



# Unannounced Inspection Report 12 February 2020



## Longfield Care Home

**Type of Service: Residential Care Home**  
**Address: 2 Longfield Road, Eglinton, BT47 3PY**  
**Tel No: 028 7181 2552**  
**Inspector: Helen Daly**

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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 DHSSPS Residential Care Homes Minimum Standards, August 2011.

## 1.0 What we look for



## 2.0 Profile of service

This is a residential care home which is registered to provide care for up to 11 residents who are living with dementia.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Four Seasons (Bamford) Ltd  <b>Responsible Individual(s):</b> Dr Maureen Claire Royston	<b>Registered Manager:</b> Mrs Louise McCloskey
<b>Person in charge at the time of inspection:</b> Mrs Louise McCloskey, Registered Manager	<b>Date manager registered:</b> 1 April 2005
<b>Categories of care:</b> Residential Care (RC) DE – dementia	<b>Number of registered places:</b> 11

### 4.0 Inspection summary

An unannounced inspection took place on 12 February 2020 from 10.45 to 12.45.

The inspection assessed progress with any areas for improvement identified during and since the last care and medicines management inspections and 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 management of medicines, staffing, the home's environment, the range of activities, communication between residents and staff and taking account of the views of residents and their families.

No areas for improvement were identified.

Residents said that they enjoyed living in the home. They were observed to be relaxed and comfortable.

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 Louise McCloskey, Registered Manager, and Ms Martina Duffy, Team Leader.

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

#### **4.2 Action/enforcement taken following the most recent care inspection dated 1 October 2019**

Other than the action detailed in the QIP no further actions were required to be taken following the most recent inspection on 1 October 2019. Enforcement action did not result from the findings of this inspection.

### **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 were provided to give residents and those who visit them the opportunity to contact us after the inspection with views of the home. Ten questionnaires were returned from residents/relatives.

A poster was provided for staff detailing how they could complete an electronic questionnaire. Staff did not complete any electronic questionnaires.

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

- personal medication records and medication administration records
- records of medicines received and transferred
- the management of medicines on admission, medication changes and antibiotics
- medicine management audits
- storage temperatures for medicines
- care plans in relation to distressed reactions
- care plans in relation to deprivation of liberty
- RQIA registration certificate

Areas for improvement identified at the last care and medicines management inspections were reviewed and assessment of compliance recorded as met, partially met, or not met.

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

Areas for improvement from the most recent care inspection dated 1 October 2019		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
<b>Area for improvement 1</b> <b>Ref: Regulation 31(2)</b> <b>Stated: First time</b>	<p>The registered person shall notify without delay any period of expected absence of the registered manager for 28 days and more. In doing so the registered person shall notify RQIA of the subsequent proposed interim managerial arrangements.</p>	<b>Met</b>
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>A notification of the unplanned absence was received following the last inspection including the interim managerial arrangements.</p> <p>Assurances were provided that RQIA would be notified without delay of any future absence of 28 days.</p>	
Areas for improvement from the most recent medicines management inspection dated 19 June 2018		
Action required to ensure compliance with The DHSSPS Residential Care Homes Minimum Standards, August 2011		Validation of compliance
<b>Area for improvement 1</b> <b>Ref: Standard 31</b> <b>Stated: First time</b>	<p>The registered person shall ensure that two staff are involved in the transcribing of all medicines information on medicine records; both staff should initial the entry.</p>	<b>Met</b>
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>A review of the personal medication records and medication administration records indicated that two staff were involved in the transcribing of medicines information on medicine records.</p>	

## 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.**

On arrival at the home we were welcomed by the registered manager and team leader. The morning tea round had just finished and residents were enjoying puzzles in the lounge or relaxing in their bedrooms.

Staff advised that they felt that there were enough staff to meet the needs of the residents and this was evidenced during the inspection. The residents we spoke with said that they felt well looked after in the home and that they enjoyed a range of activities. Residents' needs and requests for assistance were observed to be met in a timely and caring manner.

