



Unannounced Care Inspection Report 26 September 2019



Ashbrook Care Home

Type of Service: Residential Care Home

Address: 50 Moor Road, Coalisland, Dungannon, BT71 4QB

Tel No: 028 8774 1010

Inspector: John McAuley

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 registered residential care home which provides care for up to nine residents. The home is situated in the same building with a registered nursing home.

3.0 Service details

Organisation/Registered Provider: Ashbrook Home Ltd Responsible Individual: Marcus James Mulgrew	Registered Manager and date registered: Gillian Larmour – 11 May 2018
Person in charge at the time of inspection: Bernadeth Mendoza senior care assistant	Number of registered places: 9
Categories of care: Residential Care (RC) I - Old age not falling within any other category	Total number of residents in the residential care home on the day of this inspection: 8

4.0 Inspection summary

This unannounced inspection took place on 26 September 2019 from 09.15 to 13.20 hours.

The inspection sought to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

Evidence of good practice was found in relation to the nice atmosphere in the home, with residents clearly benefitting from the consistency of staff on duty, their knowledge and understanding of their needs and good team working amongst staff. Good practice was also found in relation to the governance arrangements and feedback from staff in terms of the good working relationships in the home.

No areas requiring improvement were identified during this inspection.

Residents described living in the home as being a good experience/in positive terms. Some of the comments included statements such as; “It’s very good here. I am very happy and content and I couldn’t be cared for better” and “I am being cared for exceptionally well here. The staff do a wonderful job here in every way”.

Comments received from residents, people who visit them and staff during and after the inspection, are included in the main body of this report.

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 Seamus Mulgrew, Director, as part of the inspection process and can be found in the main body of the report.

4.2 Action/enforcement taken following the most recent inspection dated 12 March 2019.

No further actions were required to be taken following the most recent inspection on 12 March 2019.

5.0 How we inspect

To prepare for this inspection we reviewed information held by RQIA about this home. This included the findings from the previous inspections, registration information, and any other written or verbal information received, such as notification reports.

During our inspection we:

- where possible, speak with residents, people who visit them and visiting healthcare professionals about their experience of the home
- talk with staff and management about how they plan, deliver and monitor the care and support provided in the home
- observe practice and daily life
- review documents to confirm that appropriate records are kept

Questionnaires and 'Have We Missed You' cards were provided to give residents and those who visit them the opportunity to contact us after the inspection with views of the home. A poster was provided for staff detailing how they could complete an electronic questionnaire. No responses from any of these were received in time for inclusion to this report.

During the inspection a sample of records was examined which included:

- staff duty rota
- training schedule and training records
- three residents' records of care
- complaint records
- compliment records
- accident/incident records from 1 July 2109
- reports of visits by the registered provider/monthly monitoring reports
- fire safety risk assessment
- RQIA registration certificate

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 last care inspection dated 12 March 2019

There were no areas for improvements made as a result of the last care inspection.

6.2 Inspection findings

6.3 Is care safe?

Avoiding and preventing harm to residents and clients from the care, treatment and support that is intended to help them.

Throughout this inspection residents in the home at the time of this inspection confirmed that they felt safe in the home and that staff were responsive to their needs and were kind and supportive.

Staffing

Inspection of the duty rota confirmed that it accurately reflected the staff on duty at the time of this inspection.

An inspection of the staffing levels found that these were in keeping with residents' dependencies and took account of the size and layout of the home and fire safety requirements. Catering, housekeeping, laundry and administration staff are in place to meet these aligned roles and duties. Staff spoke positively on the staffing provision.

A competency and capability assessment is completed for any member of staff with the responsibility of being in charge in the absence of the manager. A sample of one of these assessments was inspected and found to be appropriately in place.

Staff induction, supervision and appraisal

Discussions with staff confirmed that they had received a comprehensive programme of induction on appointment. An inspection of the programme of supervisions and appraisals found these were being maintained in a regular and up-to-date basis for all staff. Staff spoke positively about this provision.

A system of monitoring the registration details of care staff with the Northern Ireland Social Care Trust (NISCC) was in place. This was being audited on a monthly basis.

Staff training

Inspection of staff training records found that mandatory requirements and other training needs were being met. A matrix of staff training is in place which identifies when staff have last received their mandatory training and when up-date training is required. Added to this there was accessible guidance information available to staff on areas of good practice, safety alerts, policies and procedures and training courses.

Safeguarding

Discussions with staff confirmed that they had knowledge and understanding of safeguarding principals. Staff were aware of their obligations to report any concerns and advised that they found management to be approachable. They also advised that they would have no hesitation to report any concerns and that they would have confidence in management in dealing with such appropriately. Staff were knowledgeable of the Health and Social Care Trust's role in safeguarding and these contacts details were displayed.

Environment

The home was clean and tidy with a good standard of décor and furnishings being maintained. Residents' bedrooms were comfortable and nicely personalised. Toilets and bathrooms were clean and hygienic.

The grounds of the home were well maintained.

There was good provision of infection prevention and control aids and equipment throughout the environment. Added to this there was accessible information available to residents, their representatives, visitors and staff on the need for good infection prevention and control practices.

Fire safety

An inspection of the home's most recent fire safety risk assessment, dated June 2018. There were no recommendations made from this assessment. Assurances were given that this assessment will be reviewed on completion of the works to the extensive of the kitchen, which is proposed for the end of October 2019.

