

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)

FAILURE TO COMPLY NOTICE

<b>Name of Registered Establishment:</b> Carn-vaddy (RQIA ID: 1348)	<b>Name of Registered Person:</b> Mrs Margaret Magee
<b>Address of Registered Establishment:</b> 15 Doctors Road, Ballymena, BT42 4HL	
<b>Issue Date:</b> 16 December 2020	<b>FTC Ref:</b> FTC000138
<b>Regulation not complied with:</b>  <b><i>The Residential Care Homes Regulations (Northern Ireland) 2005</i></b>  <b><i>Registered person: general requirements</i></b>  <b><i>Regulation 10.—</i></b> <b><i>(1) The registered provider and the registered manager shall, having regard to the size of the residential care home, the statement of purpose, and the number and needs of the residents, carry on or manage the home (as the case may be) with sufficient care, competence and skill.</i></b>	
<b>Specific failings to comply with regulations:</b>  During the unannounced inspection on 23 and 30 November 2020 concerns were identified regarding the lack of robust managerial oversight and governance arrangements within the home.  There was a lack of a robust system in place to regularly review the quality of care and other services provided by the home. This includes, but is not limited to, the oversight and management of staff recruitment, staff induction, competency and capability assessments, infection prevention and control measures and medicines management.  Care records reviewed lacked sufficient information to direct staff on the delivery of care required for each resident.  RQIA were concerned that these deficits had highlighted through the inspection process rather than by the manager through effective monitoring of the service.	

**Action required to comply with regulations:**

The registered person must ensure that:

- a robust system of governance, including regular audits, is put in place to ensure that the quality of care and other services provided by the home are reviewed at regular intervals This includes regular auditing of medicines management; infection prevention and control measures and maintenance of residents' care records.
- there is clear evidence that when deficits are identified through the audit process, an action plan is put in place to ensure the necessary improvements are made
- any person given the role of being in charge of the residential home has been deemed competent and capable to do so; this must include medicines management
- the staff duty rota should clearly identify the person in charge of the home, the name and role of each staff member working in the home and the capacity and hours in which they worked
- new staff receive an induction and orientation to the home which is recorded and signed and dated by the person carrying out the induction and the staff member
- a staff training matrix is maintained which includes the names of all staff working within the home and the training they have completed and when
- all staff working in the home can demonstrate their knowledge of infection prevention and control measures commensurate with their role and function in the home.
- comprehensive, individualised and holistic care plans are in place that reflect the individual assessed needs of residents; and detail the care and support required from staff to meet those needs
- residents' care record audits are implemented with clear evidence that when deficits are identified through the audit process, an action plan is put in place to ensure the necessary improvements are made.
- a comprehensive and meaningful quality monitoring report is completed monthly in accordance with Standard 20.11 of the Residential Care Homes Minimum Standards (2011)
- the completed quality monitoring report is forwarded to RQIA by the fourth day of each month, until further notice.

**The Registered Person may make written representations to the Chief Executive of RQIA regarding the issue of a failure to comply notice, within one month of the date of serving this notice.**

**Date by which compliance must be achieved: 20 January 2021**

*Karen Harvey*

**Signed.....Project Lead for Assurance**

***This notice is served under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Care Homes (Northern Ireland) (2005)***

***It should be noted that failure to comply with some regulations is considered to be an offence and RQIA has the power under regulations to prosecute for specified offences.***

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<b>Address of Registered Establishment:</b> 15 Doctors Road, Ballymena, BT42 4HL	
<b>Issue Date:</b> 16 December 2020	<b>FTC Ref:</b> FTC000139
<b>Regulation not complied with:</b>  <b><i>The Residential Care Homes Regulations (Northern Ireland) 2005</i></b>  <b><i>Health and welfare of residents</i></b>  <b><i>Regulation 13.—</i></b> <b><i>(4) Subject to paragraph (5) the registered person shall make suitable arrangements for the ordering, storage, recording, handling, safe keeping, safe administration and disposal of medicines used in or for the purposes of the home to ensure that –</i></b> <b><i>(b) medicine which is prescribed is administered as prescribed to the resident for whom it is prescribed, and to no other resident; and</i></b>	
<b>Specific failings to comply with regulations:</b>  During an unannounced inspection on 30 November 2020, concerns were identified with the management of medicines. The findings clearly highlighted that safe systems were not in place to ensure that residents were receiving their medicines as prescribed.  When new residents were admitted to the home, written confirmation of the current medicine regimes were not obtained. During a meeting on 3 December 2020 the registered manager advised that there were discrepancies between the list of prescribed medicines held by the general practitioner and those medicines that had been administered since admission for one resident. Confirmation of the medicine regime on admission is essential to ensure that all of the correct medicines are available for administration.  There was no system in place to oversee the management of self-administered medicines. When a resident was responsible for self-administering some of their medicines, there was no risk assessment in place regarding the resident's capability and competency to do this and a care plan was not maintained. On review of self-administered inhaled medicines, we found that the residents had not been taking	

their inhalers for several months.

