

Unannounced Follow Up Care Inspection Report 1 February 2018



Kensington

Type of Service: Residential Care Home
Address: 2 Groomsport Road, Bangor, BT20 5LN
Tel No: 028 9145 9047
Inspector: Alice McTavish

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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 provider 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 with seven beds that provides care for older people and people with mental ill health.

3.0 Service details

Organisation/Registered Provider: Kensington Responsible Individual: Sathrouhun Bogun	Registered Manager: Joanne Glendinning
Person in charge at the time of inspection: Emma Mitchell, Senior Care Assistant	Date manager registered: 6 May 2010
Categories of care: Residential Care (RC) I - Old age not falling within any other category MP (E) - Mental disorder excluding learning disability or dementia – over 65 years	Number of registered places: 7

4.0 Inspection summary

An unannounced inspection took place on 1 February 2018 from 14:45 to 15:35.

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

The inspection was undertaken following whistleblowing information received by RQIA in relation to staff recruitment practices in Alpine House, a residential care home which is owned and operated by the same responsible individual and managed by the same registered manager as Kensington.

It is not the remit of RQIA to investigate whistleblowing made by or on behalf of individuals, as this is the responsibility of the registered providers and the commissioners of care. However, if RQIA is notified of a potential breach of regulations or minimum standards, it will review the matter and take appropriate action as required; this may include an inspection of the home.

Staff recruitment and selection was examined during the inspection.

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 Joanne Glendinning, 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

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 5 December 2017.

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 reports from previous care inspections.

During the inspection the inspector met with one member of staff and the registered manager.

The following records were examined during the inspection: the recruitment records of three members of staff.

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 5 December 2017

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector.

6.2 Review of areas for improvement from the last care inspection dated 5 December 2017

This inspection focused solely on issues previously outlined in section 4.0. The areas for improvement from the last care inspection on 5 December 2017 were not reviewed as part of the inspection and are carried forward to the next care inspection.

6.3 Inspection findings

Staff recruitment practices

The staff recruitment records were inspected for three members of staff who work in Kensington. The recruitment records of two staff were satisfactory. For one member of staff,

who also worked in Alpine House residential care home, it had already been established that an AccessNI enhanced disclosure certificate was absent and the member of staff had been suspended from working in both homes.

This matter formed part of the enforcement action undertaken by RQIA in relation to Alpine House.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection. One area for improvement from the care inspection on 5 December 2017 was not reviewed as part of this inspection and will be carried forward to the next care inspection.

Carried Forward Standards

Quality Improvement Plan	
Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011	
<p>Area for improvement 1</p> <p>Ref: Standard 25.</p> <p>Stated: First time</p> <p>To be completed by: 31 January 2018</p>	<p>The registered person shall that staff meetings are held regularly and at least quarterly.</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p> <p>Ref: 6.5</p>
	<p>Response by registered person detailing the actions taken: This issue has been addressed.</p>



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