

# Inspection Report

30 January 2024



## The Beeches Professional and Therapeutic Services

Type of service: Residential  
Address: 41 Lisburn Road, Ballynahinch, BT24 8TT  
Telephone number: 028 9756 1800

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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> The Beeches Professional and Therapeutic Services Ltd  <b>Responsible Individual:</b> Mr James Brian Wilson	<b>Registered Manager:</b> Mrs Siobhan Duffy  <b>Date registered:</b> 25 July 2019
<b>Person in charge at the time of inspection:</b> Mrs Siobhan Duffy	<b>Number of registered places:</b> 34
<b>Categories of care:</b> Residential Care (RC) LD – Learning disability. LD(E) – Learning disability – over 65 years.	<b>Number of residents accommodated in the residential care home on the day of this inspection:</b> 33
<b>Brief description of the accommodation/how the service operates:</b> This home is a registered residential care home which provides health and social care for up to 34 residents who have a learning disability. Residents are accommodated within four separate cottages in the home and have access to communal lounge and dining spaces within each cottage. There are enclosed and open garden areas for residents.	

## 2.0 Inspection summary

An unannounced inspection took place on 30 January 2024 from 10 am to 4.30 pm, by a care inspector.

The inspection sought to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

The home was clean and warm, with a welcoming atmosphere. The environment was well maintained and decorated to a good standard throughout.

Residents looked well cared for, in that attention had been paid by staff to the personal care and dressing needs of those residents who required assistance, and residents were seen to move freely around communal areas of the home while engaging in the activities of daily life. Residents told us that they were happy living in the home and their views are detailed in section 4.0 and throughout this report.

Staffing arrangements were found to be sufficient to meet the needs of residents. Staff were seen to provide care in a timely and compassionate manner, and to communicate effectively with each other throughout the day.

No areas for improvement were identified during the inspection and we were assured that the delivery of care and service provided in The Beeches Professional and Therapeutic Services was safe, effective, compassionate and that the home 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, and to address any deficits identified during our inspections.

In preparation for this inspection, a range of information about the service was reviewed to help us plan the inspection.

Throughout the inspection RQIA will seek to speak with residents, their relatives or visitors and staff for their opinion on the quality of the care and their experience of living, visiting or working in this home.

Questionnaires were provided to give residents and those who visit them the opportunity to contact us after the inspection with their views of the home. A poster was provided for staff detailing how they could complete an on-line questionnaire.

The daily life within the home was observed and how staff went about their work.

A range of documents were examined to determine that effective systems were in place to manage the home.

The findings of the inspection were discussed with the manager at the conclusion of the inspection.

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

Residents told us that living in The Beeches Professional and Therapeutic Services was a positive experience and that staff were available to them when they needed assistance or support. Residents said that staff were good to them and described staff as "good" and "super-duper lovely", with one resident saying, "I love all the staff."

Residents told us that they were happy with the environment and some residents enjoyed showing the inspector around the communal areas and their own bedrooms, while telling us about how they were involved in choosing the décor in their bedrooms. Residents told us about how their bedrooms were personalised with items of importance and interest to them, and that this made their personal space feel like home.

Residents said that they could choose how they spent their day and talked about the different activities on offer. Residents told us that the food was good and that they could choose from a daily menu and that if they didn't like the main choices they could easily pick an alternative meal.

RQIA received ten completed resident and relative questionnaires following the inspection. All ten respondents indicated that they were very satisfied that the care provided in the home was safe, effective, and delivered with compassion, and that the service was well led.

A visiting professional told us that they attend the home on a regular basis and described the care as “exceptional.” The visiting professional said that staff communicate efficiently with them and ensure that they are aware of any relevant changes in the needs of residents. They said that the home was “always clean” and described the atmosphere as “a hub of activity...excellent.”

Staff told us that they “love” working in the home and said that they were supported in their roles with regular training, good teamwork, and a positive working relationship with management. Staff said that they felt listened to and could raise concerns, queries, or suggestions either at staff meetings or directly with the manager.

RQIA received 19 staff survey responses following the inspection. The majority of respondents said that they were satisfied or very satisfied that the care was safe, effective, and delivered with compassion, and that the service was well managed. One staff indicated that they were unsure about the effectiveness of care and treatment, or if the service was well led.

Staff survey comments included, “it’s a pleasure working in the Beeches, excellent manager, great co-workers, and a brilliant environment for residents”, “wide variety of choices of food, outings, and socialising”, and “the residents are at the forefront of all care.”

