

# Announced Care Inspection Report

## 14 May 2020



## Rylands

**Type of Service: Residential Care Home (RCH)**  
**Address: 11 Doagh Road, Kells, Ballymena BT42 3LZ**  
**Tel No: 028 25892411**  
**Inspectors: Marie-Claire Quinn and Mandy Ellis**

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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 DHSSPS 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 residential care for up to 14 residents. The residential home is located within the same grounds as a registered nursing home which is under the same management.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Rylands  <b>Responsible Individuals:</b> Trevor Duncan Karen Duncan	<b>Registered Manager and date registered:</b> Valerie Rutherford – 6 June 2018
<b>Person in charge at the time of inspection:</b> Valerie Rutherford	<b>Number of registered places:</b> 14
<b>Categories of care:</b> Residential Care (RC) I – Old age not falling within any other category. MP(E) - Mental disorder excluding learning disability or dementia – over 65 years. PH(E) - Physical disability other than sensory impairment – over 65 years.	<b>Number of residents accommodated in the residential home on the day of this inspection:</b> 14

### 4.0 Inspection summary

An announced inspection took place on 14 May 2020 from 11.00 to 16.00 hours. Short notice of the inspection was provided to the manager on the day in order to ensure that arrangements could be made to safely facilitate the inspection during the ongoing coronavirus (COVID-19) pandemic.

During the coronavirus (COVID-19) pandemic the Department of Health (DOH) directed RQIA to continue to respond to ongoing areas of risk identified in care homes.

During telephone contact with the manager on 11 May 2020, concerns were raised in relation to preventative measures being taken in the home to minimise the risk of transmission of coronavirus. In response to this information RQIA decided to undertake an inspection to this home. This was completed in conjunction with an inspection of the nursing home, on the same site.

The following areas were examined during the inspection:

- Infection prevention and control (IPC)
- Personal protective equipment (PPE)
- Care delivery
- Governance and management

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, and enhance practice and residents' experience.

## 4.0 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Valerie Rutherford, manager and Kripa Sulabha, deputy 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.

## 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed, including:

- Notifiable events since the previous care inspection
- Written and verbal communication received since the previous care inspection
- The previous care inspection report

A poster was provided for staff detailing how they could complete an electronic questionnaire; however, no responses were received.

The following records were examined during the inspection:

- Staff duty rota from 11 May to 24 May 2020
- Residents' temperature and visual checks from 11 to 15 May 2020
- A sample of governance records
- A sample of monthly monitoring reports
- A sample of minutes of staff daily briefing meetings

## 6.0 The inspection

### 6.1 Review of areas for improvement from previous inspection

The most recent inspection of the home was an unannounced care inspection undertaken on 4 February 2020.

There were no areas for improvement identified as a result of the last care inspection.

## 6.2 Inspection findings

### 6.2.1 Infection Prevention and Control

Signage had been placed at the entrance which provided advice and information about COVID-19.

Catering, domestic and activities staff are shared between the nursing and residential home. Staff advised that recent changes had been made to the delegation of these duties, to minimise the risk of cross infection between the homes.

The home was clean, tidy and fresh smelling. Allocated domestic staff were cleaning during the inspection and staff confirmed additional cleaning, including touch points, was also completed during the night shift.

Discussion with staff and review of records confirmed that all staff and residents' temperatures were taken twice daily as part of ongoing monitoring measures in relation to COVID-19. This had commenced from 11 May 2020.

When we spoke with staff, they were knowledgeable about the signs and symptoms of coronavirus and how they could access testing if needed. We did ask that further information be provided on how staff could self-refer for testing.

### 6.2.2 Personal Protective Equipment

Signage and information in relation to the use of PPE was displayed within the home.

Staff were observed to use PPE appropriately during our visit. PPE stations were well stocked throughout the home.

Staff told us that they had received training in the correct method of donning and doffing of PPE, infection prevention and control measures and hand hygiene. This was reflected in our observations on the day of inspection.

### 6.2.3 Care delivery

Residents looked well cared for; they were dressed in clean clothes and were well groomed. Given the need for social distancing measures, residents were staying in their rooms and group activities were temporarily suspended. Residents appeared content either watching television, reading, listening to music or resting in their rooms. One resident told us, "I'm happy. I know there is a bug and I've to stay in my room to be safe; the staff explained it to me."

Staff provided regular reassurance, redirection and friendly interactions with residents. Call bells and queries from residents were responded to promptly. Staff told us, "There are enough staff but it can be pressurised; (meal times) are the busiest time."

We observed the serving of the lunch time meal. The home had recently adopted a new system for meal times to minimise contact between nursing and residential staff. This was well organised and efficient.

Residents were offered a choice of main meal and a range of hot and cold drinks. One resident wanted to enjoy their lunch in the lounge, and staff accommodated this. The food looked and smelled appetising. Residents told us they had enjoyed their lunch and generally liked the food in the home.

Visits from friends and relatives into the home had been suspended prior to the COVID-19 outbreak; however, staff facilitated alternative ways for residents to maintain contact with their loved ones, for instance, some family members would call at their relatives' bedroom windows. Families were provided with regular updates via telephone calls from staff and were offered options such as video calling. We did ask the manager to review the provision of activities staff, who could offer additional company and social interaction for residents.

#### **6.2.4 Governance and management**

Staff told us that they felt well supported in their roles and that the manager was approachable and is a good leader. Staff feedback included the following comments:

- “We are in a good routine and know what to do. I missed a bit of training and Val (manager) went through it with me.”
- “It feels safe working here. There is more than enough PPE.”
- “I’m very happy to work here.”
- “I have no concerns about working in the home.”

Staff told us that they were well informed and kept up to date on changing guidance relating to COVID-19. Relevant and up to date guidance was visible in the staff office and also contained in a specific ‘COVID-19’ file. This included information such as appropriate donning and doffing of PPE, testing and staff wellbeing. Staff also attended daily afternoon briefings. We reviewed the minutes of these meetings which were satisfactory.

The manager advised that the home’s responsible individuals “are incredibly supportive” and have been readily available and accessible.

When we reviewed the home’s monthly monitoring reports, we noted this had not been completed for two months. Management explained this was an oversight and would recommence as soon as possible. This will be reviewed at a future care inspection.

We discussed the need to maintain robust written oversight of operations in the home. We were able to review additional governance records such as audits of hand hygiene and IPC practices. These were satisfactory.

Following the inspection, the manager also provided additional governance documents including manager’s daily audits and weekly manager’s report to evidence how robust managerial oversight is maintained in the home.

#### **Areas of good practice**

Areas of good practice were identified in relation to care delivery and communication between management and staff.

## Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

### 6.3 Conclusion

On the day of the inspection we observed that residents were well looked after; staff treated them with kindness, care and compassion.

The home was clean, and tidy throughout.

The current guidelines on the use of PPE and IPC measures to be employed during an outbreak of COVID-19 were being followed within the home, and management reviewed and implemented these as required.

### 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.



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