



The Regulation and  
Quality Improvement  
Authority

Owen Mor Care Centre  
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Londonderry  
BT48 8JH

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**Unannounced Care Inspection  
of  
Owen Mor Care Centre**

**25 January 2016**

The Regulation and Quality Improvement Authority  
Hilltop, Tyrone & Fermanagh Hospital, Omagh, BT79 0NS  
Tel: 028 8224 5828 Fax: 028 8225 2544 Web: [www.rqia.org.uk](http://www.rqia.org.uk)

## 1. Summary of Inspection

An unannounced care inspection took place on 25 January 2016 from 06.00 hours to 10.00 hours. The focus of this inspection was to follow up on concerns raised by a patient representative with regard to the following areas:

- staffing levels
- early morning rising
- pre-employment checks. (specifically Access NI checks)

On the day of the inspection, the care in the home was found to be safe, effective and compassionate. The inspection outcomes found no areas of concern and one area for improvement was identified.

### 1.1 Actions/Enforcement Taken Following the Last Care Inspection

Other than those actions detailed in the previous QIP, there were no further actions required to be taken following the last care inspection on 05 October 2015.

### 1.2 Actions/Enforcement Resulting from This Inspection

Enforcement action did not result from the findings of this inspection.

### 1.3 Inspection Outcome

	Requirements	Recommendations
<b>Total number of requirements and recommendations made at this inspection</b>	<b>0</b>	<b>1</b>

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> East Eden Ltd / Dr Brendan McDonald	<b>Registered Manager:</b> Mrs Jane Laird
<b>Person in Charge of the Home at the Time of Inspection:</b> Mrs Kathleen Hennessy, registered nurse (until 08.00 hours) Mrs Jean Brown, clinical lead (08.00 – 09.00 hours) Mrs Jane Laird (from 09.00 hours)	<b>Date Registered:</b> 05 June 2015
<b>Categories of Care:</b> NH-DE, RC-DE	<b>Number of Registered Places:</b> 47
<b>Number of patients accommodated on day of inspection:</b> 44 patients	<b>Weekly Tariff at Time of Inspection:</b> £510 - £633

### 3. Inspection Focus

Information/correspondence was received by RQIA regarding concerns in the following areas:

- staffing levels
- early morning rising
- pre-employment checks. (specifically Access NI checks)

It is not the remit of RQIA to investigate complaints made by or on behalf of individuals, as this is the responsibility of the providers and commissioners of care. However, if there is considered to be a breach of regulation as stated in The Nursing Homes Regulations (Northern Ireland) 2005, RQIA has a responsibility to review the issues through inspection.

### 4. Methods/Process

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

During the inspection, the inspector met with all staff on night duty (two registered nurses and three care assistants) and a sample of day staff (clinical lead nurse and three care staff). The inspector also met with six patients individually.

The following records were examined during the inspection:

- six care records
- staff duty rotas
- food and fluids records
- repositioning and personal care records
- three staff personnel records.

### 5. The Inspection

#### 5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 05 October 2015. The completed QIP was returned and approved by the care inspector.

## 5.2 Review of Requirements and Recommendations from the Last Care (same specialism) Inspection

Last Care Inspection Statutory Requirements		Validation of Compliance
<p><b>Requirement 1</b></p> <p>Ref: Regulation 13 (1) (b)</p> <p>Stated: Second time</p>	<p>The registered manager must review the management of meals and meal times to ensure the following issues are addressed:</p> <ul style="list-style-type: none"> <li>• mealtimes are organised to enable patients to receive adequate supervision which is specific to their identified care needs</li> <li>• staff have up to date knowledge and skills in the management of feeding techniques for patients with swallowing difficulties.</li> </ul>	Not Inspected
	<p><b>Response by Registered Manager Detailing the Actions Taken:</b></p> <p>This requirement was not reviewed during this inspection. It will be carried forward for review at a further inspection.</p>	
Previous Inspection Recommendations		Validation of Compliance
<p><b>Recommendation 1</b></p> <p>Ref: Standard 35.16</p> <p>Stated: First time</p>	<p>The responsible person should ensure that an analysis of accidents/incidents is completed on a monthly basis to identify any trends and to take appropriate action to prevent a recurrence.</p>	Not Inspected
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>This recommendation was not reviewed during this inspection. It will be carried forward for review at a further inspection.</p>	
<p><b>Recommendation 2</b></p> <p>Ref: Standard 16.11</p> <p>Stated: First time</p>	<p>The registered persons should ensure records are kept of all complaints including whether or not the complainant was satisfied with the outcome, and how this level of satisfaction was determined.</p>	Not Inspected
	<p><b>Action taken as confirmed during the inspection:</b></p> <p>This recommendation was not reviewed during this inspection. It will be carried forward for review at a further inspection.</p>	

### 5.3 Staffing

Staff duty rotas for weeks commencing 18 and 25 January and 01 February 2016 were reviewed.