The home was observed to be clean, tidy, organised and fresh smelling throughout. The dining room had recently been re-decorated. Bedrooms were appropriately furnished and personalised. Clocks showing the day, date and time were on display throughout the home. Valentine's Day decorations were displayed. 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. Medicines were observed to be stored securely and at the recommended temperature.

#### Areas of good practice

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

#### 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.**

There was evidence that robust 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 and appropriate records maintained. Prompts were in place to alert staff of medication changes and antibiotics.

The audits completed during the inspection indicated that residents were receiving their medicines as prescribed.

We reviewed the midday meal in the main dining room. Tables had been laid appropriately for the meal. Food was served directly from a heated trolley. Staff wore aprons and chatted with residents when serving the meals. Disposable clothing covers were offered to residents. The food served appeared nutritious and appetising. Staff were observed encouraging residents to eat their meal and said that alternatives were available to ensure that each resident enjoyed a nutritious meal. Drinks were served at the beginning and throughout the meal.

Residents said:  
 “The food is very good, tasty.”  
 “I enjoyed the potatoes.”  
 “That juice is lovely.”

**Areas of good practice**

There were examples of good practice found throughout the inspection in relation to the dining experience and the administration of medicines.

**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.**

We spoke with several residents during the inspection. All were complimentary regarding the care, staff, activities and home’s environment.

Residents said:  
 “It’s very good here. The staff are great.”  
 “I love it here. I enjoy getting out and about.”  
 “The staff are excellent. It’s a very good place.”

Ten questionnaires were returned from residents/relatives. The majority of responses indicated that relatives/residents were ‘very satisfied’ or ‘satisfied’ with all aspects of the care. One person responded that they were neither ‘satisfied’ or ‘dissatisfied’.

Residents wrote:  
 “I am being very well cared for here.”

Relatives wrote:  
 “Both my parents are in Longfield. The care they receive is excellent and in addition they are treated with kindness, understanding and respect.”  
 “Excellent facility in all respects.”

“The small size of the residential unit suits clients with dementia. The staff create a family like atmosphere.”

“Care is excellent, very understanding and attentive staff.”

“On occasions when it is difficult to manager mum’s medicines due to refusing medicines it can cause more problems with her dementia symptoms. Covert medicines are difficult to initiate with GPs too.”

“Excellent standard of care.”

“Staff are very kind and considerate. Although the staff are kind they are under pressure as they would need more help i.e. at least another member of staff so that residents would feel safe.”

These comments were discussed with the registered manager, via a telephone call, on 9 March 2020. The registered manager agreed to continue to keep staffing levels under review.

Residents were enjoying doing puzzles in the morning. They were also engaged in activities with the activity therapist in the afternoon. Staff said that the residents often used the enclosed garden and were accompanied out for longer walks as they enjoyed seeing local farm animals. Some residents had recently attended a dementia-friendly tea dance in the Millennium Forum. Residents were beautifully dressed; ladies were wearing jewellery and nail varnish to match their clothing.

**Areas of good practice**

There were examples of good practice found throughout the inspection in relation to ensuring that residents were provided with activities that they enjoyed, listening to and valuing residents and their representatives and taking account of the views of 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 arrangements in place for the management of medication-related incidents. The registered manager advised that staff knew how to identify and report incidents. We viewed a range of the audits completed by the staff and good outcomes were observed.

We discussed the Mental Capacity Act (Northern Ireland) 2016 and the Deprivation of Liberty Safeguards. The registered manager advised that she had completed Level 3 training and that supervisions had been completed with all staff.

We met with three staff members. They advised that the home ran well and that staff were aware of how to report any concerns. They said that most staff had worked in the home for a long time and that residents were very well cared for.

**Staff said:**

“I love it here. The residents are lovely. They get plenty of choice in everything. There is a lot of paperwork but you make time to deliver care.”

“I love it here. I have dedicated time to carry out the activities.”

“I love it here. It’s a great unit. We only have eight staff so there is continuity for the residents. We know them all so well. It is a very open unit. We have great relationships with families.”

**Areas of good practice**

There were examples of good practice found in relation to quality improvement, meeting residents’ needs and maintaining good working relationships.

**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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