

Inspection Report

Name of Service: Rocky Acres

Provider: Rocky Acres

Date of Inspection: 15 May 2025

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

1.0 Service information

Organisation/Registered Provider:	Rocky Acres
Responsible Person(s):	Margaret Cully Jean Cully
Registered Manager:	Margaret Cully
Service Profile – This home is a registered residential care home which provides health and social care for up to thirteen residents over the age of 65. The home is situated on the ground floor and provides private and shared bedrooms with a communal lounge and dining room.	

2.0 Inspection summary

An unannounced inspection took place on 15 May 2025, from 9.45 am to 5pm 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 25 April 2025 and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

The inspection found 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 well trained to deliver safe and effective care.

Residents said that living in the home was a good experience. Residents unable to voice their opinions were observed to be relaxed and comfortable in their surroundings and in their interactions with staff; laughing and smiling.

As a result of this inspection one area for improvement was assessed as having been addressed by the provider. Other areas for improvement have either been stated again or will be reviewed at a future inspection. 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. Inspectors will also observe care delivery and may conduct a formal structured observation during the inspection.

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 told us 'the food's great, we get a good variety', and "on the whole we are very well looked after". Speaking of enjoying one another's company, one resident said "we're very content here".

Residents were able to continue their individual routines and relatives were heartened by this person centred care. It was evident that residents had a choice in how they spent their day; some were reading the daily newspapers, watching TV or chatting in a group, while others enjoyed their own company, sitting elsewhere or knitting. There was choice in how residents spent their day; some saying that they like to stay up late to watch TV while others like to go to bed early.

Relatives told us that "it couldn't be a nicer place", and "staff go above and beyond. We were advised of the 'family feel' that the staff provide and make the relatives and other visitors feel at home with their hospitality. Relatives also told us they felt confident in the care that is provided and that care staff and management are approachable.

Five staff surveys were received following the inspection, providing positive feedback.

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 evidence of systems in place to manage staffing. Enhancement of the recruitment documentation was discussed with the manager. This will be reviewed at a future inspection.

Residents said that there was enough staff on duty to help them. Staff said there was good team work and that they felt well supported in their role and they were satisfied with the staffing levels. Staff were always available and responded promptly to residents. Staff knew what they were doing and demonstrated good knowledge of the resident's needs.

The rota identified who was in charge in the absence of the manager and where there was a gap in the rota, staff helped one another to ensure each shift was covered in good time. Staff told us that they enjoy their work and enjoy the 'craic' that they have amongst themselves and with the residents. They advised that management are supportive and approachable.

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 prompt in recognising residents' needs and any early signs of distress, including those residents who had difficulty in making their wishes or feelings known.

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

Staff knew the individual likes and preferences which was noted among the resident's, offering "when staff here do my hair I feel like a girl in a big picture" and, "I don't like my nails painted, but the others do and it looks nice".

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.

Where a resident was at risk of falling, measures to reduce this risk were put in place. For example, appropriate footwear was worn and walking aids were encouraged to be close to residents.

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 served in the dining room confirmed that enough staff were present to support residents with their meal and that the food served smelt and looked appetising and nutritious.

This was an opportunity for residents to socialise, choosing who they sat beside. The atmosphere was calm, relaxed and unhurried. Residents were enjoying their meal and their dining experience as they gave positive feedback to the staff about meal and how much they enjoyed all of their meals. It was clear that staff had made an effort to ensure residents were comfortable, had a pleasant experience and had a meal that they enjoyed. Staff offered assistance at the lunchtime meal to residents in order to facilitate independence where possible and offered a 'check in' to ensure that help was still not required. Resident's appreciated this. A choice of juice, seasoning and condiments were available.

Staff understood that meaningful activity was not isolated to the planned social events or games. Staff knew and understood residents' preferences and wishes and helped residents to participate in planned activities or to remain in their bedroom with their chosen activity such as reading, listening to music or knitting. The residents told us that they enjoyed spending time in the afternoon together either chatting and reminiscing or watching their favourite shows on TV. Some of them enjoyed staying up late to 'watch a good movie'. Recent seasonal events had been celebrated in the home and residents spoke fondly of this.

Life story work with residents and their families helped to increase staff knowledge of their residents' interests and enabled staff to engage in a more meaningful way with their residents throughout the day.

Arrangements were in place to meet residents' social, religious and spiritual needs within the home.

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 and the manager had robust system in place for ensuring that care records reflected most current need.

Records for managing falls were reviewed and referrals had been made to other services in order to have a multi-disciplinary approach to preventing falls and managing them safely. When a person has a fall, they may require monitoring for a period of time to ascertain whether further medical attention is required. These monitoring records were not completed in a consistent manner and an area for improvement was identified.

Care plans 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. For example, residents' bedrooms were personalised with items important to the resident such as colour schemes, photographs, paintings and ornaments. Bedrooms and communal areas were well decorated, suitably furnished, warm and comfortable. There were 'homely' touches such as flowers, newspapers, available and the décor of the home included reminders of the local area such as photographs and paintings on the walls.

The manager completed regular checks in the home to monitor the environment and ensure repair items were actioned in a timely manner.

Review of records and observations confirmed that effective systems and processes were in place to manage infection prevention and control which included policies and procedures and regular monitoring of the environment and staff practice to ensure compliance.

3.3.5 Quality of Management Systems

There has been no change in the management of the home since the last inspection.

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

The home has engaged in My Home Life, a programme designed to help care homes improve quality of life for the residents. Staff spoke of how this programme helped them to think of ways to provide person centred care.

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.

Relatives said that they knew how to report any concerns or complaints and said they were confident that the manager would address their concerns. Relatives also said that staff were very responsive to providing person centred care, knowing the residents and seeking to make them feel at home.

The home has received many cards and thank you letters which were shared with staff for their encouragement.

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
Total number of Areas for Improvement	0	2*

* the total number of areas for improvement includes one standard which has been carried forward for review at a future inspection

Areas for improvement and details of the Quality Improvement Plan were discussed with Margaret Cully, manager as part of the inspection process.

Quality Improvement Plan	
Action required to ensure compliance with the Residential Care Homes Minimum Standards (version 1.2 Dec 2022)	
Area for improvement 1 Ref: Standard 32.3 Stated: First time To be completed by: Immediate and ongoing (18 June 2024)	The registered person shall ensure that quantities of Schedule 2 and 3 controlled drugs subject to safe custody requirements are reconciled on each occasion when responsibility for safe custody is transferred at shift change. Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.
Area for improvement 2 Ref: Standard 8.2 Stated: First time To be completed by: 15 May 2025	The registered person will ensure that post falls records are maintained consistently. Ref: 3.3.3 Response by registered person detailing the actions taken: Attention will be given to Area 2. All staff will receive refresher training.

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



Tel: 028 9536 1111



Email: info@rqia.org.uk



Web: www.rqia.org.uk



Twitter: @RQIANews