

Strangford Court RQIA ID: 1656 Oakland Suite 26 Strangford Road Downpatrick BT30 6SL

Inspector: Donna Rogan Inspection ID: IN023490 Tel: 028 4461 2481 Email: strangford.court@fshc.co.uk

Unannounced Care Inspection of Strangford Court Oakland Suite

23 March 2016

The Regulation and Quality Improvement Authority 9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced care inspection took place on 23 March 2016 from 10.30 to 14.45.

On the day of the inspection, the care in the home was found to be safe, effective and compassionate. The inspection outcomes found no significant areas of concern.

1.1 Actions/Enforcement Taken Following the Last Care Inspection

There were no further actions required to be taken following the last care inspection on 18 November 2015.

1.2 Actions/Enforcement Resulting from this Inspection

Urgent actions or 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	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person:	Registered Manager:
Maureen Claire Royston	Claire Quail
Person in Charge of the Home at the Time of Inspection: Claire Quail	Date Manager Registered: 10 March 2011
Categories of Care:	Number of Registered Places:
NH-LD, NH-LD(E)	14
Number of Patients Accommodated on Day of Inspection: 14	Weekly Tariff at Time of Inspection: £661 to £1096

3. Inspection Focus

The purpose of this inspection was to seek assurances that the care and welfare of patients was in accordance with The Nursing Homes Regulations (Northern Ireland) 2005 and DHSSPS Care Standards for Nursing Homes, April 2015 and to determine if the following standard had been met:

• Standard 11: Activities and events

4. Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to inspection the following records were analysed:

- notifiable events submitted since the previous care inspection
- the registration status of the home
- written and verbal communication received since the previous care inspection
- the returned quality improvement plans (QIPs) from inspections undertaken in the previous inspection year
- the previous care inspection report.

During the inspection, care delivery/care practices were observed and a review of the general environment of the home was undertaken. The inspector also met with approximately six patients and three care staff.

The following records were examined during the inspection:

- validation evidence linked to the previous QIP
- staffing arrangements in the home
- two patient care records.

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of Strangford Court, Oakland Suite was an unannounced care inspection dated 18 November 2015. There were no requirements or recommendations made.

5.2 Activities and events

There were eleven patients in the home during the inspection. The remainder were attending day care services. The atmosphere in the home was observed as being jovial and relaxed. Staff were observed to engage with patients in a respectful and dignified manner. Staff recognised opportunities for interaction with patients and demonstrated an understanding in their approach to care. Staff were also very familiar with patients identified needs, life experiences and interests. There was evidence of appropriate equipment, aids and technology available in the home to provide purposeful, enjoyable and meaningful activities for patients. It was evident that the cultural, religious and spiritual needs of patients are being met throughout the range of activities provided in the home. The home incorporates important dates and festivals into the calendar of activities. Following discussion with staff on duty there are regular activities in place. There was evidence that activities are organised on a formal basis for those patients who do not attend day care. A formal programme is implemented and includes the preferences and choices of patients during the development of the programme. A record of the activity programme was being maintained and evidenced that the individual activities are evaluated regularly to ensure they are enjoyable, appropriate and suitable. The records included evidence of engagement with patients and those delivering the activity or event.

5.3 Environment

A review of the environment evidenced that it was being well maintained in accordance with best practice in relation to the management of infection control. The environment was assessed as being bright, cheerful and welcoming. It is decorated to a high standard and patients who could communicated that they liked their bedroom and the environment of the home. Bedrooms were observed to be decorated and maintained in accordance with the individual interests and choices of patients. Relevant aids, equipment and support were available for patients to enable choices, independence.

5.4 Patient and staff views

Patients

Discussions with patients indicated that they were very happy in the home. Both verbal and non-verbal communication evidenced that patients were content and well looked after. Patients who could communicate verbally stated that they liked the staff in the home stating that they were well looked after and enjoyed staying there. There were no concerns raised by patients.

Staff

All staff on duty indicated that they were very happy working in the home. They stated that care services in the home were excellent and that it was the patients' home and where possible their choices, wishes and feeling were always prioritised. They stated that they were well trained and supported in their roles and responsibilities.

Areas for Improvement

There were no requirements or recommendations made following this inspection.

Number of Requirements: 0 Number of Recommendations:
--

6. No requirements or recommendations resulted from this inspection.

I agree with the content of the report.				
Registered Manager	Claire Quail	Date Completed	20/04/16	
Registered Person	Dr Claire Royston	Date Approved	20.04.16	
RQIA Inspector Assessing Response	Donna Rogan	Date Approved	21.04.16	

Please provide any additional comments or observations you may wish to make below:

Please ensure this document is completed in full and returned to <u>Nursing.Team@rqia.org.uk</u> from the authorised email address

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 within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.