



The Regulation and
Quality Improvement
Authority

Announced Care Inspection

Name of Service and ID: Northfield House 1010
Date of Inspection: 16 February 2015
Inspector's Name: Linda Thompson
Inspection ID: IN021188

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY
9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1.0 General information

Name of Service:	Northfield House
Address:	3 Church Lane Northfield Road Donaghadee BT21 0AJ
Telephone number:	028 91882509
E mail address:	angela.cartwright@setrust.hscni.net
Registered Organisation/ Registered Provider:	South Eastern HSC Trust Mr Hugh Henry McCaughey
Registered Manager:	Miss Angela Cartwright
Person in charge of the home at the time of inspection:	Miss Angela Cartwright
Categories of care:	RC-A, RC-I, RC-MP, RC-MP(E), RC-PH, RC- PH(E), RC-SI, RC-TI
Number of registered places:	41
Number of residents accommodated on Day of Inspection:	18
Scale of charges (per week):	Trust Rates
Date and type of previous inspection:	22 January 2015 Unannounced inspection
Date and time of inspection:	16 February 2015 14.00 – 17.00 hours
Name of Inspector:	Linda Thompson

2.0 Introduction

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect residential care homes. A minimum of two inspections per year are required.

This is a report of an announced care inspection to assess the quality of services being provided. The report details the extent to which the standards measured during inspection were met.

3.0 Purpose of the inspection

The purpose of this announced inspection was to ensure that the service is compliant with relevant regulations and minimum standards and other good practice indicators and to consider whether the service provided to service users was in accordance with their assessed needs and preferences. This was achieved through a process of analysis and evaluation of available evidence.

RQIA not only seeks to ensure that compliance with regulations and standards is met but also aims to use inspection to support providers in improving the quality of services. For this reason, inspection involves in-depth examination of an identified number of aspects of service provision.

The aims of the inspection were to examine the policies, procedures, practices and monitoring arrangements for the provision of residential care homes, and to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Residential Care Homes Regulations (Northern Ireland) 2005
- The Department of Health, Social Services and Public Safety's (DHSSPS) Residential Care Homes Minimum Standards (2011)

Other published standards which guide best practice may also be referenced during the inspection process.

4.0 Methods/Process

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

- Discussion with the representatives of the registered provider
- Discussion with the registered manager
- Examination of records
- Observation of care delivery and care practice
- Discussion with staff
- Consultation with residents individually and with others in groups
- Inspection of the premises
- Evaluation of findings and feedback

5.0 Inspection focus

RQIA were informed by a representative of the South Eastern Health and Social Care Trust on 03 February 2015 that a number of learning disability clients had transferred from their usual establishment to the first floor of Northfield House. This transfer was planned to be temporary and was expected to conclude by 30th April 2015. There had been no communication between the management of Northfield House and RQIA, neither to plan this change of use for the home nor to consider the suitability of the premises and management of risks to both the learning disability clients or the current residents of Northfield House.

These unauthorised admissions caused the home to operate outside their registered categories of care and placed Northfield House in breach of;

- The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005
- The Residential Care Homes Regulations (Northern Ireland) 2005

The inspection therefore sought to assess the suitability of the premises to accommodate the learning disability clients and the impact of these admissions on the long term residents living in Northfield House.

This inspection did not review progress made with the previous recommendation raised during inspection in January 2015. Validation of compliance will be considered during the next inspection.

6.0 Profile of service

Northfield House Residential Care home is situated in the small town of Donaghadee in County Down.

The residential home is owned and operated by the South Eastern Health and Social Care Trust. The current registered manager is Ms A Cartwright.

The home has not admitted any permanent resident for many months and although a 2 storey building the upper floor is not generally used.

Accommodation for residents is provided single rooms on the ground floor.

Communal lounge and dining areas are provided on the ground floor as are the catering and laundry services.

A number of communal sanitary facilities are available throughout the home.

