories of care: Residential Care (RC) I - Old age not falling within any other category	Total number of residents in the residential care home on the day of this inspection: 19

4.0 Inspection summary

This unannounced inspection took place on 24 October 2019 from 09.00 hours to 12.00 hours.

The inspection sought to determine if the home was delivering safe, effective and compassionate care and if the service was well led, with particular focus on staffing.

Evidence of good practice was found in relation to the organised, unhurried care practices and staff and management's knowledge and understanding of residents' needs. Good practice was also found in relation to the upkeep of the environment and the nice ambience and atmosphere in the home.

No areas requiring improvement were identified during this inspection.

Residents described living in the home as being a good experience/in positive terms. Some of the comments made included statements such as; "I love it here. This is a lovely home" and "I am very happy and well cared for here".

Comments received from residents and staff during and 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 Philip Dawson, registered 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 16 April 2019

The most recent inspection of the home was an unannounced care inspection undertaken on 16 April 2019.

No further actions were required to be taken following the most recent inspection on 16 April 2019.

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, such as notifiable 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
- staff recruitment and induction record
- complaint records
- compliment records
- governance audits / records
- accident / incident records
- reports of visits by the registered provider / monthly monitoring reports
- RQIA registration certificate

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 16 April 2019

There were no areas for improvements made as a result of the last care inspection.

6.2 Inspection findings

6.2.1 Staffing

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

The manager advised that the staffing levels are very 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.

Catering, housekeeping, laundry and administration staff are in place to meet these aligned roles and duties.

Agency staff are used to cover deficits in the staff rota. It was advised that it is regular agency staff and they receive an induction to the home. Discussions with one agency care assistant confirmed this to be the case. Added to this, the staff member stated that they felt included in the team of staff and handover information.

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.

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

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 with some nicely personalised. Bedlinen, duvets, and pillows were of a nice quality. Toilets and bathrooms were clean and hygienic.

The home was appropriately heated and fresh smelling.

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 15 residents in the home at the time of this inspection. All advised that they were very happy with the care provided, that staff acted with kindness and support, they enjoyed the meals and that there was a nice atmosphere in the home.

Some of the comments made included statements such as:

- "I love it here. This is a lovely home"
- "I am very happy and well cared for here"
- "It's like a hotel"
- "I just love it here. The food, care and staff are great"
- "No problems what-so-ever. You won't find any either"
- "I am really glad to be here. I have done very well here and feel much better for coming in"
- "This is just a marvellous place"
- "There couldn't be any complaints here. The staff are very caring"
- "It's first class here. Everything is very good".

6.2.4 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. One of the comments made by staff included the statement:

- "The care here is excellent. I would have no problems with my mother or father being cared for here".

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.

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.

A visit by the registered provider was undertaken as required under Regulation 29 of The Residential Care Homes Regulations (Northern Ireland) 2005. The reports of the two most recent visits (17 September 2019 and 28 August 2019) were inspected and found evidence to support good governance.

6.2.5 Accident and incidents

The home's accident, incident and notifiable events policy and procedure included 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

There were no areas of improvement identified.

	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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