

# Inspection Report

**Name of Service:** Andena

**Provider:** Andena Residential Home Limited

**Date of Inspection:** 4 February 2025

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

## 1.0 Service information

<b>Organisation/Registered Provider:</b>	Andena Residential Home Limited
<b>Responsible Individual:</b>	Mr James Joseph McConville
<b>Registered Manager:</b>	Mrs Christina Ann Shields
<b>Service Profile –</b>	
<p>This home is a registered residential care home which provides health and social care for up to 36 residents.</p> <p>Residents have a range of needs and the home provides care for residents living with dementia, general residential care and mental health disorders.</p> <p>The home is divided over two floors and residents have access to communal lounges, a conservatory, a dining area and gardens.</p>	

## 2.0 Inspection summary

An unannounced inspection took place on 4 February 2025, from 10.00 am to 4.00 pm by a care inspector.

The inspection was undertaken to evidence how the home is performing in relation to the regulations and standards; and to assess progress with the areas for improvement identified, by RQIA during the last care inspection on 26 January 2024; and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that safe, effective and compassionate care was delivered to residents and that the home was well led. Details and examples of the inspection findings can be found in the main body of the report.

It was evident that staff promoted the dignity and well-being of residents and that staff were knowledgeable and trained to deliver safe and effective care.

As a result of this inspection all areas for improvement from the previous inspection were assessed as having been addressed by the provider. Full details, including new areas for improvement identified, can be found in the main body of this report and in the quality improvement plan (QIP) in Section 4.

### **3.0 The inspection**

#### **3.1 How we Inspect**

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the home was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous areas for improvement issued, registration information, and any other written or verbal information received from resident's, relatives, staff or the commissioning Trust.

Throughout the inspection process inspectors seek the views of those living, working and visiting the home; and review/examine a sample of records to evidence how the home is performing in relation to the regulations and standards.

Through actively listening to a broad range of service users, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

#### **3.2 What people told us about the service**

Residents described staff as "lovely" and "helpful." Residents spoken with said that they were happy living in Andena. Comments included, "I love it here, it is great," and "I can't complain about this place."

There was evidence of a range of structured activities offered to the residents. One resident said, "there is a lady who comes in to do activities, games and different things."

Discussion with residents confirmed that they were able to choose how they spent their day. For example, residents could choose where they wished to have their meal and what daily activity they wished to attend.

Resident questionnaires returned confirmed that residents were satisfied with the care provided in Andena. Comments included, "Staff are kind and listen if I have a problem," "I feel safe in Andena," and "I am pleased with the care, couldn't get any better."

One relative spoken with said, "I am very happy, the staff are helpful, they are all lovely."

Staff said there was good team work and that they felt well supported in their role and that they were satisfied with the staffing levels. Staff were observed to have good knowledge of the

residents and knew how best to help them. Observation of the delivery of care evidenced that residents' needs were met compassionately by the number and skills of the staff on duty.

### **3.3 Inspection findings**

#### **3.3.1 Staffing Arrangements**

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of residents. There was a lack of robust oversight with regards to references; for example, one recruitment record showed that the most recent employer had not been contacted for a reference. An area for improvement was identified.

#### **3.3.2 Quality of Life and Care Delivery**

Staff met at the beginning of each shift to discuss any changes in the needs of the residents. Staff were knowledgeable of individual residents' needs, their daily routine wishes and preferences.

Staff were skilled in communicating with residents; they were respectful, understanding and sensitive to residents' needs.

It was observed that staff respected residents' privacy by their actions such as knocking on doors before entering, discussing residents' care in a confidential manner, and by offering personal care to residents discreetly. Staff were also observed offering residents choice in how and where they spent their day or how they wanted to engage socially with others.

Residents were observed to be enjoying one another's company in the lounge. Residents were also observed to be enjoying their own activity such as watching TV, reading the newspaper or spending time in their own bedrooms. There was a homely atmosphere.

At times some residents may require the use of equipment that could be considered restrictive or they may live in a unit that is secure to keep them safe. It was established that safe systems were in place to safeguard residents and to manage this aspect of care.

Good nutrition and a positive dining experience are important to the health and social wellbeing of residents. Residents may need a range of support with meals; this may include simple encouragement through to full assistance from staff and their diet modified.

Observation of the lunchtime meal and discussion with staff confirmed that a meal time coordinator took charge during mealtimes to ensure good communication across the team about changes in residents' dietary needs.