#### **Unit one – Occupancy on the day of the inspection: 17 patients**

08.00 – 14.00 hours - 1 registered nurse, 4 care assistants

14.00 – 20.00 hours - 1 registered nurse, 3 care assistants

22.00 – 08.00 hours - 1 registered nurse, 1 care assistant plus twilight shift (17.00 – 23.00) shared between units one and three.

#### **Units two and three – Occupancy on the day of the inspection: 27 patients**

08.00 – 14.00 hours - 2 registered nurses, 6 care assistants

14.00 – 20.00 hours - 1 registered nurse, 5 care assistants

22.00 – 08.00 hours - 1 registered nurse, 2 care assistants plus twilight shift (17.00 – 23.00) shared between units one and three.

The inspector spoke with all staff on night duty (two registered nurses and three care assistants) and a sample of day staff (the clinical lead nurse and three care staff). No issues regarding the current staffing arrangements were raised with the inspector. Staff spoken with reported that there were good working relationships among all staff. Observations made during the inspection evidenced that care was delivered in a timely way.

Staffing levels and patient dependency levels were also discussed with the registered manager. The registered manager confirmed that staffing levels were kept under review to ensure the care needs of patients were being met.

### 5.4 Care Practices and Care Records

The atmosphere in the home was calm and well organised. Staff were observed to be attending to patient's needs in a dignified and respectful manner. All patients were either asleep or resting in their beds until 07.45 – 08.00 hours. Staff began to assist those patients who had requested to get up out of bed around 08.00 hours.

The inspector spoke with six patients. A number of patients were unable to express their views due to the frailty of their condition. All patients appeared well presented and comfortable in their surroundings. No concerns were raised with the inspector.

A review of six care records evidenced that a comprehensive care plan was in place for each patient, generated from a holistic assessment process and was reflective of person-centred principles. The care records evidenced the involvement of the patient and/or their representatives in the development and review of care plans. Assessments and care plans were reviewed at agreed time intervals or more frequent depending on the needs of the patient. The outcomes of care delivered were monitored and recorded contemporaneously. No concerns were identified.

## 5.5 Recruitment Records

Three personnel records were reviewed. The records were generally well maintained. There was evidence that pre-employment checks (including Access NI checks) had been completed prior to staff taking up post. There was no evidence of a pre-employment health assessment in two of the records reviewed. A recommendation has been made.

While reference requests asked for information relating to 'any pending/outstanding disciplinary matters or investigations', no information was sought regarding referrals to regulatory bodies. It is recommended that this information is included in application forms and reference requests.

## 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Mrs Jane Laird, registered manager as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

### 6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Nursing Homes Regulations (Northern Ireland) 2005.

### 6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and DHSSPS Care Standards for Nursing Homes, April 2015. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

### 6.3 Actions Taken by the Registered Person

The QIP must be completed by the registered person/registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to [nursing.team@rqia.org.uk](mailto:nursing.team@rqia.org.uk) and assessed by the inspector.

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. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

## Quality Improvement Plan

### Statutory Requirements – no requirements

#### Recommendation

##### Recommendation 1

**Ref:** Standard 38.3

**Stated:** First time

**To be Completed by:**  
25 February 2016

The registered manager should ensure that, before making an offer of employment:

- a pre-employment health assessment is obtained in line with guidance and best practice.
- information regarding referrals to regulatory bodies should be requested on application forms and reference requests.

#### **Response by Registered Person(s) Detailing the Actions Taken:**

A pre-employment health questionnaire is sent out with all application forms in line with best practice.

All reference request forms request that any previous/current disciplinary action is recorded by the nominated referee.

Application forms and interview documentation include questions related to referrals to regulatory bodies.

<b>Registered Manager Completing QIP</b>	Jane Laird	<b>Date Completed</b>	22/02/16
<b>Registered Person Approving QIP</b>	Brendan McDonald	<b>Date Approved</b>	22/02/16
<b>RQIA Inspector Assessing Response</b>	Bridget Dougan	<b>Date Approved</b>	08/03/16

*\*Please ensure this document is completed in full and returned to [Nursing.Team@rqia.org.uk](mailto:Nursing.Team@rqia.org.uk) from the authorised email address\**