

# Inspection Report

11 October 2021



## Brookhill House

**Type of Service: Domiciliary Care Agency**  
**Address: 2 Lower New Mills Road, Coleraine, BT52 2JR**  
**Tel No: 028 7032 7917**

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Assurance, Challenge and Improvement in Health and Social Care

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## 1.0 Service information

<b>Organisation/Registered Provider:</b> Apex Housing Association	<b>Registered Manager:</b> Mrs Marion Tasker-Lynch
<b>Responsible Individual:</b> Sheena McCallion	<b>Date registered:</b> 14 August 2019
<b>Person in charge at the time of inspection:</b> Mrs Marion Tasker-Lynch	
<b>Brief description of the accommodation/how the service operates:</b>  Brookhill House is a supported living type domiciliary care agency, located in Coleraine. The agency offers domiciliary care and housing support to up to 25 service users who reside in individual flats. The service users' care is commissioned by the Northern Health and Social Care (HSC) Trust.  Staff are available to support tenants 24 hours per day and each service user has an identified 'key worker'.	

## 2.0 Inspection summary

The care inspector undertook an announced inspection on 11 October 2021 between 9.45 am and 12 pm.

The inspection focused on the agency's governance and management arrangements as well as staff recruitment, staff registrations with the Northern Ireland Social Care Council (NISCC), adult safeguarding, notifications, complaints, whistleblowing, Deprivation of Liberty Safeguarding (DoLS) including money and valuables, restrictive practices, monthly quality monitoring, Dysphagia and Covid-19 guidance.

Service users said that they were very satisfied with the standard of care and support provided.

Good practice was identified in relation to appropriate checks being undertaken before staff started to provide care and support to the service users. Good practice was found in relation to the system in place for disseminating Covid-19 related information to staff.

No areas for improvement were identified. RQIA was assured that the care provided was safe, effective and compassionate, and that the service was well-led.

### 3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice guidance, and to address any deficits identified during our inspections.

Prior to inspection we reviewed the information held by RQIA about this agency. This included the previous inspection report, records of Notifiable incidents, written and verbal communication received since the last care inspection.

The inspection focused on reviewing relevant documents relating to the agency's governance and management arrangements. This included checking how support workers' registrations with the NISCC were monitored by the agency.

During the inspection we discussed any complaints that had been received and any incidents that had occurred with the manager and we reviewed the quality monitoring processes to ensure that these areas were routinely monitored as part of the monthly checks in accordance with Regulation 23.

Information was provided to staff, service users and their relatives to request feedback on the quality of service provided. This included an electronic survey to enable them to provide feedback to the RQIA.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

### 4.0 What people told us about the service

The information provided by service users, relatives and staff during the inspection indicated that there were no concerns in relation to the care and support provided. The following comments were received during the inspection:

#### **Service users' comments:**

- "I am managing fine, never been as fit in my life."
- "Everything is fine."
- "I am very happy. They are very kind."
- "It's very good here."
- "I am blown away. They are fantastic."

#### **Relatives' comments**

- "They are marvellous, they are very attentive."

#### **Staff' comments**

- "Happy as Larry."
- "Everything is going grand."

Service users also told us that they were very happy with the support and care provided in Brookhill House. The following comments were received via the questionnaires:

### **Service users' comments**

- "I am very happy here."
- "I could not get better care. The staff are brilliant and I am very comfortable."
- "Words are not good enough to describe the service and attention I get at Brookhill."
- "I enjoy the company and everyone is very good."
- "A lovely home."
- "Everyone is very good to me."

A number of staff, relatives and HSC Trust representatives responded to the electronic survey. Comments received are detailed below:

### **Staff comments:**

- "Brookhill provides the best care possible for each tenant."
- "I believe that the staff at Brookhill House do their best to care for and meet the needs of the tenants."
- "I feel Brookhill House is a great place to work and live."
- "Fantastic scheme to work in, couldn't find a better team and wouldn't want to work anywhere else."
- "I have been an employee of Brookhill for over 10 years and there has always been a very high standard of person centred care provided to all tenants. The management of the scheme is well organised and always ensure that a high standard of training is provided to all staff."
- "Brookhill is a very friendly welcoming environment where everyone works together to provide a caring service for those who live here. We encourage our clients to live as independently as possible whilst supporting them where extra help is needed and look out for their mental and physical wellbeing."
- "I feel that the tenants are very looked after and all the staff are very kind and patient. I am very happy and content working here. No issues or concerns with anything."

