



# Inspection Report

**Name of Service: Brooklands Healthcare Magherafelt**

**Provider: Brooklands Healthcare Ltd**

**Date of Inspection: 10 April 2025**

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

## 1.0 Service information

<b>Organisation/Registered Provider:</b>	Brooklands Healthcare Ltd
<b>Responsible Individual:</b>	Mr Jarlath Conway
<b>Registered Manager:</b>	Mrs Deirdre Mary Monaghan
<p><b>Service Profile –</b>  This home is a registered residential care home which provides health and social care for up to 8 residents living with dementia. The home is located on the ground floor of the building and has access to a lounge and an outdoor garden area.</p> <p>There is a separate registered nursing home which occupies the same building and the registered manager for this home manages both services.</p>	

## 2.0 Inspection summary

An unannounced inspection took place on 10 April 2025, between 10.10 am and 2.50 pm by a care inspector.

The inspection was undertaken to evidence how the home is performing in relation to the regulations and standards; and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

The inspection found that safe, effective and compassionate care was delivered to residents and that the home was well led. Details and examples of the inspection findings can be found in the main body of the report.

It was evident that staff promoted the dignity and well-being of residents and that staff were knowledgeable and well trained to deliver safe and effective care. Residents were observed to be relaxed and comfortable in their surroundings and in their interactions with staff.

As a result of this inspection, no new areas for improvement were identified. Full details of the inspection can be found in the main body of this report.

## 3.0 The inspection

### 3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the home was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous areas for improvement issued, registration information, and any other written or verbal information received from resident's, relatives, staff or the commissioning trust.

Throughout the inspection process inspectors seek the views of those living, working and visiting the home; and review/examine a sample of records to evidence how the home is performing in relation to the regulations and standards.

Through actively listening to a broad range of service users, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

### 3.2 What people told us about the service

Residents spoken with who were able to make their wishes known said they enjoyed living in the home. Some of the comments shared by residents included; "I like it in here, it's very relaxing" and "I love it here, the company and the people." Those residents who were unable to make their wishes known appeared to be relaxed and comfortable in their surroundings.

One relative who was visiting provided positive feedback about their relative's experience residing in the home. Some of the comments shared regarding the care included; "the girls (staff) are brilliant... they are patient and kind" and "there is excellent communication from staff."

Staff expressed satisfaction with how the home was managed. They also said that they had the appropriate training to look after residents and meet their needs. They said that the team communicated well and the manager was readily available to discuss any issues and concerns should they arise.

Observation of practice evidenced that residents were able to choose how they spent their day. For example, residents could have a lie in, stay in their room and watch TV or attend activities in the lounge.

## 3.3 Inspection findings

### 3.3.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of residents. There was evidence of robust systems in place to manage staffing.

Advice was provided to the manager for consideration to enhance the current supervision format to include staff's performance.

Staff said there was good team work and that they felt well supported in their role and that they were satisfied with the staffing levels. Staff said that there was enough staff to provide activities.

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.

### 3.3.2 Quality of Life and Care Delivery

Staff were knowledgeable of individual residents' needs, their daily routine wishes and preferences. Throughout the day, staff confirmed that staff attended 'safety pauses' prior to mealtimes to ensure good communication across the team about changes in residents' needs.

Staff were observed to be prompt in recognising residents' needs and any early signs of distress or illness, including those residents who had difficulty in making their wishes or feelings known. Staff were skilled in communicating with residents; they were respectful, understanding and sensitive to residents' needs.

It was observed that staff respected residents' privacy by their actions such as knocking on doors before entering, discussing residents' care in a confidential manner, and by offering personal care to residents discreetly. Staff were also observed offering residents choice in how and where they spent their day or how they wanted to engage socially with others. It was observed that staff were supporting residents to sit outside in the enclosed garden. Residents were observed to be laughing and engaging playfully with the staff and one another.

