



The Regulation and
Quality Improvement
Authority

Towell House
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**Unannounced Care Inspection
of
Towell House**

17 December 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 17 December 2015 from 09.20 to 15.00. On the day of the inspection we found the home to be delivering safe, effective and compassionate care. One area for improvement was identified within the standard inspected; this related to the undertaking of annual resident satisfaction surveys. The standard we inspected was assessed as being met.

The inspection was also undertaken following information received by RQIA from a whistle blower in relation to one incident. This information was escalated to the management of the home and to the HSC Trust. We were concerned as the home had not made a referral to the HSC Trust in line with adult safeguarding procedures or notified RQIA and other relevant stakeholders. An investigation is currently being undertaken by the trust which had not concluded at the time of the inspection. Two requirements were made in relation to the management and notification of adult safeguarding issues.

The requirements and recommendation made as a result of this inspection 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 and the DHSSPS Residential Care Homes Minimum Standards (2011).

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	2	1

The details of the QIP within this report were discussed with the registered manager, Mrs Gillian Millar and the registered person, Mrs Gillian Brooker, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service details

Registered Organisation/Registered Person: The Towell Building Trust/Gillian Brooker	Registered Manager: Mrs Gillian Millar
Person in charge of the home at the time of inspection: Mrs Gillian Millar	Date manager registered: 19 January 2015
Categories of care: RC-DE, RC-I, RC-PH	Number of registered places: 84
Number of residents accommodated on day of inspection: 81	Weekly tariff at time of inspection: £470 - £548

3. Inspection focus

The inspection sought to determine if the following standard has been met:

Standard 1: Residents' views and comments shape the quality of services and facilities provided by the home.

4. Methods/processes

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

We met with five residents, three care staff, the hairdresser, the registered manager, the registered person, one visiting professional and one resident's representative.

We examined the following records during the inspection: care records of five residents, accident and incident records, complaints and compliment records, policies and procedures relating to the standard inspected, monthly monitoring visit reports, completed relatives' satisfaction surveys, completed respite residents' satisfaction surveys, the registered manager's annual report to residents and representatives and minutes of residents' committee meetings.

5. The inspection

5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an unannounced care inspection dated 30 June 2015. The inspection resulted in no requirements and no recommendations.

5.2 Review of requirements and recommendations from the last care inspection dated 30 June 2015

The last inspection resulted in no requirements or recommendations.

5.3 Standard 1: Residents' views and comments shape the quality of services and facilities provided by the home

Is care safe? (Quality of life)

The registered manager confirmed that staff actively seek residents' and their representatives' views and incorporate these into practice to ensure that choices, issues of concern or risks are recorded and acted upon.

We inspected care records and identified that the choices and preferences of each resident were clearly detailed. Care plans we inspected were signed by the resident or their representative.

In our discussions with the registered manager and staff members they confirmed that residents' meetings were held monthly. We inspected the minutes of these meetings and could confirm that the meetings were well attended, residents' views were actively sought and any actions which may be required were appropriately noted.

In our discussions with the registered manager and staff we confirmed that the management of complaints was covered during staff induction and in staff training. In our review of the complaints register we could confirm that any complaints received were reported and managed appropriately. The home had also received a number of written compliments. The registered manager advised us that the majority of compliments are given verbally and may not always be recorded.

We examined the annual report prepared by the registered manager and provided to the residents and to their representatives; this gave a summary of all complaints and compliments and outlined the importance of such feedback to the home in order to effect improvements. This practice was to be commended.

Is care effective? (Quality of management)

We noted a range of methods and processes where residents' and their representatives' views were sought about the standard of care. Staff maintained a record of actions taken to improve the care experience.

In our discussions with the registered manager we identified that satisfaction questionnaires were used to obtain the views on the quality of care provided to residents who had used respite services. In addition, satisfaction questionnaires were issued to the representatives and visitors of residents. The information obtained from the questionnaires was analysed and incorporated into practices within the home. We noted that the completed questionnaires indicated a high level of satisfaction with the services provided in the home. We made a recommendation, however, that a satisfaction survey should be completed annually for the permanent residents within the home.

We noted also that a suggestion box was present in the home. We were advised, however, that this was rarely used as residents preferred to raise any issues in the regular residents' committee meetings or to approach the manager or staff members directly.

We inspected the minutes of annual care reviews and confirmed that the views of residents and representatives were sought and recorded. We inspected monthly monitoring visit reports which confirmed that resident views on the services provided were sought and acted upon.

We noted that the home had current policies relating to involvement of residents in the running of the home and to inclusion and participation of residents in the life of the home.

Is care compassionate? (Quality of care)

In our discussions with staff and with five 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

One area of improvement was made within the standard inspected. This related to the undertaking of annual resident satisfaction surveys for permanent residents. This standard was met.

Number of requirements:	0	Number of recommendations:	1
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5.4 Additional areas examined

5.4.1 Residents' views

We met with five residents individually and others in groups who indicated that they were happy with their life in the home, their relationship with staff and the provision of care. Residents were observed to be comfortable and content in their surroundings and in their interactions with staff.

Some comments included:

- "I wouldn't live anywhere else, for this place is absolutely brilliant. The girls (staff) are very good to me and they help me with everything I need. They come to me immediately if I call them and they treat me very well. I enjoy all the company here and I like the food. The cook has been very good about finding out what I like to eat and checking that I am enjoying my food. I couldn't make a single complaint about here – it's wonderful!"
- "I think I am very lucky to live in a place like this. I love it. You couldn't ask for a better place and the girls are tremendous; nothing is too much trouble for them."
- "I have found the care here to be very good, just what I needed for a short time."
- "I moved here from another residential home which was due to close and I haven't regretted coming here one bit, it's a great place and they look after me very well."
- "This is a lovely place. I couldn't ask for better!"

