



The Regulation and
Quality Improvement
Authority

Ardview House
RQIA ID: 1573
18 The Ward
Ardglass
BT30 7UP

Inspector: John McAuley
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**Unannounced Care Inspection
of
Ardview House**

20 October 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of inspection

An unannounced care inspection took place on 20 October 2015 from 10:45am to 2pm. On the day of the inspection the home was found to be delivering safe, effective and compassionate care. The standard we inspected was assessed as being met. No areas of improvement were identified.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards (2011).

1.1 Actions/enforcement taken following the last inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/enforcement resulting from this inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service details

Registered Organisation/Registered Person: South Eastern Health and Social Care Trust	Registered Manager: Cathryn Anne Canning
Person in charge of the home at the time of inspection: Cathryn Anne Canning	Date manager registered: 8 June 2015
Categories of care: RC-DE, RC-E, RC-MP(E), RC-PH, RC-TI, RC-I, RC-A	Number of registered places: 39
Number of residents accommodated on day of inspection: 23	Weekly tariff at time of inspection: £470

3. Inspection focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standard has been met:

Standard 1: Residents' views and comments shape the quality of services and facilities provided by the home.

4. Methods/processes

Specific methods and processes used in this inspection include the following:

- Prior to inspection we analysed the following records; notification reports and previous inspection report.
- During the inspection we met with 20 residents, five staff, the registered manager, the locality manager and one visiting relative.
- We inspected the following records; residents' care records, accident/ incident reports, and policies and procedures and aligned guidance available to the standard inspected.

5. The inspection

5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an announced finance inspection dated 21 July 2015. The completed QIP was returned and approved by the finance inspector.

5.2 Review of requirements and recommendations from the last Care inspection

No Requirements or Recommendations were made during the last Care inspection on 29 April 2015.

Standard 1: Residents, views and comments shape the quality of services and facilities provided by the home.

5.3 Is care safe? (Quality of life)

Staff actively seek residents' views and comments and incorporate these into practice to ensure choices, issues of concern or risks are recorded and acted on. In our discussions with residents they confirmed that their views and comments were taken account of. Residents gave examples of issues such as activities, meals and the general environment as being raised. Residents also confirmed that any agreed actions are acted upon.

We inspected residents' care records and found that residents, choices and preferences were recorded. The care plans inspected were signed by the resident and/ or their representative. In discussions with the registered manager and staff they confirmed that residents' meetings are held on a regular basis. The minutes of the most recent meeting held on 9 September 2015 were inspected. These records recorded any actions that maybe required.

The home had policies and procedures pertaining to consent, communication, complaints and customer care.

Is care effective? (Quality of management)

We found that there was a range of methods and processes in place where residents and their representatives' views are sought. This was reflected within the care management reviews, record of residents meetings, registered provider monthly visits. The registered manager confirmed that there is an open door policy within the home for relatives who wish to highlight any issues.

The home had quality assurance questionnaire for residents. The registered manager reported to us that this is currently under review. Following review this will help formulate the home's annual quality assurance report.

Is care compassionate? (Quality of care)

Discussion with staff demonstrated that they were knowledgeable about residents' needs. In our discussions with staff we identified that residents were listened and responded to by staff.

Staff reported to us examples of how they incorporated their knowledge of values in their practice with residents. This included, knocking on doors before entering, asking residents what they want at meal-times and when they would like assistance with personal care needs.

In our discreet observations of care practices we confirmed that residents were treated with dignity and respect. Care duties were conducted at an unhurried pace with time afforded to interactions with residents in a polite, friendly and supportive manner.

Areas for improvement

There were no areas of improvement identified with this standard and it was found to be met. The overall assessment of this standard found it to be safe, effective and compassionate.

Number of requirements:	0	Number of recommendations:	0
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5.4 Additional Areas Examined

5.4.1 Residents' Views

We met with twenty residents in the home. In accordance with their capabilities, they expressed or indicated that they were happy with their life in the home, their relationship with staff, and the provision of meals.

Some of the comments made included statements such as;

"The new manager is a breath of fresh air"

"The staff are very kind"

"I am very well cared for here"

"All is great here. I am very glad to be here"

"Things are marvellous here".

5.4.2 Relatives' Views

We met with one visiting relative. This relative spoke with praise and gratitude about the care provided the kindness and support received from staff, the provision of meals and the provision of activities. The relative also confirmed that he/ she felt good confidence with the standard of care provided.

5.4.3 Staff Views

We met with five staff of various grades. All spoke on a positive basis about the workload, teamwork, training, managerial support and staff morale. Staff informed us that they felt a good standard of care was provided for.

5.4.4 General Environment

We found the home to be clean and tidy, with good housekeeping arrangements in place. The general décor and furnishings were of a good standard. The home was nicely decorated for Halloween festivities.

Residents' bedrooms were comfortable with many facilitated with personal artefacts and memorabilia.

The grounds to the home were well maintained with good accessibility for residents.

5.4.5 Accident/ Incident Reports

We inspected these reports from the previous inspection. These were found to be appropriately managed and reported.

5.4.6 Care Practices

Throughout our discreet observations of care practices we noted residents being treated with dignity and respect. Care duties were organised.

Staff interactions with residents were found to be polite, friendly, warm and supportive.

A nice homely atmosphere was in place, with residents being comfortable, content and at ease in their environment and interactions with staff.

A supportive practice of teamwork was found to be in place with residents benefitting from this.

An appetising, well presented dinner time meal was provided for. Staff were found to assist with residents' needs in an appropriate manner.

Residents were found to be engaged in pastimes of choice such as socialising with one another, watching television, resting or planned activity with a nominated member of staff. Communal televisions and music systems were programmed to channels appropriate to residents' age group, taste and choice.

5.4.7 Staffing

The staffing levels at the time of this inspection consisted of:

- 1 x registered manager
- 1 x senior care assistant
- 5 x care assistants
- 4 x housekeeping staff
- 3 x catering staff

The registered manager and staff confirmed that these levels were appropriate to meet the assessed needs of residents.

5.5.8 Complaints

A review of the record of complaints together with discussions with the registered manager confirmed that expressions of dissatisfaction are taken seriously and manager appropriately.

Areas for Improvement

There were no areas of improvement identified with these additional areas inspected. The overall assessment of these additional areas considered these to be compassionate, safe and effective.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	Cathryn Canning	Date Completed	03/11/15
Registered Person	Hugh McCaughey	Date Approved	03/11/15
RQIA Inspector Assessing Response	John McAuley	Date Approved	16/11/15

Please provide any additional comments or observations you may wish to make below:

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