



Unannounced Care Inspection Report

26 September 2019



Rocky Acres

Type of Service: Residential Care Home
Address: 8 Portavogie Road, Ballyhalbert BT22 1BU
Tel no: 028 4275 8715
Inspector: Alice McTavish

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 registered residential care home which provides care for up to 13 residents.

3.0 Service details

Organisation/Registered Provider: Rocky Acres Responsible Individuals: Margaret Cully Jean Cully	Registered Manager and date registered: Margaret Cully 1 April 2005
Person in charge at the time of inspection: Margaret Cully	Number of registered places: 13
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE – Dementia	Total number of residents in the residential care home on the day of this inspection: 13

4.0 Inspection summary

An unannounced inspection took place on 26 September 2019 from 10.00 hours to 15.10 hours.

The inspection sought to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to staffing, staff training, supervision and appraisal, record keeping, communication between residents, staff and other key stakeholders, dignity and privacy, governance arrangements and maintaining good working relationships.

No areas requiring improvement were identified.

Residents described living in the home in positive terms. Residents were seen to be relaxed and comfortable in their surrounding and in their interactions with other residents and staff.

Comments received from residents, people who visit them, professionals and staff during and after the inspection are included in the main body of this report.

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
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 Margaret Cully, registered manager, 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.

4.2 Action/enforcement taken following the most recent inspection dated 6 December 2018

The most recent inspection of the home was an unannounced care inspection undertaken on 6 December 2018. No further actions were required to be taken following the most recent inspection.

5.0 How we inspect

To prepare for this inspection we reviewed information held by RQIA about this home. This included the findings for the last care inspection, registration information and any other written or verbal information received.

During our inspection we:

- where possible, speak with residents, people who visit them and visiting healthcare professionals about their experience of the home
- talk with staff and management about how they plan, deliver and monitor the care and support provided in the home
- observe practice and daily life
- review documents to confirm that appropriate records are kept

Questionnaires and 'Have We Missed You' cards were provided to give residents and those who visit them the opportunity to contact us after the inspection with views of the home. A poster was provided for staff detailing how they could complete an electronic questionnaire. Six questionnaires were returned by residents and their relatives. All respondents indicated a high level of satisfaction. A relative commented, "Totally satisfied with all the wonderful care for my (relative) from all staff."

During the inspection a sample of records was examined which included:

- staff duty rotas from 2 September to 6 October 2019
- staff training schedule
- three residents' records of care
- complaint records
- compliment records
- a sample of governance audits/records
- accident/incident records from January to September 2019
- annual satisfaction survey report
- annual quality report
- fire safety records
- RQIA registration certificate

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 last care inspection dated 6 December 2018

There were no areas for improvements made as a result of the last care inspection.

6.2 Inspection findings

6.3 Is care safe?

Avoiding and preventing harm to residents and clients from the care, treatment and support that is intended to help them.

The people who live in this home said that they felt safe. They said that there was always staff around to help them if they needed help, and that this included during the night. The manager and staff on duty confirmed that staffing was safe and kept under review. There was care, catering and administrative staff on duty during the day and care staff in the evenings and overnight.

Staffing and recruitment

We saw that the duty rota accurately reflected all of the staff working within the home; all staff scheduled to be on duty were present and were carrying out their duties. We could see that there was enough staff in the home to quickly answer any requests by residents for help, to assist with care when needed and to provide residents with a range of activities.

The manager advised all staff were properly vetted and suitable to work with the residents in the home; no new staff had been recruited since the last care inspection.

Staff supervision, annual appraisal and competency

We spoke with staff who told us that they got regular supervision. We saw that the manager had a system in place for planning supervisions and annual appraisals with staff.

All senior care staff had an assessment of their competency and capability to ensure that they can take charge of the home; we saw that these assessments were kept up to date.

Staff training and registration with professional body

We looked at the training records to make sure that staff had been given the core training they needed to do their jobs safely. We could see that staff either had the training, or if it was out of date, there was a plan in place for staff to get the training.