The home is registered to provide care for a maximum of 41 persons under the following categories of care:

Residential care

I	Old age not falling into any other category
DE	Dementia
MP	Mental disorder excluding learning disability or dementia
MP (E)	Mental disorder excluding learning disability or dementia – over 65 years
PH	Physical disability other than sensory impairment
PH (E)	Physical disability other than sensory impairment - over 65 years
TI	Terminally ill
SI	Sensory impairment

7.0 Summary of inspection

This announced care inspection of Northfield House was undertaken by Linda Thompson, acting senior inspector, on 16 February 2015 between the hours of 2.00pm - 5.00pm. The inspection was also supported by Patricia Galbraith, care inspector and Colin Muldoon estates inspector. The findings of the estates inspection will be reported upon separately.

Angela Cartright Registered Manager of Northfield House was available throughout the inspection and was supported by Veronica Clelland, Care Provision Manager for Older Peoples Programme, Greer Wilson Locality Manager for Learning Disability and Heather Cruise Registered Manager for the learning disability clients in their previous registered premises. All were available during the inspection and for verbal feedback at the conclusion of the inspection.

The recommendation made as a result of the previous inspection was not examined at this time.

The focus of this announced inspection was to ensure that Northfield House returned swiftly to compliance with the identified Regulations and that the use of the first floor of the home

for the temporary occupancy by a number of learning disability clients was appropriate with all risks minimised.

During the inspection the inspectors met with the learning disability residents and staff, discussed the day to day arrangements in relation to the conduct of the home and the standard of care provided to the learning disability residents, observed care practice, examined a selection of records and carried out a general inspection of the first floor of the residential care home environment.

In discussion with learning disability residents they indicated that that they were happy and content to be temporarily in Northfield House and felt that this was an unexpected holiday.

The first floor of the home raised a number of concerns in respect of the general environment, the management of fire risk, the use of keypad closures and the general management of infection prevention and control. The estates inspection report will detail the findings of a number of these issues in greater detail.

Eight requirements were made as a result of the announced inspection; one recommendation was carried forward for validation at the next inspection visit. Details can be found in the main body of the report and the attached Quality Improvement Plan (QIP).

As a consequence of the findings of this inspection and the breaches identified in respect of regulations, a serious concerns meeting was held in RQIA Belfast office on 20 February 2015. This meeting was attended by Angela Cartwright Registered Manager, Ms Sarah Browne Assistant Director of Older Persons Programme, Carol Veitch Acting Assistant Director of Adult Disability Services and Veronica Clelland Care Provision Manager. At this meeting assurances were provided by the South Eastern health and Social Care Trust that all requirements raised in respect of both care and estates issues would be actioned within the required time frames. An application for variation of the registered categories of care was received by RQIA and will be processed.

Validation of compliance will be examined at the next inspection visit.

The inspector would like to thank the residents, registered manager, registered provider and staff for their assistance and co-operation throughout the inspection process.

8.0 Follow-up on the requirements and recommendations issued as a result of the previous inspection on 22 January 2015

NO.	MINIMUM STANDARD REF.	RECOMMENDATIONS	ACTION TAKEN - AS CONFIRMED DURING THIS INSPECTION	INSPECTOR'S VALIDATION OF COMPLIANCE
1	Standard 10.1	The registered person is recommended to update the policy/procedure for the management of violence and aggression and the use of restraint to detail that RQIA must be notified on each occasion restraint is used.	This issue is carried forward for validation at the next inspection.	N/A

9.0 Inspection Findings

9.1 Breach of Regulation 12(2) of the Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005.

The regulations stipulate that the home is required to be registered for each category of care of resident to whom they will deliver services. This registration process should be undertaken in advance of the resident becoming resident in the home to ensure that all risks to the health and well-being of each individual is considered and minimised.

On 3 February 2015 RQIA were informed by a manager in the South Eastern Health and Social Care Trust that five learning disability clients from a local supported living programme had moved into the first floor of Northfield House on a temporary basis. It was anticipated that this move would last until 30 April 2015.

It is not acceptable that such a move had taken place prior to consultation with RQIA. An application to vary the registered categories of care should have been submitted in a timely manner which would have allowed for a planned inspection visit prior to the admission of the clients.

Following telephone contact by the inspector an application to vary the categories of care was commenced. This application was reviewed during the inspection visit and it was confirmed that this must be submitted with urgency.

A requirement is raised.

9.2 Statement of purpose

As a consequence of the change in categories of care supported by the home the statement of purpose for Northfield House must be updated and submitted to RQIA.

A requirement is raised.