The dining experience was an opportunity for residents to socialise, the atmosphere was calm, relaxed and unhurried. It was observed that residents were enjoying their meal and their dining experience. It was evident that staff had made an effort to ensure residents were comfortable, had a pleasant experience and had a meal that they enjoyed.

Arrangements were in place to meet residents' social, religious and spiritual needs within the home. Residents' needs were met through a range of individual and group activities such as memory games, bingo and one to one support.

The weekly programme of social events was reviewed and residents confirmed that they were informed of the activities planned for the week and of their opportunity to be involved and looked forward to attending the planned events.

The importance of engaging with residents was well understood by the manager and staff. Observation of the planned activity confirmed that staff knew and understood residents' preferences and wishes. Staff helped residents to participate in planned activities or supported them to remain in their bedroom with their chosen activity such as reading or watching television. On the day of inspection, the planned activity was word search games, the activity coordinator was also supporting residents to fill in questionnaires.

Residents said that they were encouraged to participate in regular resident meetings which provided an opportunity for them to comment on aspects of the running of the home. For example, the planning of activities and the provision of meals. A review of records confirmed that resident meetings were taking place on a regular basis.

### 3.3.3 Management of Care Records

Residents' needs were assessed by a suitably qualified member of staff at the time of their admission to the home. Following this initial assessment care plans were developed to direct staff on how to meet residents' needs and included any advice or recommendations made by other healthcare professionals.

Residents care records were held confidentially.

Care records were person centred, well maintained, regularly reviewed and updated to ensure they continued to meet the residents' needs. Care staff recorded regular evaluations about the delivery of care. Residents, where possible, were involved in planning their own care and the details of care plans were shared with residents' relatives, if this was appropriate.

### 3.3.4 Quality and Management of Residents' Environment

The home was clean, tidy and well maintained. Bedrooms and communal areas were well decorated, suitably furnished, warm and comfortable. The communal areas had 'homely' touches such as books, newspapers and magazines. Resident's bedrooms were personalised with photographs and other items or memorabilia.

Review of records confirmed that environmental and safety checks were carried out, as required on a regular basis, to ensure the home was safe to live in, work in and visit.

The cleaning store was appropriately secured. However, shortfalls were identified with regards to the supervision of the domestic cleaning trolley containing cleaning chemicals which could present a potential risk to residents' health and wellbeing. An area for improvement was identified.

### 3.3.5 Quality of Management Systems

There has been no change in the management of the home since the last inspection. Mrs Christina Ann Shields has been the manager in this home since 1 April 2005.

Residents and staff commented positively about the management team and described them as supportive, approachable and able to provide guidance.

Review of a sample of records evidenced that a robust system for reviewing the quality of care, other services and staff practices was in place. There was evidence that the /management team responded to any concerns, raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services provided by the home.

### 4.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with Regulations and Standards.

	Regulations	Standards
<b>Total number of Areas for Improvement</b>	1	1

Areas for improvement and details of the Quality Improvement Plan were discussed with Mrs Christina Ann Shields, manager as part of the inspection process. The timescales for completion commence from the date of inspection.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005</b>	
<b>Area for improvement 1</b> <b>Ref:</b> Regulation 14 (2) (a) <b>Stated:</b> First time <b>To be completed by:</b> 4 February 2025	The registered person shall ensure that all parts of the home to which residents have access, are free from hazards to their safety. This is specifically reference to access and supervision of the cleaning trolleys in the home.  Ref: 3.3.4  <b>Response by registered person detailing the actions taken:</b> All staff were once again reminded not to leave cleaning trolleys unattended at any time.
<b>Action required to ensure compliance with the Residential Care Homes Minimum Standards (December 2022) (Version 1:2)</b>	

<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 19.2</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 4 February 2025</p>	<p>The registered person will ensure that before making an offer of employment two written references are obtained, one of which is from the applicant's present or most recent employer.</p> <p>Ref: 3.3.1</p>
	<p><b>Response by registered person detailing the actions taken:</b> We undertake for any future employees that this will be put in place.</p>

*\*Please ensure this document is completed in full and returned via the Web Portal\**



## The Regulation and Quality Improvement Authority

James House  
2-4 Cromac Avenue  
Gasworks  
Belfast  
BT7 2JA

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**Tel:** 028 9536 1111



**Email:** [info@rqia.org.uk](mailto:info@rqia.org.uk)



**Web:** [www.rqia.org.uk](http://www.rqia.org.uk)



**Twitter:** @RQIANews