An inspection of fire safety records confirmed that all staff were in receipt of up-to-date fire safety training and drills. Fire safety checks on the environment were also carried out by staff on a regular and up-to-date basis.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to staffing, training, support and the home's environment.

Areas for improvement

There were no areas for improvement identified during the inspection in relation to this domain.

	Regulations	Standards
Total number of areas for improvement	0	0

6.4 Is care effective?

The right care, at the right time in the right place with the best outcome.

Discussions with the senior care assistant in charge and staff confirmed that they had good knowledge and understanding of residents' needs and prescribed care interventions. Staff also advised that there was good communication and teamwork between staff members for the benefit of residents.

Care records

An inspection of a sample of three residents' care records was undertaken. The care records were methodical and detailed. These records were maintained in line with the regulations and standards. Records included an up to date assessment of needs, life history, risk assessments and care plans.

Care needs assessment and risk assessments, such as, safe moving and handling, nutrition, falls, were reviewed and updated on a regular basis or as changes occurred.

Progress records were well written and included statements of care/treatment given in response to issues of assessed need.

The care records reflected the multi-professional input into the residents' health and social care needs and were found to be updated regularly to reflect the changing needs of the individual residents.

The records inspected had evidence of resident/representative consultation in the care planning and review process, by signatures of participation.

An issue of security of care records pertaining to residents and patients in the home was raised with the Director, who gave good assurances that he had already plans in place to address this issue in the near future, with a redesign of a more visible office for staff with locked cupboards.

Effectiveness of care

Throughout this inspection there were examples of good delivery and effectiveness of care observed. Care practices such as infection prevention and control were found to be maintained in line with good practice.

Good practice was also identified with an issued raised by one resident who had assessed needs pertaining to keeping warm, with the care assistant attending to this in a prompt kind caring manner.

Staff took time to interact with residents and consent was requested when seeking to undertake tasks with personal care or mobility.

Residents were dressed well in matching clean attire.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to maintenance of care records and general observations of care practices.

Areas for improvement

There were no areas of improvement identified during the inspection in relation to this domain.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 Is care compassionate?

Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.

Staff interactions with residents were found to be friendly, polite and supportive. A relaxed ambience was in place with residents being comfortable and at ease in their environment and interactions with staff.

Residents' Views

Discussions were undertaken with all residents in the home at the time of this inspection. All were keen to express their praise and gratitude with the provision of care, the kindness and support received from staff, the provision of meals and the general atmosphere in the home. Some of the comments included statements such as;

- "It's very good here. I am very happy and content and I couldn't be cared for better"
- "I am being cared for exceptionally well here. The staff do a wonderful job here in every way. There is too much food!"
- "It's clean, there's good food, the home is nice and warm and staff are all lovely. What more could I ask for"
- "I am delighted with the home. If I have any grumbles the staff are onto it straight away. The care is very good"
- "The staff are very good. You need to give it a good report because everything is very good. Absolutely no complaints"
- "If you get any complaints here, it will be a lie!!"
- "I am cared for very well here. There is honestly not a thing wrong with this home. The girls are all very good and kind".

Relatives' views

Discussions with a visiting relative confirmed that they were satisfied with the provision of care and praised the staff for their kindness and support given.

Care practices

On arrival to the home staff were in attendance with residents' morning routines, with assistance with personal care, breakfast and medication. These tasks were unhurried and carried out in a kind, caring manner. There was a nice atmosphere in the dining room for residents to enjoy their choice of breakfast meal. Shortly after breakfast a number of residents choose to attend a morning Mass that was held in a prayer in the home and skyped from a local Church. Residents were also observed to be comfortable, content and at ease in their environment and interactions with staff. Care duties and tasks were organised and staff interactions were polite and friendly.

Areas of good practice

There were examples of good practice in respect of this domain found throughout this inspection in relation to feedback from residents, one visiting relative and general observations of care practices.

Areas for improvement

There were no areas of improvement identified during the inspection in relation to this domain.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 Is the service well led?

Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.

The inspector was met on arrival to the home by a senior care assistant in charge, who was available throughout this inspection to facilitate information and discussion. The Director of the home also made himself available at the latter part of the inspection both for discussion and feedback.

Monitoring records

The last two months' monitoring reports on the behalf of the responsible individual were inspected.

Complaints

An inspection of the record of complaints together with discussions with the senior care assistant confirmed that expressions of complaint or dissatisfaction are taken seriously and managed appropriately. The records contained details of the complaints, action taken, resolution and confirmation whether the complainant was satisfied with the outcome.

Accidents and Incidents

An inspection of accidents and incidents reports from 1 July 2019 confirmed that these were effectively documented and reported to RQIA and other relevant organisations in accordance with the legislation and procedures.

Staff views

Staff spoke positively and enthusiastically about their roles and duties. Staff advised that the home was a nice place to work in and the provision of care was very good. They advised that there was good teamwork, support, training and morale and if they had any concerns they would have no hesitation in reporting such to the management. One staff comment included the statement;

- “It’s lovely round here. I love it”.

Areas of good practice

There were examples of good practice found throughout the inspection in relation to governance, management of accidents and incidents and feedback from staff.

Areas for improvement

There were no areas for improvement identified during the inspection in relation to this domain.

	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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