



The **Regulation** and
Quality Improvement
Authority

Unannounced Care Inspection Report 29 February 2020



Arbour House

Type of Service: Residential Care Home
Address: 16 Great George's Street South,
Warrenpoint, BT34 3HR
Tel no: 028 4177 4181 / 028 4175 2200
Inspector: Priscilla Clayton

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 residential care home which is registered with RQIA to provide care for a maximum of two residents with a learning disability. The service provided is currently weekend respite for two nights.

3.0 Service details

Organisation/Registered Provider: Arbour House Management Committee Responsible Individual(s): Anne Woods	Registered Manager and date registered: Joanne McDonald 22 January 2014
Person in charge at the time of inspection: Joanne McDonald, Manager.	Number of registered places: 2
Categories of care: Residential Care (RC) LD - Learning Disability LD (E) – Learning disability – over 65 years	Total number of residents in the residential care home on the day of this inspection: 2

4.0 Inspection summary

An unannounced inspection took place on 29 February 2020 from 10.00 to 11.30 hours.

Residents said they always looked forward to their weekend respite stay at Arbour House and how much they enjoyed meeting up with friends and taking part in the good fun and activities organised.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and resident 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 Joanne McDonald, 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 care inspection

No further actions were required to be taken following the most recent inspection on 18 May 2019.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included findings from the previous care and medicines inspect reports and any other written or verbal information received:

During the inspection we met with two residents and three staff including the manager.

The following areas were examined during the inspection:

- environment
- meals and mealtimes
- provision of activities
- complaints/compliments records
- accidents/incidents
- two care records

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 previous care and medicines inspections

There were no areas for improvement identified as a result of the last care inspection.

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

6.2 Inspection findings

Staffing

The homes staffing levels for the provision of care for residents in receipt of their respite care was discussed and found to be satisfactory. The staff duty roster reflected staffing as explained by the manager. We could see that there was sufficient staff on duty to provide care for the two residents accommodated.

Residents told us always looked forward to coming to Arbour House for respite care. They explained they were very well looked after by staff and that their views, choices and preferences were acknowledged and granted in as far as was possible.

Care records

Two care records were reviewed and discussed with the manager. Records were found to be detailed with all necessary documentation included. Residents, interests, choices and preferences were reflected within person centred care plans.

Meals and mealtimes

The manager advised that breakfast was cooked in the home while the main meal of the day was usually enjoyed when residents were out and about on accompanied visits with staff. There was sufficient food stored within the kitchen and residents told us they had plenty of food while staying in Arbour House.

Activities

Residents told us they discuss and agree their activity plans for the weekend with staff. Care staff advised that residents choose to go to Newcastle, accompanied by staff, for the day and that travel was provided. Evenings were usually spent watching chosen DVD or television programmes.

Residents told us they really looked forward to their respite time at Arbour where they enjoyed getting out and about and having fun in the amusements and doing some shopping.

Records of activities provided were retained.

Complaints and compliments

No complaints were received since the previous inspection.

Many complementary cards and letters were received about the good care and attention which residents received during their weekend respite.

Accidents/incidents

Review of accident and incident records evidenced that none had occurred since the previous inspection. This was also confirmed by the manager.

Environment

All areas of the home were inspected. A good standard of cleanliness, decoration and furnishing was observed.

Several improvements had been made to the environment since the previous inspection. For example; kitchen refurbished, wet room updated, redecoration of all rooms and new bedroom furniture installed. The manager was commended on the improvements made.

Areas of good practice

There was evidence of good practice in regard to the overall care and attention provided for residents including, effective communication, and provision of agreed plans for the weekend, maintenance of care record and management which was well led.

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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