

Unannounced Care Inspection Report 9 February 2021



Nazareth House Care Village

Type of Service: Residential Care Home (RCH)

Address: 516 Ravenhill Road, Belfast BT6 0BW

Tel No: 028 9069 0600

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 residential care home registered to provide residential care for up to 28 residents.

3.0 Service details

Organisation/Registered Provider: Poor Sisters of Nazareth Responsible Individual: John O'Mahoney	Registered Manager and date registered: Carmel Blaney, 12 June 2020
Person in charge at the time of inspection: Carmel Blaney	Number of registered places: 28
Categories of care: Residential Care (RC) I – Old age not falling within any other category. DE – Dementia.	Number of residents accommodated in the residential home on the day of this inspection: 28

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.

An inspection was undertaken on 9 February 2021 between 09.50 and 16.30 hours. The inspection sought to assess progress with an area for improvement identified during the last care inspection and to assess whether the home was providing safe, effective, compassionate and well led care.

The following areas were examined during the inspection:

- infection prevention and control (IPC) practices including the use of personal protective equipment (PPE)
- the internal environment
- staffing arrangements
- care delivery
- care records
- governance and management arrangements.

Residents said that they received very good care in Nazareth House Care Centre and that staff treated them well.

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 Carmel Blaney, 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.

5.0 How we inspect

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

- the registration status of the home
- notifiable events since the previous care inspection
- 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 seven residents, two care staff, a member of domestic staff, one resident's relative and one visiting professional. Ten questionnaires were left in the home to obtain feedback from residents and residents' representatives. A poster was also displayed for staff inviting them to provide feedback to RQIA on-line. The inspector provided 'Tell Us' cards for distribution to residents' relatives so that they might give feedback to RQIA regarding the quality of service provision. comments provided are included within the body of the report.

The following records were examined during the inspection:

- duty rotas
- staff induction
- staff training
- staff supervision and appraisal
- competency and capability assessments
- staff registrations with professional body
- a selection of quality assurance audits
- staff meeting minutes
- resident meeting minutes
- complaints and compliments
- incidents and accidents
- three residents' care records
- Regulation 29 monthly quality monitoring reports.

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 previous inspection

The most recent inspection of the home was an unannounced care inspection undertaken on 6 March 2020.

Areas for improvement from the last care inspection		
Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011		Validation of compliance
Area for improvement 1 Ref: Standard 6.1 Stated: First time	The registered person shall ensure that residents care records evidence that the resident and/or their representative have been consulted regarding the care planning process.	Met
	Action taken as confirmed during the inspection: Inspection of care records confirmed that this was addressed.	

6.2 Inspection findings

6.2.1 Infection Prevention and Control (IPC) practices including the use of Personal Protective Equipment (PPE)

Signage was present at the entrance to the home to reflect the current guidance on Covid-19. All visitors and staff had a temperature and symptom check completed. Staff had a further temperature check completed before they left their working shift. Residents had health monitoring checks completed twice daily. Records were maintained of all health checks.

There was a dedicated room for staff to apply and take off the correct PPE before commencing duties. PPE was readily available and PPE stations throughout the home were well stocked. Staff told us that sufficient supplies of PPE had been maintained throughout the Covid-19 pandemic. We saw that all staff, with the exception of one for a short period, used PPE according to the current guidance. The manager provided assurances that all staff would be immediately reminded of the correct use of PPE and close monitoring would continue.

Hand sanitiser was in plentiful supply and was conveniently placed throughout the home. We observed that staff carried out hand hygiene at appropriate times.

Domestic and care staff told us that an enhanced cleaning schedule was in operation and that deep cleaning was carried out, as necessary. Records of deep cleaning were maintained along with advice and guidance for domestic staff.

6.2.2 The internal environment

An inspection of the internal environment was undertaken; this included examination of bedrooms, bathrooms, the lounges and dining areas.

We saw that residents' bedrooms were very spacious and had en-suite bathrooms. Each bedroom was personalised with items of memorabilia and special interests. Furniture and soft furnishings were of good quality. The home was decorated to a high standard, was well ventilated and comfortable. All areas within the home were found to be clean and free of malodours. Walkways throughout the home were kept clear and free from obstruction.

6.2.3 Staffing arrangements

We could see that the duty rota accurately reflected the staff working in the home. We were able to identify the person in charge in the absence of the manager and the manager's hours were recorded on the rota.

The manager explained that the staffing levels for the home were safe and appropriate to meet the number and dependency levels of residents accommodated and that staffing levels would be adjusted when needed. We could see that there was enough staff in the home to quickly respond to the needs of the residents and provide the correct level of support.