Questionnaire and survey responses were shared with the manager following the inspection.

## **5.0 The inspection**

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

The last inspection to The Beeches Professional and Therapeutic Services was undertaken on 14 December 2023 by a pharmacy inspector; no areas for improvement were identified.

## **5.2 Inspection findings**

### **5.2.1 Staffing Arrangements**

Safe staffing begins at the point of recruitment. There was evidence that a robust system was in place to ensure staff were recruited correctly to protect residents. A review of staff selection and recruitment records showed that all pre-employment checks had been completed prior to each staff member commencing work.

Newly employed staff were provided with a comprehensive induction programme to prepare them for working with residents. The induction period involved new staff working alongside more experienced members of the team to allow the opportunity for new staff to become familiar with the home’s policies and procedures and to learn how to meet the needs of residents.

There was a system in place to monitor staffs' registration with the Northern Ireland Social Care Council (NISCC); this was completed weekly to ensure registrations remained valid.

There were systems in place to ensure staff were supported to do their job. For example, a suite of mandatory training courses was available to all staff on an eLearning platform and this training was further supplemented with face to face practical training sessions. Some staff were participating in practical first aid training during the inspection. Staff told us that they were encouraged to develop their skills and knowledge and that various training topics were running throughout the year. The manager had oversight of staff compliance with training and reviewed this regularly.

Staff confirmed that they were encouraged to attend regular staff meetings and said that they felt they could bring up any work related topics and felt listened to. Staff said that they could make suggestions and were encouraged to "try new things and move with best practice." Staff meeting records were maintained. It was noted that the record keeping format used for meetings in each cottage were slightly different and it was not always clear what actions resulted from the meetings. This was discussed with the manager who informed us that they would review the meeting record formats to ensure consistency and clear communication. This will be reviewed at the next inspection.

The staff duty rota accurately reflected the staff working in the home on a daily basis. The duty rota identified the person in charge when the manager was not on duty. It was noted that there was enough staff in the home to respond to the needs of the residents in a timely way; and to provide residents with a choice on how they wished to spend their day.

Staff said that there was good teamwork and staff and residents said that they were happy with the staffing arrangements.

### 5.2.2 Care Delivery and Record Keeping

Staff met at the beginning of each shift to discuss any changes in the needs of residents. Discussion with staff evidenced that they were knowledgeable about residents' needs, their daily routines, wishes and preferences. Staff confirmed the importance of keeping one another up to date with any changing needs in residents' care throughout the day.

A diary was maintained in each cottage to ensure that important activities or appointments were not missed. The diary was managed by the level two senior care assistants on duty for each shift.

Staff were observed to be prompt in recognising residents' needs and any early signs of illness or distress, including those residents who had difficulty making their needs known. For example, staff were seen to use distraction techniques and reassurance when a resident showed early indications of distress, and staff were seen to help residents focus their energy towards activities that they enjoyed.

Residents' needs were assessed at the time of their admission to the home. Following this initial assessment care support plans were developed to direct staff on how to best meet residents' needs and included any advice and recommendations made by other healthcare professionals.

Care support plans were person centred and included the views and preferences of residents about their individual needs. Daily records were kept of how each resident spent their day and the care and support provided by staff. The outcome of visits from any healthcare professional was recorded. Records were held confidentially.

The manager informed us that there were plans to move the majority of resident records onto an electronic record keeping system and provided assurances that all staff would be trained in the use of this system and that a phased approach would be used for its introduction. This will be reviewed at a future inspection.

Good nutrition and a positive dining experience are important to the health and social wellbeing of residents. Residents may need a range of support with meals; this may include simple encouragement through to full assistance from staff. Menus displayed in each cottage showed a variety of meals on offer, with two options at each main meal time. There was an additional list of hot meal alternatives that residents could choose from if they did not like the two main options. Residents were seen to express their choices via the staff within the cottage or directly with the kitchen staff.

The serving of meals was an organised and unhurried experience. Staff were seen to coordinate and prioritise their duties and to provide support and assistance where required. Each resident had a personalised place mat for all meals to ensure that the correct level of food and drink consistency and any other special dietary requirements were met.

There was a good supply of snacks and drinks available to residents between meals. The food looked and smelled appetising and residents told us that they enjoyed the food and told us about their favourite meals.

A visiting professional told us that staff communicated with them about any relevant changes in the needs of residents and described the care in the home as “exceptional.”

Residents and relatives told us that they were very satisfied with the care provided.