5.4.2 Staff views

We met with three staff members and a hairdresser (who is not employed directly by Towell House but provides a service several days each week) 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:

- “Before coming here I worked in a nursing home for a number of years. The difference between a nursing home and Towell House is like chalk and cheese. In here, there is a big staff team and if a resident calls for help on their bell, it is answered immediately. The staff provide exceptionally good care and the place is extremely well managed and run. I couldn’t fault it.”
- “We are kept busy but all the care tasks are well organised and we have a large team of staff to deliver the care to a high standard. We have lots of training to do our jobs, and it is given either in person or on the computer. There is a system in place to let us know what training is coming up and also to alert us if any of our training is about to become overdue. This really is a very good place to work and the residents are well cared for.”

5.4.3 Resident’s representative view

We met with one resident’s representative who expressed a high level of satisfaction with the care provided in the home.

Some comments included:

- “The care here is 100 per cent, it can’t be beaten. My relative has everything (my relative) needs and couldn’t be happier, even to the point that (my relative) doesn’t want to come to family on Christmas Day and prefers to stay here!”

5.4.4 Visiting professional’s views

We met with one visiting professional who spoke positively about the care provided within the home and the professionalism of the staff.

Some comments included:

- “I find the care here to be very good. When I come here, which is almost daily, I find there is always plenty of staff around and they know the medical and care needs of the residents. The staff are very ‘on the ball’ when it comes to following up on any changing needs of the residents and they communicate very well with the community services. I have no concerns at all about the care here.”

5.4.5 Staffing

At the time of inspection the following staff members were on duty:

- 1 x general manager
- 1 x registered manager
- 1 x assistant manager
- 1 x home co-ordinator
- 2 x senior care assistants
- 8 x care assistants
- 2 x activity co-ordinators
- 3 x administrators
- 2 x cooks
- 3 x kitchen porters
- 2 x dining room assistants
- 6 x domestics
- 1 x laundry assistant
- 1 x maintenance

Three senior care assistants and four care assistants were scheduled to be on duty later in the day. The two activity co-ordinators and one kitchen porter were to be on duty until 20.30. One senior care assistant and four care assistants were scheduled to be on overnight duty. The registered manager advised us that staffing levels were appropriate for the number and dependency levels of the residents accommodated.

5.4.6 Environment

The home was found to be clean and tidy. Décor and furnishings were of a high standard. We noted that the trees in the grounds surrounding the home were colourfully decorated with festive lighting. The residents we spoke with expressed their appreciation for the efforts of staff to decorate the inside and outside environment. We were advised by the general manager that the home had also received many messages of appreciation from the public.

We were also advised by the general manager that Towell House has received funding to create a sensory garden which will further enhance the outside environment for the residents.

5.4.7 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.

5.4.8 Adult Safeguarding

Information was received by RQIA from a whistle blower in relation to one incident. This information was escalated to the management of the home and to the HSC Trust. We were concerned as the home had not made a referral to the HSC Trust in line with adult safeguarding procedures or notified RQIA and other relevant stakeholders. An investigation is currently being undertaken by the trust which had not concluded at the time of the inspection.

Requirements were made in relation to the management and notification of adult safeguarding issues.

The registered manager informed us that training in adult safeguarding was arranged for all staff, including management, involved in the allegation and how it was managed. Relevant policies and procedures within the home have also been revised and disseminated to staff via team meetings, staff training and daily staff handover meetings.

6. Quality Improvement Plan

The issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with the registered manager, Mrs Gillian Millar and the registered person, Mrs Gillian Brooker, as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The DHSSPS Residential Care Homes Minimum Standards (2011). They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions taken by the Registered Manager/Registered Person

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to care.team@rqia.org.uk and assessed by the inspector.

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 in this report do not absolve the registered provider/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan

Statutory Requirements

Requirement 1 Ref: Regulation 13 (1) Stated: First time To be completed by: 17 December 2015	The registered person must ensure that any allegations are managed in line with the adult safeguarding policies and procedures to protect the health and welfare of residents.
	Response by Registered Person(s) detailing the actions taken: All allegations are managed as per Homes Policy in order to protect residents welfare. All staff including management have attended Safeguarding Training in December 2015.
Requirement 2 Ref: Regulation 30 (1) Stated: First time To be completed by: 17 December 2015	The registered person must ensure that all adult safeguarding issues are notified to RQIA and all other relevant stakeholders in a timely manner in line with adult safeguarding policies and procedures.
	Response by Registered Person(s) detailing the actions taken: All relevant stakeholders including the RQIA will be informed in a timely manner as per Homes Policy regarding any Safeguarding issues.

Recommendations

Recommendation 1 Ref: Standard 1.6 Stated: First time To be completed by: 31 March 2016	The registered manager should ensure that a satisfaction survey is completed annually for the permanent residents within the home.
	Response by Registered Person(s) detailing the actions taken: Satisfaction survey has been prepared in a format suitable for all abilities and will be distributed to permanent residents by end of January 2016.

Registered Manager completing QIP	Gillian Miller	Date completed	20/1/16
Registered Person approving QIP	Jill Brooker	Date approved	20/1/16
RQIA Inspector assessing response	Alice McTavish	Date approved	21/1/16

Please ensure this document is completed in full and returned to care.team@rqia.org.uk from the authorised email address