We saw that the manager had a system in place to provide staff with regular supervision and that staff received an annual appraisal. We found that staff competency and capability assessments were completed for staff left in charge of the home when the manager was not on duty. We reviewed the records of mandatory training and saw that there was a system in place to ensure training was kept up to date. We saw that additional training was also provided for staff, if required.

The staff reported that they all worked together for the benefit of the residents, they felt well supported in their roles and were satisfied with the staffing levels. Staff said that there was good team working and that there was effective communication between staff and management.

6.2.4 Care delivery

We observed that residents looked well cared for; they were well presented and nicely dressed. It was evident that staff knew the residents well; all staff, including domestic and catering staff, spoke to residents kindly and were very attentive. Residents appeared to be content and settled in their surroundings and in their interactions with staff. The atmosphere in the home was calm, relaxed and friendly.

Some comments made by residents included:

- "The care is very good, I feel safe here."
- "The staff are excellent, they treat everyone very well."
- "The staff are very kind."

- “I had a fall a few days ago – the staff came to help me immediately.”

The staff told us that they recognised the importance of maintaining good communication with families whilst visiting was disrupted due to the Covid-19 pandemic. The care staff assisted residents to make phone calls or use video calls with their families. Arrangements had been in place to facilitate relatives visiting their loved ones at the home and care partner arrangements had been put in place to very good effect. A resident’s relative made the following comments:

- “The staff keep in good contact with us about (our relative)...she loves it here, the staff are wonderful, very supportive. I can see when I visit that the staff take every precaution against Covid-19. They have been so good about introducing the care partners which has made such a difference to residents and families. My (relative) has become much more like her old self, is interested in the world around her, is asking for new clothes so she can look good. We are absolutely delighted with the care here...the home is spotlessly clean and the food is wonderful.”

We met with a visiting professional who made the following comments:

- “I am in this home very regularly. I find that the care is very good. The staff are very familiar with the needs of the residents and they keep very good communication with my service. If I make any recommendations about how the residents should be managed, the staff follow these. Overall, this is a very good home which is well managed.”

We observed the serving of the main meal and found this to be a pleasant and unhurried experience for residents. There was choice of meals offered, the food was attractively presented and smelled appetising, and portions were generous. There was a variety of drinks available for residents. We saw that staff were helpful and attentive to residents.

Four questionnaires were completed by residents and returned to RQIA. All respondents indicated that they were very satisfied with the care and services provided in Nazareth House Care Village. Some comments included:

- “Management from the top down is excellent, hence the good quality of care staff appointed. One feels secure.”
- “I am delighted about the weekly and fortnightly bulletins informing us about Covid-19. I am also delighted about the privacy afforded to me in my room.”

6.2.5 Care records

We reviewed the care records of three residents and saw that the records were written in a professional manner and used language which was respectful of residents. We saw evidence that detailed, comprehensive care plans were in place to direct the care required. Care plans and associated risk assessments were completed and reviewed on a regular basis.

Review of the progress notes confirmed that staff maintained a record of treatment provided in the home along with the outcomes of such treatment. Care records evidenced that staff took prompt and responsive action when meeting residents’ needs, as required.

6.2.6 Governance and management arrangements

There was a clear management structure within the home. Staff commented positively about the manager and described her as supportive, approachable and always available for guidance. We saw that staff meetings were held to support good communication between staff and management.

There was a system of audits which covered a range of areas such as accidents and incidents, falls and IPC. The audits were completed monthly and this helped to ensure that the manager had effective oversight of care delivery to residents.

We examined the records of accidents and incidents which had occurred in the home and found that these were managed and reported appropriately.

We examined the system in place to manage any complaints received; discussion with the manager provided assurance that complaints were managed appropriately and were viewed as an opportunity to learn and improve. We also saw that numerous compliments were received by staff. Some examples of compliments received are as follows:

- “A huge thank you to you all for being so caring and thoughtful towards my (relative) during her stay in the home. My family is so grateful and comforted by your kindness.”
- “Just a short note to reiterate my thanks and appreciation to you and your staff for the care given to (my relative). From my first contact with yourself I was impressed with your professional and caring approach. This was clearly reflected in every staff member who looked after (my relative)...”

We looked at the records of the visits by the registered provider and saw that these were completed in detail; where action plans were put in place, these were followed up to ensure that the actions were correctly addressed.

Areas of good practice

We found good practice throughout this inspection in relation to the warm and supportive interactions between residents and staff, the cleanliness of the home and to the systems to ensure good management and governance.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.3 Conclusion

Throughout the inspection, residents within the home were attended to by staff in a prompt and respectful manner. The environment was clean and tidy and staff wore PPE in line with the guidance. We were assured that the care provided in Nazareth House Care Village was safe, effective, compassionate and well led.

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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