

Inspection Report

14 September 2021



Hebron House

Type of Service: Residential Care Home
Address: 84-86 Main Street, Markethill, BT60 1PL
Tel no: 028 3755 1357

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider: Inspired 2 Care Limited	Registered Manager: Mrs Emma Rafferty
Responsible Individual: Mrs Rosemary Dilworth	Date registered: 20 May 2021
Person in charge at the time of inspection: Mrs Emma Rafferty	Number of registered places: 21
Categories of care: Residential Care (RC) MP - Mental disorder excluding learning disability or dementia LD - Learning Disability LD (E) – Learning disability – over 65 years	Number of residents accommodated in the residential care home on the day of this inspection: 7
Brief description of the accommodation/how the service operates: This home is a registered Residential Care Home which provides health and social care for up to 21 residents. The home operates over three floors. All residents have access to communal spaces and an enclosed garden area outside.	

2.0 Inspection summary

An unannounced inspection took place on 14 September 2021 between 10.20 and 3.45pm by a care inspector.

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

The home was found to be clean and resident bedrooms were observed to be warm and personalised with items of memorabilia.

Staffing arrangements were found to be safe and effective and adjusted if required. Staff were seen to be professional and polite as they conducted their duties and told us that they were supported in their roles with training and resources.

Residents were seen to be well looked after. There was clear evidence of attention to personal care and dressing and for those residents who required assistance with mobility and meals; this was provided by staff in a prompt and compassionate manner.

Residents expressed positive opinions about the home and the care provided. Residents told us that staff were friendly and that they were satisfied with the food provided.

Feedback from residents and staff indicated that they were very satisfied with the care and service provided at Hebron House.

Based on the inspection findings RQIA were assured that the delivery of care and services provided in Hebron House was safe, effective, and compassionate and that the service was well led.

The findings of this report will provide the management team with the necessary information to improve staff practice and the residents' experience.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this home. This included registration information, and any other written or verbal information received from residents, relatives, staff or the Commissioning Trust.

Throughout the inspection RQIA will seek to speak with residents, their relatives or visitors and staff for their opinion on the quality of the care and their experience of living, visiting or working in this home.

Questionnaires and 'Tell Us' cards were provided to give residents and those who visit them the opportunity to contact us after the inspection with their views of the home. A poster was provided for staff detailing how they could complete an on-line questionnaire.

The daily life within the home was observed and how staff went about their work.

A range of documents were examined to determine that effective systems were in place to manage the home.

The findings of the inspection were discussed with the manager at the conclusion of the inspection.

4.0 What people told us about the service

We met with seven residents and five staff either individually or in small groups.

Residents told us that they were satisfied with the care delivery in the home. They described staff as "good" and "very kind." and said that there was enough staff available and that they get help and assistance when they need it. Observation during the inspection indicated that residents' needs were met.

Staff spoke positively about working in the home and advised there was good team work within the home. Staff spoken with advised that they were very happy with the current management arrangements and could see that the manager was keen to ensure a high standard of care delivery for the residents and drive improvements in the home.

Six questionnaires were returned following the inspection from residents. All of the responses indicated that they were satisfied with the care provided in the home.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

The last inspection to Hebron House was undertaken on 11 March 2021 by a care inspector; no areas for improvement were identified.

5.2 Inspection findings

5.2.1 Staffing Arrangements

Safe staffing begins at the point of recruitment. Review of a sample of employee recruitment records evidenced that robust systems were in place to ensure that residents are protected.

There were systems in place to ensure staff were trained and supported to do their job. For example, staff received regular training in a range of topics including moving and handling, fire safety and first aid. Staff confirmed that they were provided with relevant training to enable them to carry out their roles and responsibilities effectively. There was a planner in place to ensure that staff received regular supervision and appraisal.

The staff duty rota accurately reflected all of the staff working in the home on a daily basis. The duty rota identified the person in charge when the manager was not on duty. Staff told us that there was enough staff on duty to meet the needs of the residents. The manager and staff told us that the number of staff on duty was regularly reviewed to ensure that the needs of the residents were met.

Competency and capability assessments were completed for staff left in charge of the home when the manager was not on duty.

Staff were appropriately registered with their professional body and systems were in place to ensure this remained live. Newly appointed care staff were supported to register with the Northern Ireland Social Care Council (NISCC).

It was noted that there was enough staff in the home to respond to the needs of the residents in a timely way. Staff said there was good team work and that they felt well supported in their role, were satisfied with the staffing levels and the level of communication between staff and management. Staff told us that the residents' needs and wishes were very important to them. It was observed that staff responded to residents' requests for assistance promptly and in a caring and compassionate manner.

Residents said that staff were always available to assist and that they were kind to them.

5.2.2 Care Delivery and Record Keeping

When we walked around the home; the atmosphere was calm and relaxed. We observed residents able to walk around freely and light music was playing in the background.

Staff met at the beginning of each shift to discuss any changes to the needs of the residents. In addition, residents' care records were maintained which accurately reflected the needs of the residents. Staff were knowledgeable of individual resident's needs, their daily routine, wishes and preferences.

It was observed that staff respected resident privacy by their actions such as knocking on doors before entering, discussing residents' care in a confidential manner, and by offering personal care to residents discreetly.

Staff were observed to be prompt in recognising residents' needs and any early signs of distress, including those residents who had difficulty in making their wishes or feelings known. Staff were skilled in communicating with residents; they were respectful, understanding and sensitive to residents' needs.

Examination of records and discussion with the manager and staff confirmed that the risk of falling and falls were well managed.

