

Announced Compliance Inspection

Name of Establishment:	Castlevew
Establishment ID No:	1069
Date of Inspection:	30 July 2014
Inspector's Name:	Linda Thompson
Inspection ID:	20346

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 Home:	Castleview
Address:	761 Antrim Road Belfast BT15 4EN
Telephone Number:	028 9077 7804
E mail Address:	nursemanager@castleview-pnh.co.uk
Registered Organisation/ Registered Provider:	Tona Enterprises Ltd Mr Robert Maxwell Duncan
Registered Manager:	Mrs Jacqueline Felicitas
Person in Charge of the Home at the Time of Inspection:	Mrs Jacqueline Felicitas
Categories of Care:	NH-I, NH-PH, NH-PH(E), NH-TI, NH-MP(E)
Number of Registered Places:	35 effectively operating as 34
Number of Patients Accommodated on Day of Inspection:	32
Scale of Charges (per week):	£567
Date and Type of Previous Inspection:	2 May 2014 Unannounced secondary inspection
Date and Time of Inspection:	30 July 2014 12.15 – 15.30 hours
Name of Inspector:	Linda Thompson

1.0 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 nursing homes. A minimum of two inspections per year are required.

This is a report of an inspection to assess the level of compliance achieved by the registered persons in respect of the Failure to Comply with Regulations notice issued on 18 June 2014. The notice was issued in respect of non-compliance with regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005.

1.1 Purpose of the Inspection

The purpose of this inspection was to consider whether the service provided was in compliance with legislative requirements, minimum standards and other good practice indicators. This was achieved through a process of analysis and evaluation of available evidence.

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

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Nursing Homes Regulations (Northern Ireland) 2005
- The Department of Health, Social Services and Public Safety's (DHSSPS) Nursing Homes Minimum Standards (2008)
- Other published standards which guide best practice may also be referenced during the Inspection process

1.2 Methods/Process

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

- Discussion with Registered Provider
- Discussion with the Registered Manager
- Discussion with staff
- Review of a sample of policies and procedures
- Review of a sample of staff training records
- Review of a sample of staff duty rotas
- Review of the accidents and incidents records
- Evaluation and feedback

1.3 Inspection Focus

A Notice of Failure to Comply with Regulations was issued to Castlevue Nursing Home on 18 June 2014. The notice was in respect of non-compliance with Regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005.

The areas of required improvement are detailed below:

- The registered persons must ensure that all registered nursing staff and care staff in the nursing home receive training in the identification of what must be notified to RQIA in respect of Regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005.
- The registered persons must ensure that notifiable events such as death, illness and other events are reported to RQIA without delay.
- The registered persons must establish a process of audit to quality assure the reporting of notifiable events, validating that all notifiable events occurring are reported appropriately.
- The registered persons must ensure that any episode of patient behaviours which challenge staff and have impact upon other patients are reported appropriately to RQIA without delay of occurrence.
- The registered persons must ensure that any episode of patient behaviours' which challenge staff and may have led to self-harm are reported appropriately to RQIA without delay of occurrence.

2.0 Profile of Service

Castleview nursing home is situated on the Antrim Road, North Belfast. There is direct access to the City Centre, with good parking facilities within the grounds of the home and public transport facilities close by.

The nursing home is owned and operated by Tona Enterprises Ltd and the responsible person is Mr Robert Maxwell Duncan.

The current registered manager is Mrs Jacqueline Felicitas.

Accommodation for patients/ residents is provided on three floors of the home. Access to the first floor is via a passenger lift and stairs and to the third floor using stairs only.

Two communal lounges and a dining area are provided on the ground floor.

The home also provides for catering and laundry services on the ground floor.

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

The home is registered to provide care for a maximum of 35 persons under the following categories of care:

NH-I, NH-PH, NH-PH(E), NH-TI, NH-MP(E)

Nursing care

I	old age not falling into any other category to a maximum of 31 patients
PH	physical disability other than sensory impairment under 65
PH (E)	physical disability other than sensory impairment over 65 years
MP (E)	mental disorder excluding learning disability or dementia over 65 years
TI	terminally ill

The home's certificate of registration is displayed in the entrance area of the home.

3.0 Follow up on any issues/concerns raised with RQIA since the previous inspection such as complaints or safeguarding investigations.

It is not in the remit of RQIA to investigate complaints made by or on the 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.

RQIA have been informed by the adult safeguarding team from Belfast HSC Trust of an on-going investigation in relation to potential or alleged abuse issues in the home in recent months. A multi-agency safeguarding strategy meeting was held in the home on the morning of 2 May 2014. As a consequence of the concerns raised during the safeguarding meeting the inspector undertook an unannounced secondary inspection to seek assurances that the health and well-being of the patients was appropriately managed and that all notifiable events were being reported to the Authority as required.

A serious concerns meeting was held in RQIA with the registered provider and the registered manager on 8 May 2014 to discuss the findings of inspection and to consider the actions to be taken by the home. Agreement was reached that the registered persons would take all appropriate actions as stipulated in the quality improvement plan.

On 5 June 2014 the inspector was contacted by a representative of the Belfast HSC Trust to advise that a potential safeguarding event had been identified by a relative of a patient in Castlevue. The Trust representative informed the inspector that neither the patient's representative nor the care manager had been informed of the event at the time of its occurrence.

The inspector contacted the registered manager on 5 June 2014 and discussed the allegation. The registered manager confirmed that the identified patient had sustained an injury first identified on 20 May 2014 and further confirmed that this had not been reported to the Belfast HSC Trust or RQIA as required.

