

# Announced Variation to Registration Care Inspection Report 17 July 2019



## Towell House

**Type of Service: Residential Care Home**  
**Address: 57 Kings Road, Belfast BT5 7BS**  
**Tel no: 02890401642**  
**Inspector: Bronagh Duggan**

[www.rgia.org.uk](http://www.rgia.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 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 registered to provide care within the categories of care as outlined in Section 3.0 of this report.

### 3.0 Service details

|   |  |
|---|--|
| <b>Registered Provider:</b><br>The Towell Building Trust<br><br><b>Responsible Individual:</b><br>Gillian Sarita Brooker  | <b>Registered Manager:</b><br>Gillian Millar   |
| <b>Person in charge at the time of inspection:</b><br>Gillian Millar  | <b>Date manager registered:</b><br>19 January 2015   |
| <b>Categories of care:</b><br>Residential Care (RC)<br>RC-I - Old age not falling within any other category<br>RC-DE- Dementia<br>RC-PH – Physical disability other than sensory impairment | <b>Number of registered places:</b><br>86<br><br>A maximum of 10 residents who have been formally diagnosed with dementia in RC-DE category of care. |

### 4.0 Inspection summary

An announced variation to registration inspection of Towell House took place on 17 July 2019 from 16.10 to 17.00.

This inspection was underpinned by:

- The Residential Care Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Residential Care Homes Minimum Standards, August 2011

The inspection sought to assess an application submitted to RQIA for a variation to the registration of Towell House to increase the number of places registered from 86 to 90, with the addition of four bedrooms.

The variation to registration of Towell House was granted from a care perspective following this inspection.

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

### 4.1 Inspection outcome

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

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Gillian Millar, 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 care inspection dated 29-30 April 2019**

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 30 April 2019.

#### **5.0 How we inspect**

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: variation application information and information from estates inspector.

During the inspection the inspector met with the registered manager.

The following records were examined as part of the inspection:

- Statement of Purpose
- Residents Guide
- Fire safety risk assessment information

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 the most recent inspection dated 29-30 April 2019**

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 29-30 April 2019

| Areas for improvement from the last care inspection  |   |  |
|--|---|--|
| Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005           |   | Validation of compliance                           |
| <b>Area for improvement 1</b><br><b>Ref:</b> Regulation 20 (1) (a)<br><b>Stated:</b> First time                    | The registered person shall review staffing levels in the home to ensure at all times suitably qualified, competent and experienced persons are working at the home in such numbers as are appropriate for the health and welfare of residents.<br><br>Ref: 6.4 | <b>Carried forward to the next care inspection</b> |
|  | <b>Action taken as confirmed during the inspection:</b><br><br><b>Action required to ensure compliance with this regulation 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><br><b>Ref:</b> Regulation 19 (1) (a) Schedule 3 , 3 (k)<br><b>Stated:</b> First time | The registered person shall ensure a contemporaneous note of all care and services provided to the resident, including a record of his condition and any treatment or other intervention is kept in the home.<br><br>Ref: 6.5                                   | <b>Carried forward to the next care inspection</b> |
|  | <b>Action taken as confirmed during the inspection:</b><br><br><b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next 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><br><br><b>Ref:</b> Standard 24.2<br><br><b>Stated:</b> First time                   | <p>The registered person shall ensure staff have recorded individual, formal supervision according to the homes procedures and no less than every six months for staff who are performing satisfactorily. More frequent recorded supervision is held for new staff and staff not performing satisfactorily.</p> <p>Ref: 6.4</p>                                   | <b>Carried forward to the next care inspection</b> |
|   | <p><b>Action taken as confirmed during the inspection:</b></p> <p><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></p>  |  |
| <b>Area for improvement 2</b><br><br><b>Ref:</b> Standard 24.5<br><br><b>Stated:</b> First time                   | <p>The registered person shall ensure staff have recorded annual appraisal with their line manager to review their performance against their job description and to agree personal development plans.</p> <p>Ref: 6.4</p>   | <b>Carried forward to the next care inspection</b> |
|   | <p><b>Action taken as confirmed during the inspection:</b></p> <p><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></p>  |  |
| <b>Area for improvement 3</b><br><br><b>Ref:</b> Standard 27.2<br><br><b>Stated:</b> First time                   | <p>The registered person shall ensure a review is completed to confirm the temperature in areas occupied or used by residents is between 19and 22degrees centigrade. Account must also be taken of individuals' needs and preferences. If the temperature is not being maintained in any identified area this should be actioned accordingly.</p> <p>Ref: 6.4</p> | <b>Carried forward to the next care inspection</b> |

|  |  |   |
|--|--|---|
|  | <p><b>Action taken as confirmed during the inspection:</b></p> <p><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></p> |   |
| <p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Standard 25.8</p> <p><b>Stated:</b> First time</p> | <p>The registered person shall ensure staff meetings take place on a regular basis and at least quarterly.</p> <p>Ref: 6.5</p>   | <p><b>Carried forward to the next care inspection</b></p> |
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This inspection focused solely on the variation to registration application made by the registered provider to RQIA. The areas for improvement from the last care inspection on 29-30 April 2019 were not reviewed as part of the inspection and are carried forward to the next care inspection.

### 6.3 Inspection findings

The four new bedrooms had been completed to a high standard and had been furnished to a high standard, ready for the admission of residents. Call bells were in place and working in each of the bedrooms inspected.

All of the bedrooms had en-suite accommodation and the areas were clean, bright and equipped with emergency pull cords in place.

Discussion with the registered manager confirmed that staffing numbers had been reviewed and plans were in place for staffing levels to be increased. The registered manager advised there had been recent recruitment of new staff, and that staffing levels were to be adjusted during the evening periods and night duty to meet the needs of an increased number of residents. The registered manager advised the additional places would be filled gradually in accordance with increased staffing levels for the home. The registered manager advised there were no immediate plans to achieve full occupancy of places.

The home's statement of purpose had been updated to reflect the change in registered places. The home's fire safety risk assessment was reviewed and amended to reflect increase in occupancy numbers and night time staffing levels.

No areas for improvement were required to be issued for this inspection and the variation to registration of the premises was granted from a care perspective.

|  | Regulations | Standards |
|--|-------------|-----------|
| <b>Total number of areas for improvement</b> | 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 areas for improvement identified during the previous care inspection on 29-30 April 2019 were not reviewed as part of this inspection and have been carried forward in the QIP appended to this report.

| <b>Areas for improvement from the last care inspection</b>   |   |  |
|--|---|--|
| <b>Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005</b>    |   | <b>Validation of compliance</b>                    |
| <b>Area for improvement 1</b><br><b>Ref:</b> Regulation 20 (1) (a)<br><b>Stated:</b> First time                    | The registered person shall review staffing levels in the home to ensure at all times suitably qualified, competent and experienced persons are working at the home in such numbers as are appropriate for the health and welfare of residents.<br><br>Ref: 6.4 | <b>Carried forward to the next care inspection</b> |
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| <b>Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011</b> |  | <b>Validation of compliance</b>                    |
|---|--|--|
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| <p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Standard 25.8</p> <p><b>Stated:</b> First time</p> | <p>The registered person shall ensure staff meetings take place on a regular basis and at least quarterly.</p> <p>Ref: 6.5</p> <hr/> <p><b>Action taken as confirmed during the inspection:</b></p> <p><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></p> | <p><b>Carried forward to the next care inspection</b></p> |



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