

Unannounced Inspection Report 14 November 2019



Benbradagh

Type of Service: Residential Care Home
**Address: 59 Tirgarvil Road, Upperlands,
Maghera, BT46 5UW**
Tel No: 028 7964 2238
Inspector: Rachel Lloyd

www.rqia.org.uk

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 22 residents.

3.0 Service details

Organisation/Registered Provider: Benbradagh Responsible Individuals: Mr Chris Vijendra Ramrachia Mrs Shirley Ann Ramrachia	Registered Manager: Miss Lisa McGilligan
Person in charge at the time of inspection: Miss Lisa McGilligan	Date manager registered: 9 April 2019
Categories of care: Residential Care (RC) I - Old age not falling within any other category DE - Dementia MP - Mental disorder excluding learning disability or dementia MP(E) - Mental disorder excluding learning disability or dementia - over 65 years SI - Sensory impairment	Number of registered places: 22 including: - a maximum of one resident accommodated within category of care RC-MP/MP(E) - no more than three persons requiring use of wheelchair to be accommodated on the ground floor - a maximum of two persons in category RC-DE - a maximum of one person in category RC-SI

4.0 Inspection summary

An unannounced inspection took place on 14 November 2019 from 10.00 to 13.30.

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, the environment and the dining experience.

It was positive to note that all areas for improvement from the previous care and medicines management inspections have been met and there were no areas for improvement identified during this inspection.

Residents described living in the home in positive terms. Residents were seen to be relaxed and comfortable in their surroundings and in their interactions with other residents and with staff.

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 patients' experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Lisa McGilligan, Registered 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 30 July 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the care inspection on 30 July 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

During the inspection we met with four residents, one relative, the registered manager and two other members of staff.

Questionnaires 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 a sample of records was examined, which included personal medication and medicine administration records, governance audits/records, care records and progress notes.

Areas for improvement identified at the last care inspection were reviewed and an 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 inspection.

Areas for improvement from the most recent care inspection dated 30 July 2019		
Action required to ensure compliance with the Residential Care Homes Minimum Standards, August 2011		Validation of compliance
Area for improvement 1 Ref: Standard 23.3 Stated: First time	The registered person shall ensure that mandatory training requirements are met for all staff.	Met
	Action taken as confirmed during the inspection: A training matrix was in place and was observed to be up to date.	
Area for improvement 2 Ref: Standard 6.2 Stated: First time	The registered person shall ensure that an individual comprehensive care plan includes details of the management of any identified risks and strategies or programmes to manage specified behaviours. This is specifically in relation to care plans regarding the management of mental health.	Met
	Action taken as confirmed during the inspection: A sample of three care plans was examined in relation to the management of specific behaviours and distressed reactions. These were observed to be resident specific and up to date.	

There were no areas for improvement identified following the last medicines management inspection on 24 April 2018.

6.3 Inspection findings

6.4 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 at the home at 10.00 hours and were greeted by the registered manager and staff who were helpful and attentive. Residents were mainly seated in the lounges and lobby whilst others remained in their bedrooms, in keeping with their personal preference.

Observation of the delivery of care evidenced that staff attended to residents needs in a timely and caring manner.

The home was observed to be clean and warm; all areas inspected were appropriately decorated, clean and tidy. There were no malodours. Corridors were free from trip hazards and cleaning products were stored in areas not accessed by residents.

A sample of five personal medication records and medicine administration records were reviewed. These had been maintained in a satisfactory manner. A range of audits on the administration of medicines was completed. There was evidence that medicines were being administered as prescribed. Separate administration records were in place for several medicines including warfarin, patches, analgesics prescribed for use 'when required' and external preparations including eye drops. This system readily facilitated audit and prompted administration and is good practice.

Areas of good practice

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

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.5 Is care effective?

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

There were procedures in place to ensure the safe management of medicines during a resident's admission or readmission to the home and for medicine changes. Systems were in place to manage the ordering of prescribed medicines to ensure adequate supplies were available and to prevent wastage. Newly prescribed medicines, including antibiotics, had been received into the home without delay. Two discrepancies on personal medication records were observed and these were addressed immediately without any effect on the care of the resident. One discrepancy was

observed following an audit of inhaled medicines; the registered manager agreed to monitor the administration of these medicines.

Staff on duty were reminded to reset the thermometer on the medicines refrigerator daily after recording temperatures, since temperatures above the required range were observed over the last few days.

Staff stated that there was effective teamwork; each staff member spoken to knew their role, function and responsibilities. All grades of staff consulted demonstrated the ability to communicate effectively with their colleagues.

We reviewed the lunchtime meal experience in the dining room. Residents began gathering in the dining room from 12.50 and lunch commenced at 13.00. Residents dined in the main dining room or at their preferred dining area. Tables had been laid appropriately for the meal. The menu offered a choice of two meals for lunch. Food was served directly from the kitchen when residents were ready to eat their meals or be assisted with their meals. The food served appeared nutritious and appetising. Staff were knowledgeable in relation to patients' dietary requirements. Residents wore clothing protectors where required and staff wore aprons when serving or assisting with meals. Staff were observed chatting with residents during service and residents were assisted where necessary in an unhurried manner.

Residents consulted spoke positively of the food provision. They commented:

"The food is lovely."

"There is plenty of food."

"I'm stuffed....lunch was lovely."

Areas of good practice

There were examples of good practice found throughout the inspection in relation to the timely availability of newly prescribed medicines and antibiotics, communication between residents and staff and the encouragement/assistance provided by staff to ensure that patients enjoyed a nutritious meal.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.6 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 was completed in a caring manner and residents were given time to take their medicines.

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.

Consultation with residents confirmed that living in the home was a positive experience. They provided positive feedback on the environment, staff attentiveness and helpfulness.

Comments from residents included:

“I’m content, I’ve no complaints.”

“Girls do everything for you.”

“If I’ve any aches or pains they would get it sorted out and if you need to see your doctor they come.”

Of the questionnaires that were issued, none were returned within the specified timescale. Any comments from residents or their representatives, 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, 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
Total number of areas for improvement	0	0

6.7 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.

Discussion with staff confirmed that management were supportive and responsive to any suggestions or concerns raised. Staff confirmed that, if they had any concerns, they could raise these with the manager. All staff spoken to stated that they enjoyed working in the home. Several commented that it was ‘home from home’ or ‘like home’ within the local community.

We also sought staff opinion on staffing via the online survey. One response was received within the time provided. The responses provided indicated satisfaction with the care provided to the residents. The staff member commented:

“It’s a lovely place to work.”

There were arrangements in place for the management of medicine incidents. Staff confirmed that they knew how to identify and report any incidents. In relation to the regional safeguarding procedures, staff confirmed that they were aware that incidents may need to be reported to the safeguarding team.

Areas of good practice

There were examples of good practice found in relation to quality improvement and maintaining good working relationships.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	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.



The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
Twitter @RQIANews

Assurance, Challenge and Improvement in Health and Social Care