

## Inspection Report

### 13 October 2022











## Strawberry Fields

Type of Service: Residential Care Home Address: 129b Staffordstown Road, Randalstown BT41 3LH

Tel No: 028 9447 3089

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <a href="https://www.rqia.org.uk/">https://www.rqia.org.uk/</a>

#### 1.0 Service information

Organisation/Registered Provider: Strawberry Fields	Registered Manager: Mr Justin McCann
Responsible Individual: Mrs Roisin McCann	Date registered: 15 September 2022
Person in charge at the time of inspection: Mr Justin McCann	Number of registered places: 6 Category RC-DE (Dementia) applies to two named persons only
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE – Dementia MP (E) - Mental disorder excluding learning disability or dementia – over 65 years PH - Physical disability other than sensory impairment PH (E) - Physical disability other than sensory impairment – over 65 years	Number of residents accommodated in the residential care home on the day of this inspection: 5

#### Brief description of the accommodation/how the service operates:

This home is a registered residential care home which provides health and social care for up to six residents. The facility provides a homely environment with care being delivered in a domestic style house with individual bedrooms, a large spacious lounge and bright dining room adjacent to the kitchen.

#### 2.0 Inspection summary

An unannounced inspection took place on 13 October 2022, from 9.40am to 11.15am. This was completed by a pharmacist inspector.

The inspection focused on medicines management within the home. The purpose of the inspection was to assess if the home was delivering safe, effective and compassionate care and if the home was well led with respect to medicines management.

The areas for improvement identified at the last inspection were not reviewed and are carried forward for review at the next care inspection.

Review of medicines management found that robust arrangements were in place for the safe management of medicines. Medicine records were well maintained. There were effective auditing processes in place to ensure that staff were trained and competent to manage medicines and residents were administered their medicines as prescribed.

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 management.

RQIA would like to thank the staff for their assistance throughout the inspection.

#### 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, and to address any deficits identified during our inspections.

To prepare for this inspection, information held by RQIA about this home was reviewed. This included previous inspection findings and correspondence. The inspection was completed by examining a sample of medicine related records, the storage arrangements for medicines, staff training and the auditing systems used to ensure the safe management of medicines. The inspector also spoke to staff and management about how they plan, deliver and monitor the management of medicines in the home.

#### 4.0 What people told us about the service

Staff interactions with residents were warm, friendly and supportive. It was evident that they knew the residents well.

Staff were wearing face masks and other personal protective equipment (PPE) as needed. PPE signage was displayed.

Staff expressed satisfaction with how the home was managed. They said that they had the appropriate training to look after residents and meet their needs.

Feedback methods included a staff poster and paper questionnaires which were provided to the manager for any resident or their family representative to complete and return using pre-paid, self-addressed envelopes. At the time of issuing this report, six questionnaires had been received by RQIA. The respondents indicated that they were very satisfied/satisfied with all aspects of care and that the home was well led.

#### 5.0 The inspection

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

Areas for improvement from the last inspection on 18 November 2021			
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance	
Area for improvement 1  Ref: Regulation 19 (2) Schedule 4, 7  Stated: Second time	The registered person shall ensure the duty rota maintained in the home accurately reflects all staff working in the home over a 24 hour period and the capacity in which they work.	Carried forward to the next	
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.	inspection	
Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011)		Validation of compliance	
Area for improvement 1  Ref: Standard 38.3	The Registered Person must ensure that references received are fully completed and provide meaningful information.	Carried forward	
Stated: First time	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	to the next inspection	

#### 5.2 Inspection findings

5.2.1 What arrangements are in place to ensure that medicines are appropriately prescribed, monitored and reviewed?

Residents in care homes should be registered with a general medical practitioner (GP) to ensure that they receive appropriate medical care when they need it. At times the residents' needs may change and, therefore, their medicines should be regularly monitored and reviewed. This is usually done by the GP, the pharmacist or during a hospital admission.

Residents in the home were registered with a GP and medicines were dispensed by the community pharmacist.

Personal medication records were in place for each resident. These are records used to list all of the prescribed medicines, with details of how and when they should be administered. It is important that these records accurately reflect the most recent prescription to ensure that medicines are administered as prescribed and because they may be used by other healthcare professionals, for example, at medication reviews or hospital appointments.