Good nutrition and a positive dining experience are important to the health and social wellbeing of residents. We observed the dining experience and noted that there was choice of meals being offered; the food was attractively presented and smelled appetising, and good portions were provided. The daily menu was on display for the residents; the tables were set with condiments and a variety of drinks were available. Residents said that they had enjoyed their meal and the company of others. Residents could also choose to take their meals in their own rooms if they wished.

The dining experience was calm and unhurried. It was observed that residents were enjoying both their meal and the overall dining experience. Supervision and support from staff was readily available where this was required.

Staff told us how they were made aware of residents' nutritional needs and confirmed that residents' care records were accurately maintained to help ensure that staff had an accurate understanding of residents' nutritional needs.

There was evidence that residents' weights were checked at least monthly to monitor weight loss or gain.

Residents' needs were assessed at the time of their admission to the home. Following this initial assessment care plans were developed to direct staff on how to meet residents' needs; and included any advice or recommendations made by other healthcare professionals. Residents care records were held confidentially.

Care records were well maintained, regularly reviewed and updated to ensure they continued to meet the residents' needs. Residents, where possible, were involved in planning their own care and the details of care plans were shared with residents' relatives, if this was appropriate.

Residents' individual likes and preferences were reflected throughout the records. Care plans were detailed and contained specific information on each residents' care needs and what or who was important to them.

Daily records were kept of how each resident spent their day and the care and support provided by staff. The outcome of visits from any healthcare professional was recorded.

Residents looked well cared for in that they were well dressed with attention to detail in regards to personal appearance.

Staff reported that the care provided to the residents was of a high standard and was person centred.

5.2.3 Management of the Environment and Infection Prevention and Control

Observation of the home's environment evidenced that residents' bedrooms were personalised with items important to the residents. Bedrooms and communal areas were suitably furnished, clean and tidy; and comfortable. Residents could choose where to sit or where to take their meals and staff were observed supporting residents to make these choices. Fire exits and corridors were observed to be clear of clutter and obstruction.

We spoke with the manager about refurbishment plans in the home and we were advised that there is a plan in place which includes new furniture, flooring and repainting.

Appropriate precautions and protective measures were in place to manage the risk of infection. The home is participating in the regional testing arrangements for residents and staff and any outbreak of infection was reported to the Public Health Authority (PHA).

Review of records, observation of practice and discussion with staff confirmed that effective training on infection prevention and control (IPC) measures and the use of Personal Protective Equipment had been provided.

Staff were observed to carry out hand hygiene at appropriate times and to use PPE in accordance with the regional guidance. Staff use of PPE and hand hygiene was regularly monitored by the manager and records were kept.

Visiting arrangements were managed in line with Department of Health guidance.

Domestic staff reported that they followed a detailed schedule of daily cleaning and that all points which were frequently touched by residents or staff were cleaned daily.

5.2.4 Quality of Life for Residents

Residents said that they were able to choose how they spent their day; they could get up or go to bed when they wished, wear what they wanted and spend time in their own rooms or in the lounges. In the morning we observed staff undertaking individual activities with residents such as reminiscence therapy or painting activities, while other residents preferred to stay in their room.

Residents were offered choices throughout the day; from where and how they wish to spend their time, what they ate and drank and what activities they wished to participate in.

Staff recognised the importance of maintaining good communication with families, especially whilst visiting was suspended due to the COVID-19 pandemic. Staff assisted residents to make phone or video calls.

Residents said the range of available activities within the home kept them occupied during the day. Staff said that they enjoyed participating in activities with the residents.

5.2.5 Management and Governance Arrangements

There has been a change to management arrangements for the home since the last inspection. Mrs Emma Rafferty is the manager of Hebron House. Staff were aware of who the manager of the home was, their own role in the home and how to raise any concerns about residents, care practices or the environment.

Staff commented positively about the manager and described her as approachable and always available for guidance. Staff were particularly appreciative of the smooth transition of the management arrangements and the practical and emotional support provided to them during this period.

There was evidence that a system of auditing was in place to monitor the quality of care and other services provided to patients. Where deficits were identified the audit process included an action plan with the person responsible for completing the action, a time frame for completion and a follow up to ensure the necessary improvements have been made.

It was established that the manager had a system in place to monitor accidents and incidents that happened in the home. Accidents and incidents were notified, if required, to residents' next of kin, their care manager and to RQIA.

There was an effective system in place to manage complaints which were seen as an opportunity for the team to learn and improve.

The home was visited each month by the registered provider's representative to consult with residents, their relatives and staff and to examine all areas of the running of the home. The reports of these visits were completed in detail; where action plans for improvement were put in place, these were followed up to ensure that the actions were correctly addressed. These were available for review by residents, their representatives, the Trust and RQIA.

In summary, there were robust governance arrangements in place to effectively monitor care delivery and service provision, and to help drive improvement.

6.0 Conclusion

Residents were seen to be content and settled in the home and in their interactions with staff. Staff treated residents with respect and kindness. There were safe systems in place to ensure that residents' needs were met by the number and skill of the staff on duty. Care was provided in a caring and compassionate manner.

Based on the inspection findings and discussions held RQIA were assured that compassionate care was being delivered in Hebron House and that the management team had taken relevant action to ensure the delivery of safe, effective and well led care.

7.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Emma Rafferty, manager, as part of the inspection process and can be found in the main body of the report.



The Regulation and Quality Improvement Authority

7th Floor, Victoria House
15-27 Gloucester Street
Belfast
BT1 4LS

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)

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