



The **Regulation** and
Quality Improvement
Authority

Blair Lodge
RQIA ID: 1581
32 Bryansburn Road
Bangor
BT20 3SB

Inspector: Laura O'Hanlon
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**Unannounced Care Inspection
of
Blair Lodge**

28 January 2016

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 28 January 2016 from 10.15 to 16.00. On the day of the inspection the home was found to be delivering safe, effective and compassionate care in relation to the standard we inspected; which was assessed as being met. There were no areas for improvement identified at this inspection.

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

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: Helen Armstrong – registration pending	Registered Manager: Rosemary Clarke
Person in charge of the home at the time of inspection: Rosemary Clarke	Date manager registered: 01 February 2016
Categories of care: RC-LD, RC-LD(E), RC-MP, RC-MP(E)	Number of registered places: 29
Number of residents accommodated on day of inspection: 25	Weekly tariff at time of inspection: £470 - £2200

3. Inspection focus

The inspection sought 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

Prior to inspection we analysed the following records: the previous inspection report and the notification of accidents and incidents.

We met with 11 residents, one set of relatives, one visiting professional, four members of the care staff and the registered manager.

We inspected the following records: five care records, accident /incident reports, registered provider visits, fire safety records, complaints/compliments records and the record of residents meetings.

5. The inspection

5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an announced estates inspection dated 14 January 2016. This report has not yet been issued to the home.

5.2 Review of requirements and recommendations from the last care inspection dated 5 May 2015

No requirements or recommendations were made as a result of the care inspection carried out on 5 May 2015.

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

Is care safe? (Quality of life)

The registered manager confirmed that residents' views are taken into account in all matters affecting them, in so far as practically possible.

Through discussion with the residents they reported to us that their views were actively sought and incorporated into practice. An example of this was in regard to two residents who wanted to go swimming. The home organised for this to happen.

The registered manager confirmed that the last residents' meeting was convened on 9 January 2016. The residents' views and wishes were actively sought and recorded in regard to facilities and services, menu planning and activity provision. A record of this meeting was available during the inspection.

The five care records inspected in regard to this standard, demonstrated to us that records were up to date and kept under continual review to reflect the changing needs and preferences of the resident.

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 were sought. These were reflected within the care management reviews, record of residents' meetings and the registered provider monthly visits. The registered manager confirmed that there was an open door policy within the home for residents and relatives who wished to highlight any issues.

Copies of review forms were observed within each care record. Residents were present and participated in their care management review where possible.

The registered manager shared with us the annual quality review report dated December 2015. This reflected the views of residents, representatives and other external visitors to the home.

Is care compassionate? (Quality of care)

Discussion with staff demonstrated that they were knowledgeable about residents needs and a person centred approach was adopted. In our discussions with staff we identified that residents were listened and responded to by staff.

Staff shared with us examples of how they incorporate their knowledge of values into their practice with residents. This included knocking on doors before entering, asking residents what they want to wear each day, seeking their preferences at meal-times and when they would like assistance to have a shower or get dressed.

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 within the standard inspected; which was assessed as being met.

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 11 residents. We observed residents relaxing in the communal day care area. A number of residents were engaged in activities whilst others were relaxing with staff.

In accordance with their capabilities, residents expressed that they were happy and content with their life in the home. They expressed their satisfaction with the facilities and services provided and their relationship with staff.

5.4.2 Relatives Views

We met with one set of relatives. These relatives commented that there were always plenty of staff on duty. The staff were friendly and welcoming. They stated that the registered manager and staff were approachable. They both confirmed that there was good communication with the staff and any issues or concerns would be promptly addressed.

5.4.3 Views of visiting professional

We spoke with one visiting professional in the home. She commented that the staff were very approachable and practically minded. This professional advised that there is good team working and staff were mindful, considerate and reassuring in their interactions. We were informed that the staff were knowledgeable and tuned in to the needs of the residents. This professional also advised us that the staff were quick to report and address any areas of concern.

5.4.4 Staff views

We spoke with four members of care staff and the registered manager. Staff advised us that they felt supported in their respective roles. The staff related that they had been provided with the relevant resources to undertake their duties. Staff demonstrated to us that they were knowledgeable of the needs of individual residents.

The staff stated that they felt supported by the registered manager and advised that they were approachable. The staff advised that the appointment of the registered manager has had a positive impact on Blair Lodge.

Some comments made were:

- "The care is excellent, if I had someone I would be happy for them to be living here. The standard of care is fantastic. Staff are here because they want to be here."
- "I always treat the residents like I would expect a family member to be treated. If I had a family member I would place them here."
- "I think we deliver care to the highest standard and we are pro-active in our thinking. We treat everyone as an individual."
- "I have recommended this home to others. I have confidence that the residents are well looked after and are listened to. It's a lovely place to work in."

5.4.5 Environment

We found that the home presented as clean, organised and adequately heated. We observed residents' bedrooms to be homely and personalised. Décor and furnishings were found to be of a good standard.

5.4.6 Care practices

We found the atmosphere in the home was friendly and welcoming. We observed staff to be interacting with residents in a respectful, polite, warm and supportive manner. Residents were well dressed with good attention to personal detail noted.

5.4.7 Fire safety

We confirmed that the home's most recent fire safety risk assessment was dated 11 September 2015. We reviewed the fire safety records and confirmed that fire safety training was undertaken on 2 December 2015. The records indicated that a fire drill took place on 30 December 2015.

5.4.8 Accidents / Incident reports

We reviewed the accident/incident records which have occurred since the previous inspection and confirmed that these were appropriately managed and reported. For the purpose of information the registered manager was referred to the updated RQIA guidance on reporting of statutory notifications.

5.4.9 Complaints/Compliments records

In our inspection of complaint records and discussion with the registered manager we confirmed that complaints had been managed appropriately.

5.4.10 Visits by the Registered Provider

We reviewed the record of these visits. This record confirmed that these visits were unannounced and were undertaken on a monthly basis.

Areas for improvement

There were no areas of improvement identified with the additional areas inspected.

Number of Requirements:	0	Number of Recommendations:	0
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It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	Rosie Clarke	Date Completed	11/02/16
Registered Person	Helen Armstrong	Date Approved	11/02/16
RQIA Inspector Assessing Response	Laura O'Hanlon	Date Approved	12.2.16

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

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