



The Regulation and
Quality Improvement
Authority

Strawberry Fields
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**Unannounced Care Inspection
of
Strawberry Fields**

27 November 2015

The Regulation and Quality Improvement Authority
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Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of inspection

An unannounced care inspection took place on 27 November 2015 from 10:30am to 1:15pm. On the day of the inspection the home was found to be delivering safe, effective and compassionate care. The standard we inspected was assessed as being met.

One area of improvement was identified in relation to the format of recording accidents and incidents. This recommendation is set out in the Quality Improvement Plan (QIP) appended to this report.

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

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

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
Total number of requirements and recommendations made at this inspection	0	1

The details of the QIP within this report were discussed with Francesca McCann as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service details

Registered Organisation/ Registered Person: Roisin McCann	Registered Manager: Justine Quigg
Person in charge of the home at the time of inspection: Caroline Bateson – Senior Care Assistant	Date manager registered: 11/9/2012
Categories of care: RC-DE, RC-I, RC-MP(E), RC-PH, RC-PH(E)	Number of registered places: 6
Number of residents accommodated on day of inspection: 6	Weekly tariff at time of inspection: £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 has been met:

Standard 1: 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: the previous inspection report and notifications of incidents and accidents.

We met with all the residents, three members of staff and Mr Justin McCann, the proprietor. Verbal feedback of the findings of the inspection was given to Ms Francesca McCann, the daughter of Mr McCann.

We inspected the following records: two residents' care records, accident/ incident reports, monitoring visit reports and record of residents meetings.

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 9 July 2015. There were no requirements or recommendations from this inspection.

5.2 Review of requirements and recommendations from the last care inspection

There were no requirements or recommendations made from the last inspection.

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

Is care safe? (Quality of life)

Staff confirmed that residents' views are taken into account in all matters affecting them in so far as practically possible.

Through discussion with the residents they reported to us that their views were actively sought and incorporated into practice. Two residents gave particular examples such as choice of meals, activities and arrangements for Christmas.

The staff confirmed that they have regular residents' meetings. Their views and wishes were actively sought and recorded. The record of these meetings was available during the inspection.

Residents' meetings were convened every month to plan and discuss activities, food provision and address any areas of concern.

Care records inspected in regard to this standard, demonstrated to us that records were up to date and kept under continual review to reflect the changing needs and preferences of the resident.

Is care effective? (Quality of management)

We found that there was a range of methods and processes in place where residents' and their representatives' views were sought. These were reflected within the care management reviews, a suggestion box, record of residents' meetings and the registered provider monthly visits. Staff confirmed that there was an open door policy within the home for residents and relatives who wished to highlight any issues.

Copies of review forms were present within each care record. Residents and their representatives attended and participated in their care management review. Evidence was in place that any agreed actions at these meetings were acted upon.

Is care compassionate? (Quality of care)

Discussion with staff demonstrated that they were knowledgeable about residents' needs and a person centred approach was adopted. In our discussions with staff we identified that residents were listened and responded to by staff.

In our observations of care practices we confirmed that residents were treated with dignity and respect. Care duties were conducted at an unhurried pace with time afforded to interactions with residents in a polite, friendly and supportive manner.

Areas for improvement

There were no issues of improvement identified with this standard. This standard was found to be met and considered to be safe, effective and compassionate.

Number of requirements:	0	Number of recommendations:	0
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5.4 Additional areas examined

5.4.1 Residents' views

We met with all the residents. In accordance with their capabilities, residents expressed and indicated that they were happy and content with their life in the home.

Some of the comments made included statements such as;

- “They are all very kind and caring”
- “Everyone has time to spend with us and look after us”
- “I am so glad I came here”
- “The food is lovely. You can get anything you want”.

5.4.2 Relatives' views

There were no visiting relatives in the home at the time of this inspection.

5.4.3 Staff views

We spoke with three care staff members, in addition to Mr Justin McCann the proprietor for the home. Staff advised us that they felt supported in their respective roles. The staff related that they had been provided with the relevant resources to undertake their duties. Staff demonstrated to us that they were knowledgeable of the needs of individual residents.

5.4.4 General environment

We found that the home presented as clean, organised and adequately heated. We observed residents' bedrooms to be homely and personalised. Décor and furnishings were found to be of a good standard.

5.4.5 Care practices

We found the atmosphere in the home was friendly and welcoming. We observed staff to be interacting with residents in a respectful, polite, warm and supportive manner.

Care duties and tasks were organised in an unhurried manner. Residents were observed to be comfortable, content and at ease in their environment and interactions with staff.

Residents were observed to be comfortable, content and at ease in their environment and interactions with staff. A nice homely atmosphere was in place.

5.4.6 Accident / incident reports

We reviewed the accident /incident reports from 9 July 2015 until the date of this inspection. These were found to be appropriately managed. However in terms of reporting it was recommended to include in the format of recording, clear details of who was notified of the event. This should include the resident's next of kin, care manager and RQIA, as appropriate. Details of this were not clearly recorded in the reports inspected.

Areas for Improvement

There was one area of improvement identified with these additional areas examined. This was in relation to the format of recording accidents and incidents.

Number of requirements:	0	Number of recommendations:	1
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6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Francesca Mc Cann as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, Residential Care Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The DHSSPS Residential Care Homes Minimum Standards (2011). They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions taken by the Registered Manager/ Registered Person

The QIP should be completed by the registered person/registered manager and detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to care.team@rqia.org.uk and assessed by the inspector.

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 in this report do not absolve the registered provider/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Recommendations			
Recommendation 1 Ref: Standard 20.15 Stated: First time To be completed by: 28 November 2015	In the format of recording accidents and incidents it must clearly be recorded who was notified of the event. This should include the resident's next of kin, care manager and RQIA, as appropriate.		
	Response by Registered Person(s) detailing the actions taken: Accidents and Incidents are reported to Residents NoK, Care Manager, Named Social Worker and, RQIA as appropriate. Details of this are recorded in the accidents and incidents book, as well a a copy of any incident forms issued to the RQIA.		
Registered Manager completing QIP	Justine Quigg	Date completed	04.01.2016
Registered Person approving QIP	Justin McCann	Date approved	04.01.2016
RQIA Inspector assessing response	John McAuley	Date approved	04.01.16

Please ensure this document is completed in full and returned to care.team@rqia.org.uk from the authorised email address