Staff told us that they received mandatory training and they were registered with their professional body, the Northern Ireland Social Care Council (NISCC). Registration with NISCC is necessary to ensure that social care staff are safe practitioners and adhere to standards of conduct and practice. We looked at the records kept by the manager of staff registrations and saw that these were checked regularly.

Safeguarding residents from harm

The manager was able to describe how residents in the home were protected from abuse or harm. The home had a policy and procedure which was in keeping with current regional adult safeguarding guidance. The home had a safeguarding champion.

Staff who we spoke with were able to describe what they might look out for if a resident was being abused or harmed. They were aware of the need to report all suspected abuse and keep accurate records. Staff told us that their training helped them feel confident about what they should do in such situations.

Staff were also familiar with the home's whistleblowing policy and were able to describe what they should do if they witnessed poor practice by colleagues; staff reported that their first obligation was to the safety of the residents and that they felt confident about reporting such poor practice.

The manager was able to describe how safeguarding referrals would be made to trusts, who would be contacted, what documents would be completed and how staff would co-operate and assist in any investigations.

Environment

We walked around the home and saw that it was in good decorative state and it was kept clean and warm. Bedrooms were personalised and there were no malodours. Residents told us that they liked their rooms and felt they had their own space and privacy.

There was a communal lounge and a dining room for the use of residents with space for activities and meetings. All fire exits were free from obstruction. Furniture in bedrooms and communal areas was in good repair.

Restrictions

The manager told us that she made sure that residents living in Rocky Acres enjoyed as much freedom as possible whilst remaining safe and some restrictions were necessary to achieve this. Residents who were safe to leave the home alone or with family could exit the building either by asking staff to open the door or by knowing the key code. Some residents, however, needed staff to accompany them to keep them safe and staff were available for this.

Infection prevention and control (IPC)

The manager told us about the arrangements in place to make sure that the home was kept clean and free, as far as possible, from any outbreaks of infection. We could see from training records that all staff had received training in IPC in line with their roles and responsibilities. Staff told us how they used gloves and aprons to keep their hands and clothing clean to reduce the risk of spreading infection and we saw that staff used the equipment appropriately.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staffing, staff training, supervision and appraisal, infection prevention and control, and the home's environment.

Areas for improvement

No areas for improvement were identified during the inspection in this domain.

	Regulations	Standards
Total numb of areas for improvement	0	0

6.4 Is care effective?

The right care, at the right time in the right place with the best outcome.

We could see that the residents were getting the right care and that the staff knew the residents well. Staff were able to describe in detail the individual care needs of residents and how these needs were met in the home. Staff also reported that there was good communication between staff for the benefit of residents and there was good team work.

Management of risks relating to residents

The manager described a robust assessment and admissions process before residents could be admitted to Rocky Acres. When risks were identified and assessed, a plan was put in place to meet the care needs of the resident and to reduce any risks. If, for example, a resident had dementia, this might include the use of a locked external door.

The manager described how there were good working relationships between professionals and how this helped to ensure the right care for residents. We spoke with a visiting professional who said, "The care here is very good. The staff know the residents very well and provide good care. They are very kind. If staff have any concerns about the residents, they don't hesitate to let us know."

The manager told us about falls management in the home and we were assured that the procedure and practice was good. The manager advised that few accidents or incidents occurred in the home each month. Should more falls occur, staff would look for any patterns or trends and consider actions to reduce the likelihood of further falls. The manager and staff were aware of how they could get professional advice from medical or trust staff.

The manager told us about how any resident who might be at risk of choking was referred to a speech and language therapist for specialist advice. The advice was shared with care and kitchen staff and the latest guidance for preparing food and fluids at the correct consistency was available. If any resident was at risk of losing weight, they were referred to a dietician and were weighed regularly.

Care records

The care records for residents were kept securely to ensure that they were confidential. The records were written in a professional manner and used language which was respectful of residents.

