

Unannounced Follow-up Care Inspection Report 5 November 2019











Blair Mayne Residential Care Home

Type of Service: Residential Care Home Address: c/o Blair House Care Home, 107 Dakota Avenue, Newtownards, BT23 4QX

Tel No: 028 9182 4450 Inspector: Sharon McKnight 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 provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a registered residential care home which provides care for up to 25 residents who are living with dementia. This home is located in the same building as Blair House Nursing home.

3.0 Service details

Organisation/Registered Provider: Amore (Watton) Limited Responsible Individual(s):	Registered Manager: Vera Ribiero Registration pending
Nicola Cooper	
Person in charge at the time of inspection: Sharon Butler, Regional Care Director	Number of registered places: 25
	11 residents to be accommodated on the Ground Floor and 14 residents to be accommodated on the First Floor.
Categories of care: Residential Care (RC) DE – Dementia	Number of residents in the home on the day of inspection:

4.0 Inspection summary

An unannounced inspection took place on 5 November 2019 from 09:30 to 11:35 hours.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

As a result of a phone call received via RQIA duty inspector the lead inspector for Blair House Care Home rang and spoke with the deputy manager. During this conversation it became apparent that patients from the nursing home were residing on the first floor of the Blair Mayne Residential home. Therefore the residential home was operating outside of its condition of registration and Statement of Purpose.

Given this information it was agreed that an inspection would be undertaken to establish the extent of the breach in respect of the registration of the residential home. The inspector was also asked to examine any potential resident impact and how the situation was being managed operationally.

During the inspection we identified that fourteen nursing patients from Blair House Care Home were residing on the first floor of the residential home. This has resulted in a breach in regulations as nursing patients are now being accommodated in the residential home.

As a consequence, a meeting was held on 12 November 2019 in RQIA with the intention of issuing a failure to comply notice under The Residential Care Homes Regulations (Northern Ireland) 2005, Regulation 3(3)(b) and Regulation 18(1).

At this meeting RQIA were provided with appropriate assurances and the decision was made to take no further enforcement action at this time.

4.1 Inspection outcome

No new areas for improvement were identified as a result of this inspection.

Enforcement action was considered given the findings of this inspection but we did not proceed to issuing Failure to Comply Notices due to the level of assurances provided.

4.2 Action/enforcement taken following the most recent inspection on 14 August 2019

The most recent inspection of the home was an enforcement monitoring inspection undertaken on 14 August 2019. This inspection sought to assess the level of compliance achieved in relation to a Failure to Comply (FTC) Notice issued on 18 June 2019. Evidence was available to validate full compliance with the FTC Notice.

5.0 How we inspect

To prepare for this inspection we reviewed the current registration status of the home and the application to vary the registration of the residential home submitted to RQIA on 6 September 2019.

Due to the focus of this inspection the areas for improvement identified at the last inspection were not reviewed as part of this inspection and are carried forward to the next care inspection.

The findings of the inspection were provided to the regional care director at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 14 August 2019.

Due to the focus of this inspection the areas for improvement identified at the last inspection were not reviewed as part of this inspection and are carried forward to the next care inspection. Please refer to section 7.2 of this report for details.

6.2 Inspection findings

We arrived in the home at 09:30 hours, residents were enjoying their breakfast. There was a calm atmosphere throughout the home.

There are two homes located within the one building; Blair Mayne Residential Care Home and Blair House Care Home. One is a residential home and the other a nursing home. We discussed the location of patients throughout Blair Mayne Residential Home. It was identified that a number of patients from the ground floor in the nursing home were now residing on the first floor of Blair Mayne Residential Home. There were a number of residents from the residential home residing on the ground floor of the nursing home. The residents told us they were comfortable in the home.

An application to vary the registration of the nursing home was submitted to RQIA on 6 September 2019; at the time of the inspection the application was incomplete. The home must wait for any variation to be approved by RQIA before they make any changes. In this instance the home had not received any confirmation and should not have commenced moving patients/residents. This is a breach in regulations and as such a meeting was held in on 12 November 2019 in RQIA with the intention of issuing a failure to comply notice. At this meeting the regional care director representing the responsible individual, and the home manager, acknowledged the deficits. They presented an action plan as to how they could remedy the situation and bring both homes back into compliance. We were assured by the action plan and the agreement to apply for different variations which would ensure compliance. Applications to vary the registration of the home have subsequently been received by RQIA.

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.

Quality Improvement Plan

Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005

Area for improvement 1

Ref: Regulation 13. – (3)

Stated: First time

The registered person shall for the purpose of providing care to residents, and making proper provision for their health and welfare, so far as practicable, ascertain and take into account their wishes and feelings. This is specifically in relation to ensuring that residents' choice regarding rising times is listened and responded to.

Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Area for improvement 2

Ref: Regulation 12.- (1)

(a)

Stated: First time

The registered person shall provide care and any other services to residents in accordance with the statements of purpose, and shall ensure that the care, treatment, if necessary, and other services provided to each resident –

(a) meet his individual need.

The home must ensure that a social care model is developed and implemented in the home.

Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011

Area for improvement 1

Ref: Standard 6.3

Stated: First time

The registered person shall ensure that the resident or their representative, where appropriate, sign the care plan along with the member of staff responsible for drawing it up and the registered manager. If the resident or their representative is unable to sign or chooses not to sign, this is recorded.

Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Area for improvement 2

Ref: Standard 7.4

Stated: First time

The registered person shall ensure that completed written consent forms, where used, are maintained within individual case records. If the resident or their representative is unable to sign or chooses not to sign, this is recorded.

Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Area for improvement 3	The registered person shall ensure that
Ref: Standard 5 Stated: First time	5.1 the resident's representative, where appropriate, and relevant professionals and disciplines are involved in the assessment process;
	 5.2 that assessments contain comprehensive detail; 5.4 that the assessment is signed by the resident or their representative, where appropriate, and the member of staff responsible for carrying it out. If the resident or their representative is unable to sign or chooses not to sign, this is recorded. Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 4 Ref: Standard 6.2 Stated: First time	The registered person shall ensure that, where required, care plans include details of the management of any identified risks and strategies or programmes to manage specified behaviours including the use of medication. This is specifically in relation to the management of distressed reactions.
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 5 Ref: Standard 3.4 Stated: First time	The registered person shall ensure that a referral form providing all necessary information, including any risk assessment relating to the resident and the delivery of their care and services, is completed before the resident is admitted.
Stated. I list time	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 6	The registered person shall ensure that
Ref: Standard 16 Stated: First time	16.4 All suspected, alleged or actual incidents of abuse are reported to the relevant persons and agencies in accordance with procedures and legislation and
	16.7 Written records are kept of suspected, alleged or actual incidents of abuse.
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Area for improvement 7	The registered person shall ensure that:
Ref: Standard 12	12.2 Residents are involved in planning the menus and
Stated: First time	12.9 Meals are served in suitable portion sizes. This is specifically in relation to supper.
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 8	The registered person shall ensure that medicine doses are prepared immediately prior to administration from the container in which they
Ref: Standard 33	were dispensed.
Stated: First time	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.





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