



Announced Variation to Registration Care Inspection Report 21 May 2018



Nazareth House Care Village

Type of Service: Residential Care Home
Address: 516 Ravenhill Road, Belfast, BT6 0BW
Tel No: 028 9069 0600
Inspector: Patricia Galbraith

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 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 twenty two beds that provides care for residents who fall within the categories of care cited in section 3.0 of this report.

3.0 Service details

Registered Provider: Nazareth House Care Village Responsible Individual: Jenny Hall	Registered Manager: Siobhan Regan
Person in charge at the time of inspection: Siobhan Regan	Date manager registered: 26 May 2010
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE – Dementia	Number of registered places: 22

4.0 Inspection summary

An announced variation to registration inspection of Nazareth House Care Village took place on 21 May 18 from 11.00 to 15.00.

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 sought to assess an application submitted to RQIA for a variation to the registration of Nazareth House Care Village for the registration of six additional residential care beds and to assess the readiness of the establishment to admit residents.

Information had been gathered throughout the registration and inspection process. Scrutiny of this information means that the registration is granted from a care perspective. A separate report will be issued in respect of an estates inspection undertaken on the same day.

There were examples of good practice evidence in relation to the general environment which was completed to a high standard, the governance and management arrangements; staff development and training; and the planned phased admissions to the home.

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 Jenny Hall, General Manager and Siobhan Regan, Registered Manger, 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 January 2018

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 submitted to RQIA to increase occupancy from twenty two to twenty eight
- the proposed statement of purpose
- the proposed residents guide
- notifiable events since previous care inspection
- written and verbal communication received since the previous care inspection
- the previous care inspection report
- the returned QIP from previous care inspection
- a review of recruitment files for new staff and an over view of the numbers of staff recruited to date

Specific methods/processes used in this inspection included the following:

- an examination of the general environment of the home and its readiness to admit residents
- a review of the statement of purpose
- a review of residents guide
- a review of staff training and induction records
- a review of the staff duty rota and planned skill mix
- a discussion regarding the admission plans for residents
- a review of fire safety risk assessment

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

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 January 2018

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 19 January 2018

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
Area for improvement 1 Ref: Regulation 21 (1) (a) Stated: Second time	The registered person shall review the care staffing levels to accommodate residents' dependencies and taking account the layout of the home. Ref: 6.4	Met
	The staffing levels had been reviewed and had taken into account the residents' dependencies and the lay out of the home.	
Area for improvement 2 Ref: Regulation 27.- (4) (f) Stated: First time	The registered person shall ensure all staff have fire training to meet the regulations. Ref: e.g. 6.4	Met
	The fire training was reviewed and all staff had completed fire training to meet regulations.	

6.3 Inspection findings

Environment

The responsible person and the registered manager accompanied the inspectors to assess the new facilities.

Nazareth House Care Village will provide accommodation for twenty eight residents.

The home is situated in a quiet open area and offers bright and spacious accommodation on one level. All areas are wheelchair accessible.

The variation proposed six additional residential care beds. Residents' bedrooms and additional communal lounge areas were presented to a high specification and were tastefully decorated. All bedrooms were equipped with a range of built-in furniture and had ensuite facilities. Assisted bathrooms and toilet facilities are also available in each unit.

Each of the streets had existing dining areas which are well furnished with tables and chairs suitable to the individual needs of residents. There is sufficient space to accommodate an additional six residents. This was confirmed by the estates inspector. Each unit had a sluice and treatments room which were equipped with appropriate equipment.

There is an area identified in each unit where there is adequate storage space available to ensure that residents care records are stored securely.

The home had a busy and varied activities programme in place. There are arrangements in place to meet residents' religious and spiritual needs; there is a daily service in the home which residents can attend in the home's chapel. There is also a café, a shop, library facilities (including audio tapes) and a reminiscence room.

Adequate car parking facilities are provided.

Statement of Purpose and Service User's Guide

Prior to the inspection the statement of purpose and the service users guides were submitted to RQIA and a review of both documents found them to be satisfactory and reflect the additional facilities.

Policies and Procedures

A policy and procedure manual was available and centrally indexed the policies and procedures for all operational areas of the home. A sample of policies and procedures reviewed evidenced that they included the date when issued, reviewed or revised. A system is in place to ensure that policies and procedures are reviewed three yearly minimum and more frequently if required.

Staff recruitment processes and Staff Induction

A review of recruitment policies and procedures showed records were maintained in keeping with legislative requirements. Systems and processes were in place to ensure the staff received a comprehensive induction and records were maintained.

Staff Training Records

A review evidenced that a training matrix was in place. Review of the training matrix indicated that training had been planned to ensure mandatory training requirements are completed. The registered manager monitors staff training and when staff complete training the matrix is up dated.

Admission Planning

A discussion with the registered manager and other management representatives advised that arrangements for the admission of new residents to the home were being co-ordinated and admissions to the unit are planned to proceed on a phased basis. This is to ensure that adequate time is given to allow staff to get to know the residents and for them to become familiar with their new surroundings.

Staffing

A review of the duty rota confirmed it accurately reflected the staff working in the home and the hours they had worked. A discussion with the registered manager outlined the proposed staffing structure and that these would be reviewed in accordance with the health and welfare of individual residents care needs. The staffing arrangements will be reviewed and monitored at subsequent care inspections.

	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.



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