

# Unannounced Inspection Report 15 January 2020



## Strand House - Bohill Bungalows

Type of Service: Residential Care Home  
Address: 69 Cloyfin Road, Coleraine, BT52 2NY  
Tel No: 028 7032 5180  
Inspector: Rachel Lloyd

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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 Residential Care Homes Minimum Standards, August 2011.

## 1.0 What we look for



## 2.0 Profile of service

This is a residential care home registered to provide care for up to six residents. The residential care home is on the same site as a nursing home.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Amore (Watton) Limited  <b>Responsible Individual:</b> Mrs Nicola Cooper	<b>Registered Manager:</b> Mrs Lorna King
<b>Person in charge at the time of inspection:</b> Ms Rachael Boyd, senior support worker until 11.15 Mrs Lorna King, registered manager from 11.15 onwards	<b>Date manager registered:</b> 17 January 2017
<b>Categories of care:</b> Residential Care (RC) LD – Learning disability LD(E) – Learning disability – over 65 years	<b>Number of registered places:</b> 6

### 4.0 Inspection summary

An unannounced inspection took place on 15 January 2020 from 10:10 to 13:35 hours.

The inspection took place to assess progress with any areas for improvement identified since the last care and medicines management inspections and 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 management of medicines, staffing, communication between residents and staff and taking account of the views of residents and their families.

No areas for improvement were identified during this inspection.

Residents described living in the home as being a good experience. Residents unable to voice their opinions were seen to be relaxed and comfortable in their surrounding and in their interactions with staff and other residents.

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
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Lorna King, manager, as part of the inspection process and can be found in the main body of the report. Enforcement action did not result from the findings of this inspection.

#### **4.2 Action/enforcement taken following the most recent inspection dated 2 July 2019**

No further actions were required to be taken following the most recent inspection on 2 July 2019.

#### **5.0 How we inspect**

To prepare for this inspection we reviewed information held by RQIA about this home. This included the last inspection findings in relation to care and medicines management and any other written or verbal information received.

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.

A poster indicating that an inspection was taking place was displayed at the entrance to the home.

During the inspection we met with three residents, the manager, one senior support worker and four support workers.

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

- two residents' records of care with respect to the management of medicines
- personal medication records and medication administration records
- medicine audit records
- 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 most recent care and medicines management inspections dated 2 July 2019 and 26 January 2018

There were no areas for improvement identified as a result of the most recent care and medicines management inspections.

## 6.2 Inspection findings

### 6.3 Is care safe?

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

We arrived in the home at 10:10 hours and were greeted by the senior support worker and support workers on duty who were welcoming, helpful and attentive. Residents were in the lounge, dining area or their bedroom according to their preference. Several residents were preparing to leave with staff for an adjacent bungalow for planned activities. The manager arrived in the home at 11:15 hours and was present for the remainder of the inspection.

Observation of the delivery of care evidenced that staff attended to residents needs in a timely and caring manner. Staff said that they felt that there were enough staff on duty at all times to meet the needs of the residents.

The home was observed to be clean, warm and fresh; all areas inspected were appropriately decorated. Corridors were free from trip hazards and equipment/cleaning products were stored in areas not accessed by residents.

We reviewed a sample of personal medication records and medication administration records and found that they had been appropriately maintained. Staff were advised to record the date of opening on insulin pen devices and to record the site of each injection on the administration record.

A range of audits on the administration of medicines was completed. There was evidence that medicines were being administered as prescribed.

Staff were reminded and shown how to reset the medicines refrigerator thermometer daily after recording temperatures to ensure that temperatures remain in the required range of 2 to 8°C.

### Areas of good practice

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

## Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

### 6.4 Is care effective?

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

Systems were in place to manage the ordering of prescribed medicines to ensure adequate supplies were available and to prevent wastage. Antibiotics and newly prescribed medicines had been received into the home without delay.

There were procedures in place to verify prescribed medicines on admission to the home.

We reviewed the lunchtime meal experience. Lunch commenced at 13.00 hours, this was in accordance with the preference of the residents. Residents dined in the dining area or their preferred dining area such as their bedroom. Tables had been laid appropriately for the meal. The meal served correlated with the menu and staff and residents confirmed an alternative was offered where preferred. Food was served directly from the kitchen when residents were ready to eat their meals. The food served appeared nutritious and appetising. Staff were observed chatting with residents who were assisted in an unhurried manner where necessary. The residents consulted with spoke positively of the meals provided.

Comments included:

- “There is plenty of food!”
- “The food is lovely.”

## Areas of good practice

There were examples of good practice found throughout the inspection in relation to the systems in place for the management of medicines and the encouragement/assistance provided by staff to ensure that residents received nutritious meals.

## Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	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.**

The administration of medicines to residents was completed in a caring manner, residents were given time to take their medicines and medicines were administered as discreetly as possible.

Staff demonstrated a detailed knowledge of residents’ wishes, preferences and assessed needs and how to provide comfort if required. Staff interactions with residents were observed to be compassionate, caring and timely. Residents were afforded choice, privacy, dignity and respect.

Consultation with three residents, confirmed that living in the home was a positive experience.

Comments included:

- “I’ve lived here for six years and I love it. I love all of the staff, especially Lorna. Nobody could say anything bad about this place.”
- “I’m very happy now.”

There were no questionnaires returned by residents or relatives within the allocated time provided.

Any comments from residents, their representatives and staff in questionnaires received after the return date will be shared with the registered manager for their information and action as required.

**Areas of good practice**

There were examples of good practice found throughout the inspection in relation to the culture and ethos of the home, dignity and privacy, and listening to and valuing residents.

**Areas for improvement**

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	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.**



There were robust arrangements in place for the management of incidents. Staff confirmed that they knew how to identify and report incidents. Incidents involving medicines since the last medicines management inspection were discussed. Staff were knowledgeable regarding their roles and responsibilities in relation to adult safeguarding.

There were robust auditing processes with regard to medicines management. These audits were reviewed during the inspection; satisfactory outcomes were observed indicating that medicines were administered as prescribed.

We met with five members of staff as well as the manager. They advised that that they had received comprehensive training and felt well supported in the home.

Comments included:

- “I’m very proud of all of the staff, the team work and the family like atmosphere.”
- “I love working here. It is the best place I’ve worked. We know the residents so well.”
- “We have a great team. We all work together.”
- “I love working here. I wouldn’t change anything.”

We also sought staff opinion on staffing via the online survey. There were no responses received within the allocated time provided.

We discussed deprivation of liberty safeguards with the manager who confirmed that all staff had received appropriate training in this area. Staff demonstrated general awareness and knowledge of what a deprivation of liberty is and how to ensure the appropriate safeguards are in place.

### Areas of good practice

There were examples of good practice found in relation to leadership and maintaining good working relationships and the management of incidents.

### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	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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