

Inspection Report

15 October 2021



Mertoun Park

Type of Service: Residential Care Home
Address: 17 Orchard Court, Knocknagoney,
Holywood BT18 9QE
Tel no: 028 9504 0588

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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

1.0 Service information

Organisation/Registered Provider: Belfast Health and Social Care Trust (BHSCT)	Acting Manager: Mrs Anne Campbell
Responsible Individual Dr Catherine Jack - Registration Pending	
Person in charge at the time of inspection: Briege Duffy- Senior Residential Worker	Number of registered places: 8
Categories of care: Residential Care (RC) LD - Learning Disability LD (E) – Learning disability – over 65 years	Number of residents accommodated in the residential care home on the day of this inspection: 3
Brief description of the accommodation/how the service operates: This home is a registered Residential Care Home which provides health and social care for up to 8 residents. The home is divided over two floors. Residents have access to a shared communal area and an enclosed garden.	

2.0 Inspection summary

An unannounced inspection took place on 15 October 2021 from 10.30am to 3.00pm by a care inspector.

RQIA received information from the Department of Health (DoH) regarding admissions to Mertoun Park.

RQIA had serious concerns over the risks posed to the existing residents due to recent admissions and that the staffing arrangements did not support the health safety and well-being of the residents. In addition it was clear from the information shared by the DoH that the home was operating outside of its Statement of Purpose and its' registered categories of care.

RQIA made the decision to hold a serious concerns meeting with the Provider, Belfast Health and Social Care trust (BHSCT) on 14 October 2021. Following this meeting RQIA were not assured that the home was safely staffed and decided to undertake an unannounced inspection of the home to determine staffing arrangements and the health, safety and well-being of residents.

Following this inspection RQIA met again with the Provider to seek assurances regarding the day to day operations of the home in particular staffing arrangements and the management of risk to residents. Following a series of meetings with the Provider, RQIA were not assured that the home was operating within its Statement of Purpose and that residents were at risk of further harm due to the lack of safe and robust staffing arrangements.

RQIA's senior management held a meeting on 18 October 2021 and decided to implement RQIA's Urgent Procedures. This resulted in an Order being issued by a Lay Magistrate to Belfast Health and Social Care Trust to impose conditions on the registration of Mertoun Park. These conditions were imposed on 19 October 2021.

Details of RQIA's enforcement procedures can be found on our web site:

[https://www.rgia.org.uk/who-we-are/corporate-documents-\(1\)/rgia-policies-and-procedures/](https://www.rgia.org.uk/who-we-are/corporate-documents-(1)/rgia-policies-and-procedures/)

3.0 How we inspect

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

Throughout the inspection RQIA will seek to speak with residents, their relatives or visitors and staff for their opinion on the quality of the care and their experience of living, visiting or working in this home.

The daily life within the home was observed and how staff went about their work.

A range of documents were examined to determine that effective systems were in place to manage the home.

4.0 What people told us about the service

Staff spoken with commented on their concerns about staffing levels, the safety of the residents and their own safety while at work.

Staff said that there was a "lack of staff on duty to manage the risks" and also described how residents were impacted by the named risks and staffing arrangements.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Due to the focus of this inspection the previous areas for improvement were not reviewed and have been carried forward to the next inspection.

Areas for improvement from the last inspection on 14 September 2020		
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 30 Stated: First time	The registered person shall ensure that all notifiable events are reported to RQIA in a timely manner. Ref: 6.2.3	Carried forward to the next inspection
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011)		Validation of compliance
Area for improvement 1 Ref: Standard 20.10 Stated: First time	The registered person shall ensure that working practices are systemically audited to ensure they are consistent with the home's documented policies and procedures and action is taken when necessary. Ref: 6.2.3	Carried forward to the next inspection
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Area for improvement 2 Ref: Standard 20.11 Stated: First time	The registered person shall monitor the quality of services in accordance with the home's written procedures and completes a monitoring report on a monthly basis. Ref: 6.2.3	Carried forward to the next inspection

	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Area for improvement 3 Ref: Standard 6.3 Stated: First time	The registered person shall ensure that the residents or their representatives, where appropriate, sign the care plan along with the member of staff responsible for drawing it up and the registered manager. Ref: 6.2.3	Carried forward to the next inspection
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	

5.2.1 Staffing Arrangements

Staff told us that the staffing levels were “unsafe” following a recent admission to the home. Staff told us that staffing levels had been reviewed following the admission and staffing had been increased by one additional staff member on night duty. However, staff also told us that the planned staffing levels were not always met.