There was a care plan in place and appropriate risk assessments; staff kept detailed daily notes of the care provided. We saw how a care review was completed with the resident, their family, care staff and staff from the Trust each year. We also saw evidence that the care records were audited regularly to make sure that they were accurate and up to date.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to record keeping, audits and reviews and communication between residents, staff and other key stakeholders.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

We could see that the interactions between staff and residents were positive. There was a pleasant atmosphere throughout the home, with residents at ease, content and confident with staff. Staff were attentive and residents were able to express their needs which were promptly responded to by staff.

We could see that residents' wishes, interests and preferences were reflected in care records, for example, there was information about what activities each resident would like to do and residents' daily routines were recorded. We also saw that the care records noted preferences such as what time residents liked to get up or go to bed, whether they liked to be checked during the night, how they like to be helped with care and how they choose what to wear. Staff told us that the residents' routines depended on what they wanted to do and that the staff took a flexible approach.

We could see that staff could communicate well with any residents who had a sensory disability and with those who may sometimes be confused and in need of additional reassurance or support.

Activities

Staff told us about the range of activities available and how staff worked to make sure that each resident could have access to meaningful pastimes, hobbies, crafts or outings. On the day of the inspection we saw that residents were engaged in singing, word search and crocheting. A programme of available activities was displayed. Residents said that they enjoyed the activities on offer.

Resident involvement

We looked at the minutes of residents' meetings and could see that this gave residents an opportunity to discuss any issues and to make suggestions about what they would like. In addition, staff reported that the manager was always available to speak with any residents or their family members if they wished to discuss any issues or concerns.

There was also a satisfaction survey completed annually by residents and their family members. We looked at the summary report for the last survey completed in 2019 and this indicated that all parties were highly satisfied with the care, services and facilities in the home.

Residents made the following comments:

- "It's great here, they (staff) are wonderful, they couldn't do enough for us."
- "There isn't a better place than this. The girls keep everything lovely. They are always around and I know I can get help any time I need it."
- "The food is really good...you would never go hungry here!"
- "The staff treat us all very well...I keep myself busy and I know I can go out any time I want to...I have never thought about how I could make a complaint, for I've nothing to complain about, but I know I could go to Margaret (manager), for she's the boss, and she would sort anything out for me."

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the culture and ethos of the home, dignity and privacy, listening to and valuing residents and their relatives and taking account of the views of residents.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

Staff in the home said that they got good support from their manager who was supportive and approachable. The manager described the staff team as being committed, dedicated and reliable with a focus on delivering a high quality of care to residents.

Managerial oversight

The manager described how she spent some time working on the floor to make sure that the care delivered to the residents by the staff was good; this also allowed her to get to know the residents well.

The manager and deputy manager also spent time completing managerial tasks to make sure they are satisfied that the home runs well. Audits were completed of areas such as care records, NISCC registrations and staff training and management looked for any ways in which care and services could be improved. The manager made sure, too, that all of the systems were in place to ensure the safety of the home, for example, that all fire checks were completed.

Complaints and Compliments

The manager advised that very few complaints were raised by residents or their family members but that there were arrangements in place to deal with any complaints appropriately. Residents told us that they knew how to make a complaint and staff told us that they would not hesitate to raise issues with the manager, if needed.

The manager also shared compliments received from residents, their families and professionals as this is important for staff morale and learning. Some examples of compliments received were:

- “Thank you from the bottom of our hearts for all the love and kindness shown to (our relative) while she was in your care. Rocky Acres was a home from home and we were all made so welcome. All the staff are so kind and dedicated and all (our relative’s) friends who visited commented how welcome they were made.”
- “Thank you for the loving care and attention that was given to (my relative)...Rocky Acres was a second home to me and I will miss you all very much.”
- “To all the ladies who looked after our lovely and much loved (relative). Thank you all for your care and kindness.”

Accidents and incidents

The manager told us about the system for notifying family members, RQIA, the trusts and any other relevant parties of any accidents or incidents in the home. We looked at these records and found that they were satisfactory.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance arrangements, management of incidents, quality improvement and maintaining good working relationships.

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, and a QIP is not required or included as part of this inspection report.



The **Regulation** and
Quality Improvement
Authority

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
Web www.rqia.org.uk
Twitter @RQIANews

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