### **5.2.3 Management of the Environment and Infection Prevention and Control**

Examination of the home’s environment included reviewing a sample of bedrooms, storage spaces and communal areas such as lounges, dining rooms, and bathrooms. The home was warm, clean and comfortable. There was a good standard of décor throughout the home.

Residents’ bedrooms were clean, tidy, and well decorated. Bedrooms were personalised with items of importance or interest to each resident and some residents took delight in showing the inspector their bedrooms and explaining how they chose the décor. One resident explained how their personal space was important to them and said they felt “like a princess.”

Fire safety measures were in place and well managed to ensure residents, staff and visitors to the home were safe. Corridors were clear of clutter and obstruction and fire exits were also maintained free from obstruction. Fire extinguishers were wall mounted and easily accessible. The most recent fire risk assessment was conducted on 17 January 2024. While the written report from this fire risk assessment was not yet available, the manager provided assurances that all previous recommendations had been actioned.

Systems and processes were in place to ensure the management of risks associated with COVID-19 infection and other infectious diseases. For example, there was a good supply of cleaning materials and personal protective equipment (PPE) in the home, hand sanitiser was readily available to everyone entering the building, and the home liaised with the Public Health Authority (PHA) when required.

Review of records, observation of practice and discussion with staff confirmed that effective training on infection prevention and control (IPC) measures and the use of PPE had been provided.

Staff were observed to carry out hand hygiene at appropriate times and to use PPE in accordance with the regional guidance. Staff use of PPE and hand hygiene was regularly monitored by the manager and records were kept.

The visiting professional commented that the home was “always clean” when they visited. Relatives and residents said they were very satisfied with the environment.

#### **5.2.4 Quality of Life for Residents**

Discussion with residents confirmed that they were able to choose how they spent their day. For example, residents could lie on in bed in the morning or take naps during the day, or could go on outings with family.

Records showed that residents were encouraged to participate in regular resident meetings which provided an opportunity for residents to comment on aspects of life in the home and the running of the home. Records of who attended the meetings and what was discussed were well maintained. It was noted that the meeting records did not always contain a clear action plan. This was discussed with the manager who agreed to revise the meeting record format. This will be reviewed at the next inspection.

There was an activities programme in place which offered a range of activities included, but not limited to, quizzes, word games, music sessions, relaxation, bingo, name that tune, and seated dance. Residents could choose to attend group activities in a central hub area or to enjoy activities within their own cottages. Staff in the cottages were seen to support residents with games, or to use electronic tablets for entertainment.

There were themes each week within the activities programme and residents were seen to enjoy story telling week during the inspection, with staff reading various stories in the communal lounges.

Residents could avail of activities in the local community such as swimming, shopping, or attending a day centre.

Some services were provided by external visitors to the home, such as reflexology, chiropody, and hairdressing.

Staff survey comments included, “The Beeches is a great home for residents”, “...a brilliant environment for residents...”, “the quality of care is excellent”, “...wide variety of choices of food and plenty of outings and socialising.”

### **5.2.5 Management and Governance Arrangements**

Since the last inspection there had been no changes to the management arrangements. Mrs Siobhan Duffy has been the registered manager of the home since 25 July 2019. The manager had completed the My Home Life leadership support programme for home managers.

Staff were aware of who the person in charge of the home was, their own role in the home and how to raise any concerns or worries about residents, care practices or the environment.

There was evidence that a robust system of auditing was in place to monitor the quality of care and other services provided to residents. There was evidence of auditing across various aspects of care and services provided by the home.

It was established that the manager had a system in place to monitor accidents and incidents that happened in the home. Accidents and incidents were notified, if required, to residents' next of kin, their care manager and to RQIA.

There was evidence that the manager ensured that complaints were managed correctly and that good records were maintained. Residents said that they knew who to approach if they had a complaint and had confidence that any complaint would be managed well.

Staff commented positively about the management team and said that the manager was supportive, approachable and always available for guidance.

The home was visited each month by the registered provider to consult with residents, their relatives and staff and to examine all areas of the running of the home. The reports of these visits were completed in detail; where action plans for improvement were put in place, these were followed up to ensure that the actions were correctly addressed. These are available for review by residents, their representatives, the Trust and RQIA.

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

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Siobhan Duffy, Manager, as part of the inspection process and can be found in the main body of the report.





The Regulation and Quality Improvement Authority  
James House  
2-4 Cromac Avenue  
Gasworks  
Belfast  
BT7 2JA

**Tel** 028 9536 1111  
**Email** [info@rqia.org.uk](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
 [@RQIANews](https://twitter.com/RQIANews)

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