A review of the duty rotas confirmed the shortfall in planned staffing. The planned staffing levels for the home from the 30 September 2021 were:

Day duty: One residential worker who is the person in charge of the home and two care assistants.

Night duty: One residential worker who is the person in charge (sleep over) and two care assistant.

However, the duty rotas evidenced that the planned staffing levels were not always adhered to. For example, if the second care assistant did not come on night duty one staff member was ‘awake’ overnight and one staff member was a ‘sleep over’ arrangement. This left one staff member to manage and attend to the needs of the residents which was not safe given the requirements of the residents’ care plans and risk assessments. RQIA were very concerned about the staffing arrangements, and the impact on the health safety and well being of residents.

RQIA gave specific advice as to the minimum number of staff required to manage the health safety and well-being of residents accommodated in Mertoun Park. The Acting Manager confirmed during feedback that these levels would be maintained from the day of inspection onwards.

Staff did not feel they had adequate training in managing specific behaviours that challenged. Review of the assessment and care plans for one named person evidenced that staff had to be trained in specialist areas to manage this person. RQIA were also concerned that the care plan and records did not identify care needs usually associated with someone requiring residential care.

5.2.2 Care Records

Examination of the care records evidenced that the home was working outside of and its Statement of Purpose and registered categories of care.

Care records also evidenced that the staffing arrangements did not safely meet the health safety and well fare needs of residents.

5.2.3 Fire safety

Staff said that the resident on the first floor made use of the external fire escape to access the home's enclosed garden. The arrangements made with the resident were that staff were to be alerted when the resident wished to leave the first floor. However, staff said they often found a resident already in the garden. The Acting Manager said she was not aware of this happening. Observation of the first floor fire exit door confirmed it was open. RQIA advised that this practice must cease immediately.

5.2.4 Quality of Life for Residents

Staff spoke of how they felt the recent admissions to Mertoun Park had impacted on the quality of life for other residents. Due to the staffing arrangements, staff could no longer take residents out for walks and residents were suffering harm because of this.

Observations confirmed that two of the residents, on the ground floor, were impacted by the change in their circumstances brought about by the admissions to the home. For example, one of the residents had been moved to the ground floor to accommodate the admission to the home and they wished to return to their room but could not.

5.2.5 Management and Governance Arrangements

Mrs Anne Campbell has been the acting manager of the home since 4 October 2021.

Review of the recent admission assessment and care plan raised concerns that the home was in breach of its registration with RQIA and its Statement of Purpose. Observation of the environment and in speaking to staff highlighted the restrictions on liberty being put on residents due to the recent admission.

RQIA were concerned that the admission to Mertoun Park were inappropriate, adversely affected the residents placing them at harm.

7.0 Quality Improvement Plan/Areas for Improvement

Areas for improvement have been identified where action is required to ensure compliance with **The Residential Care Homes Regulations (Northern Ireland) 2005 and/or the Residential Care Homes' Minimum Standards (August 2011)**

	Regulations	Standards
Total number of Areas for Improvement	1*	2*

* The total number of areas for improvement includes three which are carried forward for review at the next inspection.

Quality Improvement Plan	
Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 30 Stated: First time To be completed by: Immediately from the inspection date forward.	The registered person shall ensure that all notifiable events are reported to RQIA in a timely manner.
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.
Action required to ensure compliance with the Residential Care Homes Minimum Standards (August 2011)	
Area for improvement 1 Ref: Standard 20.10 Stated: First time To be completed by: 31 October 2020	The registered person shall ensure that working practices are systemically audited to ensure they are consistent with the home's documented policies and procedures and action is taken when necessary.
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Area for improvement 2 Ref: Standard 20.11 Stated: First time To be completed by: 31 October 2020	The registered person shall monitor the quality of services in accordance with the home's written procedures and completes a monitoring report on a monthly basis.
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.
Area for improvement 3 Ref: Standard 6.3 Stated: First time To be completed by: 31 October 2020	The registered person shall ensure that the residents or their representatives, where appropriate, sign the care plan along with the member of staff responsible for drawing it up and the registered manager.
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.

Please ensure this document is completed in full and returned via Web Portal



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