



Unannounced Care Inspection Report 20 January 2020



Seafort House

Type of Service: Residential Care Home
Address: 6 Queen Street, Warrenpoint BT34 3HZ
Tel no: 028 4175 2200
Inspector: Alice McTavish

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 13 residents.

3.0 Service details

Organisation/Registered Provider: Seafort House Responsible Individual: Rhoda Elizabeth McDonald	Registered Manager and date registered: Joanne McDonald 1 April 2015
Person in charge at the time of inspection: Oonagh McDonald, senior care assistant	Number of registered places: 13
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: 12

4.0 Inspection summary

An unannounced care inspection took place on 20 January 2020 from 12.05 to 15.00 hours.

The inspection assessed progress with all areas for improvement identified in the home during the last care inspection and obtained to views of residents regarding their experience of living in Seafort House.

Evidence of good practice was found in relation to the compassionate nature of the care provided to residents. No areas requiring improvement were identified.

Residents described living in the home in positive terms. Residents less able to voice their opinions were seen to be relaxed and comfortable in their surroundings and in their interactions with other residents and staff.

Comments received from residents during and after 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 Oonagh McDonald, person in charge, 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 13 May 2019

The most recent inspection of the home was an unannounced care inspection undertaken on 13 May 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 last care inspection, registration information, 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

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.

Nine residents completed and returned questionnaires to RQIA. All respondents indicated a high level of satisfaction with the care and services provided in the home. The comments received are included in the body of this report. No questionnaires were returned by staff.

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

- three residents' records of care
- individual written agreements for three residents
- accident/incident records from June 2019 to January 2020
- 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 13 May 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
Area for improvement 1 Ref: Standard 6.6 Stated: First time	The registered person shall ensure the following: <ul style="list-style-type: none"> Care plans and risk assessments are reviewed regularly The care plan of one identified resident is updated to include the application of a skin cream Ref: 6.3	Met
	Action taken as confirmed during the inspection: Inspection of three care plans and risk assessments confirmed that these were reviewed regularly. The identified resident no longer lived in the home. A review of the care plans for two other residents who have skin creams applied confirmed that these were up to date.	
Area for improvement 2 Ref: Standard 4.6 Stated: First time	The registered person shall ensure that residents' written agreements are kept up to date. Ref: 6.4	Met
	Action taken as confirmed during the inspection: Inspection of a sample of individual written agreements confirmed that these were up to date.	

6.2 Inspection findings

We saw that the home was warm, clean, tidy and comfortably furnished.

We sat with residents and staff for a portion of the afternoon whilst they participated in exercises and games and chatted.

The inspection took place on the day of the funeral of a former resident. We spoke with six residents, including two who come to Seafort House for respite care, who told us that they were happy living in Seafort House.

We also spoke with staff who described how the team had supported residents to attend the funeral or to watch a live streaming of the funeral from the comfort and security of Seafort House, according to the abilities and preferences of residents. It was evident that staff had consulted with residents and had planned the day around the individual needs of residents. This represented good practice and was to be commended.

Some comments made by residents are as follows:

- “Things are going very well for me. I’m sad about (our friend). We try to remember that he is looking down on us and wants us to be happy, so no more tears.”
- “I’m glad I came here to live. Everyone is very good to me.”
- “I like it here. I know some people from when we go to the Gateway Club. It’s good fun here.”

Nine residents completed and returned questionnaires to RQIA. The comments received are as follows:

- “I am happy living in Seafort House.”
- “The care is great.”
- “I live Seafort House, I feel very safe.”
- “I have been a resident here for so long and am so happy.”
- “I am very happy living in Seafort House.”
- “All the staff is like my family, I have good friends at Seafort House.”
- “Everything is good, I love it.”
- “Seafort House is brilliant. I am happy. I have no concerns.”

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the sensitivity of staff in planning care on a particularly difficult day for residents and for staff.

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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