



**The Regulation and
Quality Improvement
Authority**

**Carlisle House
RQIA ID: 1587
2-4 Henry Place
Clifton Street
Belfast
BT15 2BB**

**Inspector: Patricia Galbraith
Inspection ID: IN022291**

**Tel: 0289032 8308
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**Unannounced Care Inspection
of
Carlisle House**

23 July 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 23 July 2015 from 10.15 to 15.30. On the day of the inspection the home was found to be delivering safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005, the DHSSPS Residential Care Homes Minimum Standards (2011), NICE guidelines on the management of urinary incontinence in women (September 2013), NICE guidelines on the management of faecal incontinence (June 2007) and Guidance and Audit Implementation Network (GAIN) guidelines available for palliative care.

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: Board of Social Witness	Registered manager: David Cuthbert
Person in charge of the home at the time of inspection: James Small deputy manager	Date manager registered: 1 April 2005
Categories of care: RC-A, RC-D	Number of registered places: 16
Number of residents accommodated on day of inspection: 9	Weekly tariff at time of inspection: £788

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' Involvement

4. Methods/Process

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

Prior to inspection we analysed the following records: returned Quality Improvement Plan from the previous inspection, notifications of accidents and incidents submitted to RQIA.

We met with three residents and six members of staff of various grades. We met with three residents' representatives and one visiting professional who were present during the inspection.

We inspected two care records, complaints records, staff training records, Fire Safety Risk Assessment, accident and incident records.

5. The inspection

5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an announced care inspection dated 14 October 2014. No requirements or recommendations were made at this inspection.

5.2 Standard 1- Residents' involvement

Is care safe? (Quality of life)

Staff actively seek residents and their families' views and incorporate these into practice to ensure that choices, issues of concern or risks are recorded and acted upon.

In our discussions with the deputy manager and staff members they confirmed that residents' meetings were held weekly. Minutes of these meetings were recorded along with any actions which may be required.

We noted that there were policies in place regarding consent, communication and resident meetings and forums. In our discussions with the registered manager and staff we confirmed that areas of care and complaints were covered during staff induction and in staff training.

Is care effective? (Quality of management)

We noted a range of methods and processes where resident's views were sought about the care. We found that staff maintained a record of actions taken to improve the service experience.

In our discussions with the deputy manager and with care staff we confirmed that satisfaction questionnaires were provided to residents. These were in the form of exit interviews, and have been completed on a daily basis and when the residents leave the home at the end of their care. The returned satisfaction questionnaires identified that residents were happy with the care and service provided. We noted also that staff met with residents individually and in groups to explore any issues which might arise and to exchange information between the staff team.

Is care compassionate? (Quality of care)

The values underpinning the standards, as appropriate to the ethos of care, inform the philosophy of care in the home. These values are documented in the home's Statement of Purpose and are also detailed in the home's website.

In our discussions with staff and residents we identified that residents were listened and responded to by staff. Staff members were knowledgeable about the needs, preferences and abilities of the residents.

Areas for improvement

There were no areas of improvement identified from the standard inspected. This standard was met.

Number of Requirements:	0	Number of Recommendations:	0
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5.3 Additional areas examined

5.3.1 Residents' views

We met with three residents individually. In accordance with their capabilities they, all indicated that they were happy with their life in the home, their relationships with staff and with the provision of care.

Some comments included:

"I like it here it has really helped me this time. I am in a better place now to deal with things. "

"It's lovely here staff are all very experienced and want to help me"

5.3.2 Staff views

We met with six staff members who spoke positively about their role and duties, staff morale, teamwork and managerial support. Staff indicated to us that they felt well supported by training and are given the necessary resources to fulfil their duties.

Some comments included:

- "I like working here. There is good team work"
- "Staff are all great to work with"

Ten staff questionnaires were distributed on the day of inspection. Three were returned in time for inclusion in report. No issues were identified comments were positive about the home .

5.3.3 Visiting professional

We met with one visiting professional who reported staff were knowledgeable about residents and their individual needs.

5.3.4 Care practices

In our discreet observations of care practices we were satisfied 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.

5.3.5 Accidents / incidents

An inspection of the accident and incident notifications since the previous inspection established that these had been reported and managed appropriately.

5.3.6 Complaints / compliments

Complaints had been recorded had been managed appropriately. Records were retained of investigations, outcomes and of lessons learned.

5.3.7 Fire safety

On the day of inspection the home's Fire Safety Risk Assessment was in date. Fire alarms were tested weekly in different zones. We inspected the staff training records which confirmed that staff members had received fire training twice yearly in accordance with regulation.

5.3.8 Environment


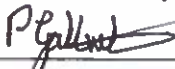
We found that the home was clean and tidy, with good housekeeping arrangements in place. The general décor and furnishings were of a good standard. Residents' bedrooms were comfortable and personalised. Communal lounges were comfortable and offered choice of seating for residents.

Areas for improvement

There were no areas of improvement identified within the additional areas inspected all areas are met.

Number of Requirements:	0	Number of Recommendations:	0
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No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	D J C	Date Completed	3/9/15
Registered Person		Date Approved	11.09.15
RQIA Inspector Assessing Response	LINDSAY CONWAY 	Date Approved	16-9-15

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

WEEKLY TARIFF IS NOW £788 PAID BY BSHC TRF
BHSCTF
NHSCTF

Please complete in full and returned to care.team@rqia.org.uk from the authorised email address

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.

