



Unannounced Care Inspection Report 14 February 2019



Hebron House

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

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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.

1.0 What we look for



2.0 Profile of service

This is a residential care home registered to provide care and accommodation for 21 persons in the categories of care cited on the home's certificate of registration and detailed in section 3.0 of this report.

3.0 Service details

Organisation/Registered Provider: Norman Thomas Wylie Mildred Jean Wylie	Registered Manager: Mildred Jean Wylie
Person in charge at the time of inspection: Ruth Campbell senior care assistant then joined by Mildred Wylie	Date manager registered: 01 April 2005
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 registered places: 21

4.0 Inspection summary

An unannounced care inspection took place on 14 February 2019 from 10.10 to 13.20 hours.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Nursing Homes Regulations (Northern Ireland) 2005 and the DHSSPS Care Standards for Nursing Homes 2015.

This primarily was a focused inspection to review the provision of meals and mealtimes.

Evidence of good practice was found in relation to general observations of care practices and staffs' knowledge and understanding of residents' needs. Good practice was also found in relation to resident empowerment and participation in care reviews.

No areas of improvement were identified during this inspection.

Feedback from residents was all positive and residents appeared comfortable and content in their environment and interactions with staff.

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 Mildred Wylie, 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 care inspection

No further actions were required to be taken following the most recent inspection on 4 September 2018.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: the previous inspection report, notifiable events, and written and verbal communication received since the previous care inspection.

During the inspection the inspector met with seven residents, four staff, the governance lead and the registered manager.

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

- Two residents' care files
- Complaints and compliments records
- Audits of risk assessments, care plans, care reviews; accidents and incidents (including falls, outbreaks), complaints, environment, catering, Infection Prevention and Control (IPC), NISCC registration
- Minutes of recent residents' meetings
- Policies and procedures

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 most recent inspection dated 4 September 2018

The most recent inspection of the home was an unannounced care inspection.

6.2 Review of areas for improvement from the last care inspection dated 4 September 2018

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

6.3 Inspection findings

6.3.1 Meals and mealtimes

A varied and nutritious diet is provided which met the individual and recorded dietary needs and preferences of the residents. The menu is rotated over a three weekly cycle. It was also advised that this is revised on a six monthly basis to take account seasonal availability of foods and residents' views. The menu offered a choice of meal each mealtime.

Residents are involved in the planning of menus. This is a standing item on the agenda of residents' meetings.

Systems were in place to regularly record residents' weights and any significant changes in weight were responded to appropriately. There were arrangements in place to refer residents to dietitians and speech and language therapists (SALT) as required. Guidance and recommendations provided by dieticians and SALT were reflected within the individual resident's care plans and associated risk assessments.

The menu was displayed in a suitable format in prominent positions in the home, so that residents and their representatives know what was available at each mealtime. Discussions with residents found that they were knowledgeable about the planned meals.

Meals were provided at conventional times throughout the day with drinks and snacks available in between. Residents can also have a snack or drink on request. Fresh drinking water was readily available.

Meals are available for special occasions, including home cooking.

The lunch time meal was appetising and nicely presented. The dining room was nicely facilitated as were the tables with choice of condiments. There was a nice ambience in place for residents to enjoy their meal. Staff assisted residents in an organised, unhurried manner. There were adequate numbers of staff present to assist with residents' needs.

Discussions with residents throughout this inspection confirmed that they were very satisfied with this area of care. Some of the comments made included statements such as;

- "It is great food here"
- "The meals are lovely. You can get what you like."

Discussions with staff confirmed that they were aware of matters concerning residents' eating and drinking as detailed in residents' care plans. An inspection of a sample of two residents' care records pertaining to eating and drinking was undertaken. These records were maintained in informative detail with good account of prescribed needs and evaluations of care.

A record also was kept of the meals provided in sufficient detail of each resident's dietary intake.

The catering facility was tidy and well organised.

6.3.2 The environment

The home was clean and tidy with a good standard of décor and furnishings being maintained. Residents' bedrooms were comfortable and personalised. Communal areas were comfortable and suitably facilitated.

The home was appropriately heated and fresh smelling.

There were no obvious health and safety risks observed in the internal environment.

6.3.3 Residents' views

The inspector met with the seven residents in the home at the time of this inspection. The other four residents were in attendance at their day care placements. All confirmed/indicated that they were very happy with their life in the home, their relationship with staff, the provision of meals and the activities and events in the home.

Some of the comments made included statements such as;

- "I love this home"
- "The staff are all brilliant"

Two residents talked about their care reviews and how they felt empowered to express their views and wishes. This is good practice.

6.3.4 Care practices

Observations of care practices evidenced residents being treated with dignity and respect. Care duties and tasks were organised and unhurried. Staff interactions with residents were polite, friendly, warm and supportive.

Residents were comfortable, content and at ease in their environment and interactions with staff. Added to this residents were engaged in great enjoyment from receipt of Valentine Day's cards.

Staff spoke positively about their roles and duties, training and managerial support. Staff also 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. Some of the comments made by staff included statements such as;

- "This is a great home to work in. We all feel supported through training, supervisions and appraisal as well as availability"
- "The care is excellent here. I have no difficulties at all."

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.

Staff also advised that they were provided with mandatory training and additional training opportunities relevant to any specific needs of the residents.

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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