

# Unannounced Care Inspection Report 24 December 2020



## The Pines

**Type of Service: Residential Care Home**  
**Address: 23 Upper Lisburn Road, Belfast BT10 0GW**  
**Tel no: 028 9060 2343**  
**Inspector: Alice McTavish**

[www.rqia.org.uk](http://www.rqia.org.uk)

---

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.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

## 1.0 What we look for



## 2.0 Profile of service

This is a residential care home registered to provide residential care for up to 31 residents.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> The Pines  <b>Responsible Individual:</b> Kevin McKinney	<b>Registered Manager and date registered:</b> Kevin McKinney
<b>Person in charge at the time of inspection:</b> Kevin McKinney	<b>Number of registered places:</b> 31  Maximum of 3 residents in category of care RC-PH and a maximum of 10 residents in category of care RC-DE
<b>Categories of care:</b> Residential Care (RC) I - Old age not falling within any other category DE – Dementia PH - Physical disability other than sensory impairment	<b>Number of residents accommodated in the residential home on the day of this inspection:</b> 12

### 4.0 Inspection summary

Due to the coronavirus (COVID-19) pandemic the Department of Health (DoH) directed RQIA to prioritise inspections to homes on the basis of risk.

RQIA received information on 22 December 2020 which had the potential to impact on the quality of care and services provided to residents in The Pines. In response, RQIA decided to undertake an unannounced inspection of the home. This inspection took place on 24 December 2020 between 09.00 and 11.40 hours.

The following areas were examined during the inspection:

- the home's environment
- staffing
- care delivery
- consultation with residents
- management arrangements

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and residents' experience.

## 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	*3

This inspection resulted in no areas for improvement being identified, however, \* three areas for improvement were carried forward for review at the next inspection. Findings of the inspection were discussed with Kevin McKinney, Manager and Responsible Individual, as part of the inspection process and can be found in the main body of the report.

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

## 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- written and verbal communication received since the previous care inspection
- the report and the returned QIP from the previous care inspection

During the inspection the inspector met with three residents individually and with five in a group; the inspector also spoke with one member of care staff, the cook and two domestic staff.

Areas for improvement identified at the last care inspection were not reviewed as part of this inspection and are carried forward to the next care inspection.

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 previous inspection

The most recent inspection of the home was an unannounced care inspection undertaken on 28 September 2020. The quality improvement plan from the previous inspection was not reviewed at this inspection. This has been carried forward and will be reviewed at a future inspection.

<b>Areas for improvement from the last care inspection</b>		
<b>Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011</b>		<b>Validation of compliance</b>
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 27.5  <b>Stated:</b> Second time	The registered person shall ensure the following: <ul style="list-style-type: none"> <li>• Risk assessments are completed for all uncovered radiators and any actions arising are addressed.</li> </ul> Ref: 6.1	<b>Carried forward to the next care inspection</b>
	<b>This area for improvement was not examined during this inspection.</b>	
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 25.8  <b>Stated:</b> First time	The registered person shall ensure that meetings for all grades of staff are held regularly, and at least quarterly.  Ref: 6.2.1	<b>Carried forward to the next care inspection</b>
	<b>This area for improvement was not examined during this inspection.</b>	
<b>Area for improvement 3</b>  <b>Ref:</b> Standard 9.6  <b>Stated:</b> First time	The registered person shall ensure that where residents have hearing aids, these are properly maintained and staff ensure they are worn by residents.  Ref: 6.2.3	<b>Carried forward to the next care inspection</b>
	<b>This area for improvement was not examined during this inspection.</b>	

## 6.2 Inspection findings

### 6.2.1 The home's environment

The home was found to be well maintained, warm, clean and comfortable. The kitchen was well stocked with fresh food and the cook advised that there were no difficulties with obtaining supplies. Residents said that they enjoyed the food and were looking forward to having their Christmas dinner the following day.

There were plentiful supplies of domestic and laundry products, towels and bed linens and Personal Protection Equipment (PPE) for staff.

### 6.2.2 Staffing

There was sufficient staff to meet the needs of residents. The Responsible Individual advised that staffing was kept under review and was adjusted to take account of the number and needs of the residents accommodated in the home.

We saw that staff responded promptly to call bells or any request for assistance by residents.

### 6.2.3 Care delivery

Residents were observed to be comfortable and relaxed in the dining room and lounges or in their bedrooms.

Residents were well presented and wore freshly laundered clothes. It was evident that staff were available to support residents with personal care needs, where required.

Where any resident was in need of comfort or reassurance, staff provided this in a sensitive and supportive manner.

### 6.2.4 Consultation with residents

Residents said that they were well cared for in the home and that staff treated them kindly. Some of the comments made by residents were as follows:

- “The staff are very good, very helpful...I have a call bell here beside me and the staff come quickly if I need them. They help me to have a shower a couple of times a week and to get a good wash on the other days and to get dressed. I like it here...I like my room is very comfortable.”
- “I’m very comfortable here and the staff are very good to me, we can have fun together. They work very hard...the food is lovely, I couldn’t ask for better! When I lived by myself, I was burgled. I don’t have to worry about anyone breaking in here. I know I’m safe here and my family knows I am safe – that means a lot.”

### 6.2.5 Management arrangements

The Responsible Individual confirmed that he had recruited a permanent manager who was due to commence employment before the end of December 2020.

### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

### 6.3 Conclusion

No evidence of poor care or services were found during this inspection of The Pines. Residents were seen to be clean and well presented, wearing fresh clothing; residents were well nourished and said that they were well cared for and treated kindly by staff in the home.

### 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Kevin McKinney, Responsible individual, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the residential home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

### 7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

### 7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Standard 27.5  <b>Stated:</b> Second time  <b>To be completed by:</b> 30 October 2020	The registered person shall ensure the following:  <ul style="list-style-type: none"> <li>• Risk assessments are completed for all uncovered radiators and any actions arising are addressed.</li> </ul> Ref: 6.1  <b>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.</b>
<b>Area for improvement 2</b>  <b>Ref:</b> Standard 25.8  <b>Stated:</b> First time  <b>To be completed by:</b> 27 November 2020	The registered person shall ensure that meetings for all grades of staff are held regularly, and at least quarterly.  Ref: 6.2.1  <b>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.</b>
<b>Area for improvement 3</b>  <b>Ref:</b> Standard 9.6  <b>Stated:</b> First time  <b>To be completed by:</b> Immediately and ongoing	The registered person shall ensure that where residents have hearing aids, these are properly maintained and staff ensure they are worn by residents.  Ref: 6.2.3  <b>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.</b>

*\*Please ensure this document is completed in full and returned via Web Portal\**





The Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST  
BT1 3BT

**Tel** 028 9536 1111  
**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
**📍** @RQIANews

Assurance, Challenge and Improvement in Health and Social Care