We identified deficits in the standard of record keeping for medicines. The personal medication records were incomplete. These records and some administration records were over-photocopied which affected the legibility. The pre-printed medication administration records did not include medicines prescribed on a 'when required' basis. The administration of some medicines had not been accurately recorded. We established that one medicine was discontinued; however, could find no written confirmation of when this occurred or if the medicine was returned to the community pharmacy for disposal.

Medicine audit trails could not be completed for all medicines which were not supplied in a monitored dosage system and the date of opening was not recorded. For one medicine that could be audited, a discrepancy was noted which indicated that it had not been administered as prescribed. The need for a robust process to audit medicines management on a regular basis, including recording the date of opening, was discussed at previous inspections.

There was no evidence of the training records for all staff who administer medicines in the home or competency and capability assessments being completed.

**Action required to comply with regulations:**

The registered person must ensure that:

- the admission process for new residents is reviewed and detailed in a policy; this must include arrangements to obtain written confirmation from the prescriber of new resident's medicines, processes to check that the correct medicines have been supplied; and how any issues are managed
- residents have a supply of their currently prescribed medicines
- where residents are responsible for the self-administration of their medicines, a written risk assessment is completed and reviewed regarding resident's competence, compliance and capability to manage this
- personal medication records are up to date and accurate at all times
- records of administered medicines are accurately completed
- a robust auditing process must be developed and implemented for medicines management
- the registered manager and all staff with responsibility for managing medicines are provided with further medicines management training from a suitably qualified person, and records are maintained
- staff competency assessment regarding medicines management is completed by a suitably qualified person and records are maintained.

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Karen Harvey

Signed.....Project Lead for Assurance

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<b>Address of Registered Establishment:</b> 15 Doctors Road, Ballymena, Co Antrim BT42 4HL	
<b>Issue Date:</b> 16 December 2020	<b>FTC Ref:</b> FTC000140
<b>Regulation not complied with:</b>  <b><i>The Residential Care Homes Regulations (Northern Ireland) 2005</i></b>  <b><i>Fitness of workers</i></b>  <b><i>Regulation 21.—</i></b> <i>(1) The registered person shall not employ a person to work at the residential care home unless –</i> <i>(a) the person is fit to work at the home;</i> <i>(b) subject to paragraph (5), he has obtained in respect of that person the information and documents specified in paragraphs 1 to 7 of Schedule 2;</i> <i>(c) he is satisfied on reasonable grounds as to the authenticity of the references referred to in paragraph 3 of Schedule 2 in respect of that person.</i>	
<b>Specific failings to comply with regulations:</b>  During the unannounced inspection on 23 November 2020 RQIA identified concerns regarding the recruitment of staff. Recruitment records were not robust or available to provide the necessary assurance that staff working in the home had been recruited safely and in accordance with legislation and adult safeguarding.  There was no written or recorded evidence of staff interviews prior to commencing work in the home; we were unable to confirm that a satisfactory Access NI check had been undertaken prior to staff commencing employment in the home and there was no managerial oversight of staff's professional registration with Northern Ireland Social Care Council (NISCC).	
<b>Action required to comply with regulations:</b>  The registered person must ensure that: <ul style="list-style-type: none"><li>• a robust recruitment policy and procedure is in place which reflects relevant</li></ul>	

legislation and adult safeguarding requirements to ensure that at all times staff are recruited and employed safely

- a robust monitoring system is in place to ensure that the recruitment process is compliant with legislation and adult safeguarding requirements
- there is evidence available that Access NI enhanced checks are completed and scrutinised prior to an individual commencing employment in the home
- there is evidence that two written references are obtained including one from the present or most recent employer and that these are scrutinised prior to the individual commencing employment in the home.
- a robust monitoring system is in place to ensure that staff are registered with the relevant regulatory body in accordance to their job role.

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