### **Relatives' comments**

- "The staff are amazing, they go over and above. The management are fantastic. They keep us informed and ensure they are knowledgeable about every aspect of their role. Brookhill really is a credit to Roisin, Marion and the fabulous team."

### **HSC Trust's representatives**

- "Due to my role in the community, I have the opportunity to visit service users in many different care homes. It is always such a pleasure to visit Brookhill. All the staff are friendly, kind, approachable and most certainly practice person centred care. It's obvious to see how happy all the residents are. I would highly recommend Brookhill to my own clients. Fantastic service provided."

## 5.0 The inspection

### 5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Due to the coronavirus (COVID-19) pandemic the Department of Health (DoH) directed RQIA to continue to respond to ongoing areas of risk identified in services.

The last inspection to Brookhill House was undertaken on 8 November 2019 by a care inspector; no areas for improvement were identified. An inspection was not undertaken in the 2020-2021 inspection years, due to the impact of the first surge of Covid-19.

## 5.2 Inspection findings

### 5.2.1 Are there systems in place for identifying and addressing risks?

The agency's provision for the welfare, care and protection of service users was reviewed. The organisation's policy and procedures reflect information contained within the Department of Health's (DoH) regional policy 'Adult Safeguarding Prevention and Protection in Partnership' July 2015 and clearly outlines the procedure for staff in reporting concerns. The organisation has an identified Adult Safeguarding Champion (ASC). The Adult Safeguarding Position report for the agency had been completed.

Discussions with the manager demonstrated that they were knowledgeable in matters relating to adult safeguarding, the role of the ASC and the process for reporting adult safeguarding concerns. Staff had undertaken training in relation to adult safeguarding. Review of incidents identified that they had been referred appropriately.

It was noted that incidents had been managed in accordance with the agency's policy and procedures. The manager was aware of which incidents required to be notified to RQIA.

Staff were provided with training appropriate to the requirements of their role. This included DoLS training. However, a review of the records identified a small number of staff who had yet to complete the training. This was discussed with the manager who agreed to address this. Confirmation was received by email on 12 October 2021 which indicated that the outstanding training had been completed.

The manager demonstrated that they have an understanding that service users who lack capacity to make decisions about aspects of their care and treatment have rights as outlined in the Mental Capacity Act. RQIA were informed there were no service users who were subject to DoLS. No restrictive practices were used.

The manager confirmed the agency does not manage individual monies belonging to the service users.

**5.2.2 Is there a system in place for identifying care partners who visit the service users to promote their mental health and wellbeing during Covid-19 restrictions?**

The manager advised us that there were no restrictions on visiting service users at the time of the inspection. Visiting was facilitated in the service users' individual rooms.

**5.2.3 Is there a system in place for identifying service users Dysphagia needs in partnership with the Speech and Language Therapist (SALT)?**

The manager advised that none of the service users had been assessed by SALT in relation to dysphagia needs. The manager advised that training on Dysphagia is available on the e-learning platform should this be required in the future.

**5.2.4 Are there robust systems in place for staff recruitment?**

The review of the agency's staff recruitment records confirmed that recruitment was managed in accordance with the regulations and minimum standards, before support workers are supplied to work with the service users. Records viewed evidenced that criminal record checks (AccessNI) had been completed for staff.

A review of the records confirmed that all support workers are appropriately registered with NISCC. Information regarding registration details and renewal dates are monitored by the manager; this system was reviewed and found to be in compliance with Regulations and Standards.

**5.2.5 Are there robust governance processes in place?**

The quality monitoring processes were reviewed to ensure that complaints and any incidents were routinely monitored as part of the monthly checks in line with Regulation 23 of the Domiciliary Care Agencies Regulations (Northern Ireland) 2005.

It was established during discussions with the manager that the agency had not been involved in any Serious Adverse Incidents (SAIs)/Significant Event Analyses (SEAs) or Early Alerts (EAs). Safeguarding incident records were reviewed and it was noted that they had been reported and managed appropriately.

There was a good system in place in relation to the dissemination of information relating to Covid-19 and infection prevention and control (IPC) practices.

**6.0 Conclusion**

Based on the inspection findings and discussions held RQIA are satisfied that this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the manager/management team

## **7.0 Quality Improvement Plan/Areas for Improvement**

There were no areas for improvement identified during this inspection, and a Quality Improvement Plan (QIP) is not required or included, as part of this inspection report.



The Regulation and Quality Improvement Authority

7th Floor, Victoria House  
15-27 Gloucester Street  
Belfast  
BT1 4LS

**Tel** 028 9536 1111

**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)

**Web** [www.rqia.org.uk](http://www.rqia.org.uk)

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