The personal medication records reviewed at the inspection were accurate and up to date. In line with best practice, a second member of staff had checked and signed the personal medication records when they were written and updated to state that they were accurate.

## 5.2.2 What arrangements are in place to ensure that medicines are supplied on time, stored safely and disposed of appropriately?

Medicines stock levels must be checked on a regular basis and new stock must be ordered on time. This ensures that the resident's medicines are available for administration as prescribed. It is important that they are stored safely and securely so that there is no unauthorised access and disposed of promptly to ensure that a discontinued medicine is not administered in error.

The records inspected showed that medicines were available for administration when residents required them. Staff advised that they had a good relationship with the community pharmacist and that medicines were supplied in a timely manner.

The medicines storage area was observed to be securely locked to prevent any unauthorised access. It was tidy and organised so that medicines belonging to each resident could be easily located. The temperature of the medicine storage area was monitored and recorded to ensure that medicines were stored appropriately.

Satisfactory arrangements were in place for the safe disposal of medicines.

## 5.2.3 What arrangements are in place to ensure that medicines are appropriately administered within the home?

It is important to have a clear record of which medicines have been administered to residents to ensure that they are receiving the correct prescribed treatment.

A sample of the medicines administration records was reviewed. They were found to have been fully and accurately completed.

Management and staff audited medicine administration on a regular basis within the home. A range of audits were carried out. The date of opening was recorded on all medicines so that they could be easily audited. This is good practice.

## 5.2.4 What arrangements are in place to ensure that medicines are safely managed during transfer of care?

People who use medicines may follow a pathway of care that can involve both health and social care services. It is important that medicines are not considered in isolation, but as an integral part of the pathway, and at each step.

Problems with the supply of medicines and how information is transferred put people at increased risk of harm when they change from one healthcare setting to another.

There had been no recent admissions to the home. However, the admission process for new residents or residents returning from hospital was reviewed. Staff advised that robust arrangements were in place to ensure that they were provided with a current list of the resident's medicines and this was shared with the community pharmacist.

## 5.2.5 What arrangements are in place to ensure that staff can identify, report and learn from adverse incidents?

Occasionally medicines incidents occur within homes. It is important that there are systems in place which quickly identify that an incident has occurred so that action can be taken to prevent a recurrence and that staff can learn from the incident. A robust audit system will help staff to identify medicine related incidents. Management and staff were familiar with the type of incidents that should be reported.

The audits completed at the inspection indicated that the medicines were being administered as prescribed.

# 5.2.6 What measures are in place to ensure that staff in the home are qualified, competent and sufficiently experienced and supported to manage medicines safely?

To ensure that residents are well looked after and receive their medicines appropriately, staff who administer medicines to residents must be appropriately trained. The registered person has a responsibility to check that staff are competent in managing medicines and they are supported. Policies and procedures should be up to date and readily available for staff.

There were records in place to show that staff responsible for medicines management had been trained and deemed competent. Ongoing review was monitored through supervision sessions with staff and at annual appraisal. Medicines management policies and procedures were in place.

#### 6.0 Quality Improvement Plan/Areas for Improvement

	Regulations	Standards
Total number of Areas for Improvement	1*	1*

<sup>\*</sup> All areas for improvement are carried forward for review at the next inspection.

This inspection resulted in no new areas for improvement being identified. Findings of the inspection were discussed with Mr. Justin McCann, Registered Manager, as part of the inspection process and can be found in the main body of the report.

Quality Improvement Plan			
Action required to ensure compliance with The Residential Care Home Regulations (Northern Ireland) 2005			
Area for improvement 1	The registered person shall ensure the duty rota maintained in the home accurately reflects all staff working in the home over a		
Ref: Regulation 19 (2) Schedule 4, 7	24 hour period and the capacity in which they work.		
Stated: Second time	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.		
To be completed by: 16 December 2021	Ref: 5.1		
Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011)			
Area for improvement 1	The Registered Person must ensure that references received are fully completed and provide meaningful information.		
Ref: Standard 38.3	Action required to ensure compliance with this standard		
Stated: First time	was not reviewed as part of this inspection and this is carried forward to the next inspection.		
To be completed by: Ongoing from the date of	Ref: 5.1		
the inspection	1101. 0.1		
(18 November 2021)			





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