



Unannounced Care Inspection Report 7 March 2019



Longfield Care Home

Type of Service: Residential Care Home
Address: 2 Longfield Road, Eglinton, Derry, BT47 3PY
Tel No: 028 7181 2552
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 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 care home registered to provide residential care for up to 11 persons living with dementia. The home has a registered nursing home on the same site.

3.0 Service details

Registered Provider: Four Seasons Healthcare Responsible Individual: Dr Maureen Royston	Registered Manager: Louise McCloskey
Person in charge at the time of inspection: Louise McCloskey	Date manager registered: 19 April 2018
Categories of care: Residential Care (RC) DE – Dementia	Number of registered places: 11

4.0 Inspection summary

An unannounced inspection took place on 7 March 2019 from 12.30 to 15.00 hours.

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 Minimum Standards for 2011.

This primarily was a focused inspection to review the provision of meals and mealtimes

Evidence of good practice was found in relation to general observations of care practices and staffs' knowledge and understanding of residents' needs, and in particular their dietary needs. Good practice was also found in relation to communication and handover reports between shifts and the environment.

No areas of improvement were identified during this inspection.

Feedback from residents was all positive, as was with two visiting relatives.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and resident 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 Louise McCloskey, registered manager, 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

No further actions were required to be taken following the most recent inspection on 3 July 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: notifiable events since the previous care inspection, the registration status of the home, any written and verbal communication received since the previous care inspection and the previous care inspection report.

During the inspection the inspector met with 11 residents, two visiting relatives, four members of staff and the registered manager.

The following records were examined during the inspection: a sample of three residents' care records, quality assurance audits, handover reports, menus and records of meals taken.

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 3 July 2018

The most recent inspection of the home was an unannounced care inspection.

6.2 Review of areas for improvement from the last care inspection dated 3 July 2018

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

6.3 Inspection findings

6.3.1 Meals and mealtimes

A varied and nutritious diet was provided which met the individual and recorded dietary needs and preferences of the residents. The menu is rotated on a three weekly cycle. The menu offered a choice of meal each mealtime. Residents are involved in the planning of menus.

Systems were in place to regularly record residents' weights and any significant changes in weight were responded to appropriately. There were arrangements in place to refer residents to

dietitians and speech and language therapists (SALT) as required. Guidance and recommendations provided by dieticians and SALT were reflected within the individual resident's care plans and associated risk assessments.

Discussions with staff confirmed that they were aware of matters concerning residents' eating and drinking as detailed in residents' care plans. An inspection of a sample of three residents' care records pertaining to eating and drinking was undertaken. These records were maintained in informative detail with account of prescribed needs and evaluations of care.

Discussions with staff also confirmed their knowledge of individual residents' dietary likes, dislikes and preferences. One member of staff detailed how particular residents preferred the strength of tea to be served. This is good practice.

Meals were provided at conventional times throughout the day with drinks and snacks available in between. Residents can also have a snack or drink on request. Fresh drinking water was readily available.

The dining room was nicely facilitated. Tables were appropriately set with choice of condiments. The kitchen facility was tidy and well organised.

Discussions with residents during this inspection confirmed that they were satisfied with this area of care. Some of the comments made included statements such as;

- "The food is always lovely. I couldn't ask for better"
- "I love the meals"

6.3.2 The environment

The home was clean and tidy with good standard of furnishing and décor being maintained. Communal areas were comfortable and nicely facilitated. Residents' bedrooms were comfortable and personalised. The home was appropriately heated and fresh smelling. There were no obvious health and safety risks observed in the internal environment.

6.3.3 Residents' views

Discussions took place with all 11 residents in the home during the inspection. In accordance with their capabilities, all residents advised/confirmed that they felt a good standard of care was provided for, that staff acted with kindness and support, they enjoyed the meals and that the overall general atmosphere was good.

Some of the comments made included statements such as;

- "The staff are all lovely. I like them very much"
- "No problems at all here"
- "It couldn't be any better here. It is like a hotel"
- "This is a great place"

6.3.4 Relatives' views

There were two visiting relatives in the home at the time of this inspection. Both relatives expressed praise and gratitude for the provision of care and the kindness and support received from staff. Some of the comments made included statements such as;

- “The staff are very kind. I have good faith and confidence with them all”

6.3.5 Care practices

Staff spoken with were satisfied that there was sufficient staff on duty to meet the needs of the residents. Staff spoke positively about their roles and duties and training. Staff also advised that they believed a good standard of care was provided for and if there were any concerns they would have no hesitation in reporting these to management.

Staff were knowledgeable and had a good understanding of adult safeguarding principles. They were also aware of their obligations in relation to raising concerns about poor practice and whistleblowing.

Staff advised that they were provided with mandatory training and additional training opportunities relevant to any specific needs of the residents. Staff were particularly enthusiastic about the planned two day training in dementia, which was additional to their eLearning training in this area. This is good practice.

Discussion with the registered manager, inspection of accident and incidents notifications, care records and complaints records confirmed that if there were any suspected, alleged or actual incidents of abuse these would be fully and promptly referred to the relevant persons and agencies for investigation in accordance with procedures and legislation.

The registered manager stated that the home did not accommodate any individuals whose assessed needs could not be met.

An inspection of the 24 hours handover reports was undertaken. These reports were used to convey information between shifts. Such information included continence care, nutrition, skin integrity, pain management, mental well-being. The detail on these reports was comprehensive and gave good summary accounts of residents' well-being. This is to be commended.

The general atmosphere in the home was relaxed, homely and supportive. Residents appeared content, relaxed and at ease with their interactions with staff and their environment. Staff interactions were found to be polite, friendly and warm. A planned visiting entertainment event was in place with the majority of residents engaged in the enjoyment of this event.

Areas of good practice

There were areas of good practice found in relation to feedback from residents and two visiting relatives, general observations of care practices and staffs' knowledge and understanding of residents' needs. Good practice was also found in relation to communication and handover reports between shifts and the environment.

Areas for improvement

No areas of improvement were identified during the inspection.

	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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