At times some residents may require the use of equipment that could be considered restrictive or they may live in a unit that is secure to keep them safe. It was established that safe systems were in place to safeguard residents and to manage this aspect of care.

Discussion with staff confirmed that the risk of falling and falls were well managed and referrals were made to other healthcare professionals as needed. For example, residents were referred to the Trust's Specialist Falls Service, their GP, or for physiotherapy.

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 and their diet modified.

The dining experience was an opportunity for residents to socialise, music was playing, and the atmosphere was calm, relaxed and unhurried. It was observed that residents were enjoying their meal and their dining experience. It was observed that staff had made an effort to ensure residents were comfortable, had a pleasant experience and had a meal that they enjoyed.

The importance of engaging with residents was well understood by the manager and staff. Observation of individual activities for example; knitting and colouring, confirmed that staff knew and understood residents' preferences and wishes and helped residents to participate in planned activities or to remain in their bedroom with their chosen activity such as reading, listening to music or waiting for their visitors to come.

Life story work with residents and their families helped to increase staff knowledge of their residents' interests and enabled staff to engage in a more meaningful way with their residents throughout the day.

The weekly programme of social events was displayed on the noticeboard and shared with residents, families and staff advising of future events.

Residents' needs were met through a range of individual and group activities such as bingo, board games, arts and crafts, hairdressing, one to one reading or listening to the radio.

Residents were well informed of the activities planned for the day and of their opportunity to be involved and looked forward to attending the planned events.

### 3.3.3 Management of Care Records

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

Residents care records were held confidentially.

Care records were person centred, well maintained, regularly reviewed and updated to ensure they continued to meet the residents' needs. Care staff recorded regular evaluations about the delivery of care. Residents, where possible, were involved in planning their own care and the details of care plans were shared with residents' relatives, if this was appropriate.

There was evidence of activities recorded across a number of different formats. A discussion took place with the manager to ensure these are captured accurately to reflect residents who attend planned activities, their engagement and the staff member who was facilitating the activity. The manager provided assurances the previous format would be implemented to ensure consistency regarding the recording of activities.

### 3.3.4 Quality and Management of Residents' Environment

The home was warm and welcoming. Corridors were clear and clutter free. The home was generally clean and tidy. There was evidence of personalisation of resident's bedrooms with items important to the resident. There was evidence of repairs required to a number of areas in the home which appeared worn, for example; the staff work station and flooring across resident's bedrooms. Assurances were provided in writing by the manager to confirm that actions on the identified areas had been taken and completed following the inspection.

Discussion with staff confirmed that environmental and safety checks were carried out, as required on a regular basis, to ensure the home was safe to live in, work in and visit. For example, fire safety checks and resident call system checks. A discussion took place with the manager regarding the fire exit door at the back of the building, assurances were provided in writing following the inspection that this has been discussed and agreed with the home's fire risk assessor.

Review of records and observations confirmed that systems and processes were in place to manage infection prevention and control which included policies and procedures and regular monitoring of the environment and staff practice to ensure compliance. Advice was provided to the manager to include staff identifiers on hand hygiene audits to ensure these are robust if deficits are identified.

### 3.3.5 Quality of Management Systems

There has been no change in the management of the home since the last inspection. Mrs Deirdre Mary Monaghan has been the Registered Manager in this home since 11 June 2018.

Staff commented positively about the manager and described her as supportive, approachable and able to provide guidance.

Review of a sample of records evidenced that a robust system for reviewing the quality of care, other services and staff practices was in place. There was evidence that the manager responded to any concerns, raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services provided by the home.

The home was visited each month by a representative of the registered provider. There was not always evidence of consultation with relatives or attempts to capture the views of relatives with regards to the running of the home. Advice was provided to the manager to ensure this is included.

Relatives said that they knew who to approach if they had a complaint and had confidence that any complaint would be managed well.

A record of compliments was maintained in the home, some of the comments shared included; "thank-you so much for all your help with mum. You're all so kind and caring."

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

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

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