

The Regulation and  
Quality Improvement  
Authority

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**Unannounced Care Inspection  
of  
Knockan Lodge**

**3 November 2015**

**The Regulation and Quality Improvement Authority**  
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: [www.rqia.org.uk](http://www.rqia.org.uk)

## 1. Summary of inspection

An unannounced care inspection took place on November 2015 from 10 00 am to 1 30 p m . On the day of the inspection the home was found to be delivering safe, effective and compassionate care. The standard inspected was assessed as being fully met.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards (2011).

### 1.1 Actions/enforcement taken following the last inspection

There were no requirements or recommendations made as a result of the previous inspection in May 2015.

### 1.2 Actions/enforcement resulting from this inspection

Enforcement action did not result from the findings of this inspection.

### 1.3 Inspection outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

## 2. Service details

<b>Registered Organisation/Registered Person:</b> P J Doherty	<b>Registered Manager:</b> Anna Elder
<b>Person in charge of the home at the time of Inspection:</b> At the beginning of the inspection Mrs C O'Neill ( senior care assistant ) Mrs Marie Jamieson ( deputy manager) came on duty later.	<b>Date manager registered:</b> Registered with RQIA from 2005
<b>Categories of care:</b> RC-DE, RC-MP(E), RC-I, RC-PH(E)	<b>Number of registered places:</b> 25
<b>Number of residents accommodated on day of inspection:</b> 22	<b>Weekly tariff at time of inspection:</b> £470

## 3. Inspection focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standard had been met:

**Standard 1            Residents' involvement - Residents' views and comments shape the quality of services and facilities provided by the home.**

## 4. Methods/processes

Prior to inspection we analysed the following records: notifications of accidents/incidents and the previous inspection report.

During the inspection we met with twelve residents, three care staff, one catering staff, one activity therapist and one administrative staff.

The following records were examined during the inspection:

- Care notes (5)
- Minutes of residents meetings
- Minutes of relatives meetings
- Satisfaction questionnaires
- Minutes of reviews
- Minutes of staff meetings
- Statement of purpose
- Complaints

## 5. The inspection

### 5.1 Review of requirements and recommendations from previous inspection

The previous inspection of the home was an unannounced care inspection dated 26 May 2015. No requirements or recommendations were made as a result of that inspection.

### 5.2 Standard 1: Residents' views and comments shape the quality of services and facilities provided by the home.

#### Is care safe? (Quality of life)

The care files we examined contained notes of annual care management reviews. These reviews provide a forum for residents and their families to express their views about the care they receive in the home to their community named worker. The comments we read were all positive. Internally the home had various formal and informal systems to access residents views and opinions. These include:

Residents' meetings - undertaken monthly

Relatives' meetings - undertaken monthly

Suggestion box – this is located in the hallway and provided the opportunity for residents to anonymously raise any issue they may not wish to discuss openly.

#### Is care effective? (Quality of management)

The manager has devised and implemented various quality assurance systems. One was an annual satisfaction questionnaire which is forwarded to residents and their relatives. We reviewed some of the completed questionnaires from the audit of June 2015. Comments were all very positive. One example "Staff care of my relative goes beyond the call of duty I have no complaints at all" The manager analyses the responses and uses this information in her overall quality assurance monitoring in the home.

The Statement of Purpose was inspected and found to underpin the home's ethos and model of care.

The document reflected the expectations of the management in regard to staff practice. The rights of residents to make choices and take risks was explicit as were the values of residents' rights, privacy and dignity.

The home operates a key worker system in that every resident has an identified staff member to oversee care and act as advocate. The key worker and resident meet monthly with time set aside for the resident to raise any issue they may have. Minutes of these monthly meetings are made and were available for inspection.

#### Is care compassionate? (Quality of care)

There were 22 residents in the home for the duration of this inspection. We observed staff providing care for residents in a friendly and respectful manner. Staff with whom we spoke felt that care in the home is compassionate. Residents spoke positively about the attitude of staff and their willingness to help. The atmosphere in the home was unhurried and assistance was given to residents in a timely manner and at the resident's own pace.

## Areas for improvement

There were no areas of improvement noted and the standard inspected is assessed as met.

<b>Number of requirements:</b>	0	<b>Number of recommendations:</b>	0
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## 5.3 Additional areas examined

### 5.3.1. Residents

We spoke with all the residents in the home on the day. All were complimentary about the care they receive and their life experience. There was a feeling from the residents that this is truly "their home". Residents demonstrated a good rapport with staff. Comments made by residents included the following –

"I found it hard to settle when I first came but now I love it"

"I would re name this home the Ritz"

"I can go to my room and watch a film if I want or I can sit in the company"

### 5.3.2 Relatives

There were no relatives in the home.

### 5.3.3 Staff

On the day the following staff were on duty –

Deputy manager x 1

Senior care assistant x 1

Care assistant x 4

Domestic x 1

Catering x 2

Administrative x 1

Activity Therapist x 1 from 11 00 am to 1 00 pm

The deputy manager confirmed that staffing levels were satisfactory to meet the needs and numbers of persons accommodated. She also confirmed that all care staff hold current registration with the Northern Ireland Social Care Council .

Staff with whom we spoke reported that they felt a good standard of care was provided for residents and ample training opportunities for themselves. Staff stated that they felt supported by management and they are aware that residents' rights and preferences are the basis of all care provided. Observation of staff practice found it to be caring and respectful and delivered at the resident's pace. One staff member stated -

" We all just want the best for these residents and for some we are the only family they have,and they depend on us".

### 5.3.4 Environment

The environment internally was found to be clean and fresh smelling. There are several lounge areas with a variety of seating arrangements to suit individual residents. Residents have personalised their bedrooms. There were no hazards noted on our inspection of the home.

### 5.3.5 Complaints


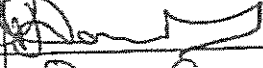

There have been no complaints recorded since the previous inspection.

### 5.3.6 Accidents/incidents

Inspection of the accident record showed that these have been responded to and recorded appropriately.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager		Date Completed	9/11/15
Registered Person		Date Approved	9/11/15
RQIA Inspector Assessing Response		Date Approved	18/12/15

Please provide any additional comments or observations you may wish to make below:

*\*Please ensure this document is completed in full and returned to [care.team@rqia.org.uk](mailto:care.team@rqia.org.uk) from the authorised email address\**