9.3 Residents guide

As a consequence of the change in categories of care supported by the home the resident's guide for Northfield House must be updated and submitted to RQIA.

A requirement is raised.

9.4 Risk assessments for residents

The inspector required that risk assessments for each learning disability resident transferred into Northfield House is completed and retained in the home. The risk assessments should consider the change of accommodation / environment and the other residents living in Northfield House.

A requirement is raised.

9.5 Staffing on night duty

The inspector discussed the staffing availability in respect of night duty. The inspector was informed that the usual staffing would be two staff on 'sleep in' duties. Given the move to a much larger building it was agreed that staffing would be changed to have one staff member on sleep in duty and one on waking cover.

A requirement is raised.

9.6 Food preparation on the first floor.

During the inspection visit it was noted that a number of meals for learning disability clients were being prepared in a makeshift kitchen on the first floor. The storage of food and meal preparation on the first floor heightens the risk of non-compliance with Food Hygiene standards and therefore is an unnecessary risk to the health and well-being of the clients and staff. This was discussed at length with the registered manager for Northfield House and it was agreed that all meals in future would be prepared and served to learning disability clients in the main dining room on the ground floor. It is acknowledged however that snacks such as yoghurts etc. could be stored downstairs in the main kitchen area but can be consumed upstairs as required.

A requirement is raised

9.7 Laundry

During inspection the inspector noted the storage of an iron and ironing board in a storage room. The inspector was advised that whilst clothing was washed and dried in the main laundry area that ironing would be undertaken in the communal living and storage of the iron would be in the storage room. The inspector raised concerns regarding the management of a hot iron being inappropriately stored. This matter was discussed at length with the registered manager and agreement was reached that all ironing required would be undertaken in the main laundry area of Northfield House.

A requirement is raised.

9.8 Infection prevention and Control

A review of one identified bathroom on the first floor evidenced a number of concerns in respect of infection prevention and control. The following issues were discussed with Ms Heather Cruise manager for the learning disability clients;

- Communal toiletries were evidenced in the bathroom
- Toilet cleaning chemicals were not secured in keeping with Control of Substances Hazardous to Health (COSHH) guidelines
- Paper products were left sitting out on top of the toilet cistern
- The bath hoist was corroded beyond use and should be removed / repaired or replaced
- All unnecessary items in the bathroom should be removed.

A requirement is raised.

9.9 Fire safety

A number of urgent fire issues were identified by the estates inspector. These are reported upon in detail in the estates inspection however the issues raised are identified below;

- The fire risk assessment requires urgent updating to reflect the change of use of the building
- The number of staff on night duty should be reviewed to ensure that sufficient are awake to meet the needs of the client group.
- Personal emergency evacuation plans (PEEPs) for the residents on the first floor should be updated
- All staff must receive fire safety information , instruction and training specific to the premises and which is in line with NI HTM84
- All staff must participate in a fire drill. The drills should use the information in the personal emergency evacuation plans (PEEPs) and verify the effectiveness of the emergency procedure when the minimum number of staff are on duty.
- The doors in the bedroom corridors of Northfield House are not fitted with automatic closing devices as expected by the Northern Ireland Fire and Rescue Service. It is therefore important that fire doors are kept closed and the advice of the fire safety advisor sought.
- The information and evidence on site indicates that it may have been some time since the portable electrical appliances introduced by the new residents were tested and inspected. A competent person should verify that the portable electrical appliances are safe.

Requirements are raised in the estates inspection report.

Quality Improvement Plan

The details of the Quality Improvement Plan appended to this report were discussed with Ms Angela Cartwright, registered manager, as part of the inspection process.

The timescales for completion commence from the date of inspection.

The registered provider/manager is required to record comments on the Quality Improvement Plan.

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.

Enquiries relating to this report should be addressed to:

Linda Thompson
The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT



Quality Improvement Plan

Announced Care Inspection

Northfield House

16 February 2015

The areas where the service needs to improve, as identified during this inspection visit, are detailed in the inspection report and Quality Improvement Plan.

The specific actions set out in the Quality Improvement Plan were discussed with Angela Cartwright registered manager either during or after the inspection visit.

Any matters that require completion within 28 days of the inspection visit have also been set out in separate correspondence to the registered persons.

Registered providers / managers should note that failure to comply with regulations may lead to further enforcement and/ or prosecution action as set out in The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

It is the responsibility of the registered provider / manager to ensure that all requirements and recommendations contained within the Quality Improvement Plan 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.

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 Residential Care Homes Regulations (NI) 2005

No.	Regulation Reference	Requirements	Number Of Times Stated	Details Of Action Taken By Registered Person(S)	Timescale
1	12(2) Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005	The registered person must submit a variation application to RQIA applying for a change to the registered categories of care. Ref section 9.1	One	Variation was submitted on 19 february 2015	By Friday 20 February 2015
2	3	The registered person must update and submit a copy of the statement of purpose for Northfield House. Ref section 9.2	One	The statement of purpose was updated and submitted with the variation	By Friday 20 February 2015
3	4	The registered person must update and submit a copy of the resident's guide for Northfield House. Ref section 9.3	One	The Residents Guide has been updated to reflect temporary change and a hard copy was given to RQIA 20/02/15	By Friday 20 February 2015

4	14 (2)(c)	<p>The registered manager must ensure that the admission of learning disability clients to Northfield House does not pose a risk to either the learning disability clients or the current residents of the home.</p> <p>Risk assessments for each individual learning disability client should be maintained in Northfield House.</p> <p>Ref section 9.4</p>	One	<p>The registered manager of Northfield House has received suitable and sufficient information and risk assessments regarding the 5 clients from Ward House. In addition, these clients are under supervision at all times when they are in a shared area of Northfield House. The first floor of Northfield House where the 5 clients reside is protected with a key code for access and egress, therefore a client can not leave the first floor at anytime unsupervised.</p>	By Friday 20 February 2015
5	20(1)(a)	<p>The registered manager must ensure that appropriate staffing levels are maintained during night duty to minimise the risks to residents and meet all required care needs.</p> <p>Ref section 9.5</p>	One	<p>Appropriate staffing levels are in place. The first floor maintains 5 Ward House clients and at any one time there are 2 staff on duty and at night there is one staff awake and one on call.</p>	By Friday 20 February 2015
6	18(2)(h)	<p>The registered manager must ensure that meals are not prepared on the first floor of the home in the makeshift kitchen area.</p> <p>Snack foods prepared and stored in the main kitchen of the home may however be consumed on the first floor.</p> <p>Ref section 9.6</p>	One	<p>All chilled products are properly maintained in the ground floor main kitchen. All meals are prepared and served from the main kitchen on the ground floor.</p>	By Friday 20 February 2015

7	18(2)(e)	<p>The registered manager must ensure that laundry of residents clothing including ironing is undertaken in the laundry room of the home.</p> <p>Ref section 9.7</p>	One	All laundry/ironing requirements have been transferred to the ground floor laundry room as from 18.02.15	By Friday 20 February 2015
8	13(7)	<p>The registered manager must ensure that the first floor bathroom discussed in the report is maintained in an appropriate hygienic state and that all issues raised during inspection are addressed.</p> <p>Ref section 9.8</p>	One	The bath hoist was removed on the 25.02.15	By Friday 20 February 2015

Recommendations

These recommendations are based on The Residential Care Homes Minimum Standards (2011), research or recognised sources. They promote current good practice and if adopted by the Registered Person may enhance service, quality and delivery.

No.	Minimum Standard Reference	Recommendations	Number Of Times Stated	Details Of Action Taken By Registered Person(S)	Timescale
C/F	Standard 10.1	The registered person is recommended to update the policy/procedure for the management of violence and aggression and the use of restraint to detail that RQIA must be notified on each occasion restraint is used.	One	It is confirmed that the Trust policy for the Management of Violence and Aggression and the use of Restraint has been reviewed to include notification to the RQIA (section 3.3.3) NB - This amended policy was forwarded to the RQIA January 2015.	From 22 January 2015 and ongoing

Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person and email to care.team@rqia.org.uk

NAME OF REGISTERED MANAGER COMPLETING QIP	Angela Cartwright
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Hugh McCaughey

QIP Position Based on Comments from Registered Persons	Yes	Inspector	Date
Response assessed by inspector as acceptable	Yes	Linda Thompson	20/3/15
Further information requested from provider			