Further contact was made to RQIA on 11 June 2014 by another representative of the Belfast HSC Trust who had visited Castlevue on 27 May 2014 and had discussed the patient's injury with the registered manager advising her to record and report the injury to the appropriate persons.

Despite having raised the identification and management of safeguarding events on 2 May 2014 during the Belfast HSC Trust strategy meeting at which Castlevue were represented, at the subsequent unannounced inspection, as part of the serious concerns meeting on 8 May 2014 and having been prompted by the Belfast HSC Trust representative on 27 May 2014 to record and report the patient's injury compliance with the required regulation was not achieved.

The registered persons having failed to identify that the patient's head injury was a notifiable event and a potential safeguarding event; are evidenced to have failed to comply with Regulation 30(1) (d) of the Nursing Homes Regulations.

This failing led to enhanced enforcement action and a Notice of Failure to Comply with Regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005 was issued to Castlevue.

4.0 Summary

This summary provides an overview of the findings of an announced compliance inspection to Castlevue nursing home. The inspection was undertaken by Linda Thompson on 30 July 2014 from 12.15 – 15.30 hours.

The inspector was welcomed to the home by Mr Robert Duncan responsible person and Mrs Jacqueline Felicitas registered manager.

Verbal feedback of the findings of inspection were provided to the registered manager at the conclusion of the inspection and also the following day by telephone to the responsible person.

The inspector examined a selection of records to determine the level of compliance achieved against the requirements illustrated in the failure to comply with regulations notice.

Whilst there was evidence of full compliance with the requirements of the Failure to Comply with Regulations Notice, the inspector identified some additional areas for improvement in record keeping and the management of emergency admissions in the absence of the registered manager.

Requirements are raised to address these matters

The quality improvement plan (QIP) issued following the May inspection was late being returned to RQIA from Castlevue and therefore compliance with its content was unable to be fully validated during inspection. Three requirements and one recommendation will be validated at the next inspection.

The QIP was received back in the Authority on 7 August 2014 and the inspector contacted the registered manager by telephone seeking clarity of the action being taken in respect of the ratio of registered nurses to care staff available in the absence of the registered manager. This matter had been raised for two previous times. A further discussion was undertaken by the inspector and the registered person post inspection and confirmation was given that the staffing levels would be increased to provide the required ratio of registered nurses to care staff.

Details of inspection findings can be viewed in the section immediately following this summary.

Conclusion

The inspector can confirm that at the time of this inspection the home were evidenced to be fully compliant with the requirements of the Failure to Comply with Regulations notice issued on 18 June 2014.

Significant improvements have been made to the notification process and staff are able to display a greater understanding of what should be reported and how to report.

Therefore, one requirement is raised for the first time and one raised for the second time. Three requirements are carried forward for validation at the next inspection.

These requirements and recommendations are detailed throughout the report and in the quality improvement plan (QIP).

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

5.0 Follow-Up on Previous Issues

No.	Regulation Ref.	Requirements	Action Taken - As Confirmed During This Inspection	Inspector's Validation Of Compliance
1.	20(1)	The registered persons must ensure that at all times suitably qualified, competent and experienced persons are working at the nursing home in such numbers as are appropriate for the health and welfare of patients.	<p>The inspector was unable to validate compliance during inspection as the QIP had not been returned to the Authority at that time of the inspection.</p> <p>However the returned QIP was received by RQIA on 07 August 2014; Following a discussion with the responsible person confirmation is received that the ratio of registered nurses to care staff will be increased as recommended in the Nursing Homes Minimum Standards 2005.</p>	Compliant

2.	20(1)(c)(i)	<p>The registered person must ensure that the training provided for the registered manager and the registered nursing team is sufficiently comprehensive to ensure that the nursing team are knowledgeable in the identification and management of safeguarding issues.</p> <p>The recognition and identification of safeguarding events is of paramount important is ensuring the health and wellbeing of every patient.</p> <p>The registered person must also ensure that the following training is provided and fully embedded into practice.</p> <ul style="list-style-type: none"> • The management of behaviours which challenge staff • The reporting of notifications in accordance with Regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005. • The use of IT systems and the computer in Castlevue in respect of the sending of notifications • The use of the notification form for RQIA 	<p>The inspector can confirm that further training has been provided to the registered nursing staff team. There was evidence on inspection that a greater understanding is now achieved with the registered nurses and they are more aware of what constitutes a safeguarding event and a notifiable event. Skills are also enhanced in use of IT equipment.</p>	Compliant
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		<ul style="list-style-type: none"> The functions of the Northern Ireland Social Care Council (NISCC) and The Independent Safeguarding Authority (ISA) 		
3.	19 (1)(a) Schedule 3 (3)(j)	The registered person must ensure that registered nursing staff are knowledgeable in how to record and report onwards any notifiable incidents occurring in the home.	<p>The inspector can confirm that staff are more knowledgeable in how to record and report onwards any notifiable events.</p> <p>The level of detail contained in the report however should be increased to ensure that the reader of the report can determine that the action taken by the home immediately after the incident, and to prevent further harm is being managed appropriately.</p> <p>This requirement is raised for a second time.</p>	Moving towards compliance
4.	19(2) Schedule 4 (6).	<p>The registered person must ensure that all registered nurses charged with the responsibility of being in charge of the home in the absence of the registered manager; have been assessed and deemed competent and capable of doing so.</p> <p>The records of this assessment must be retained for inspection and updated <u>at least</u> annually.</p>	This requirement is carried forward for validation at the next inspection.	Carried forward

5.	16(1)	<p>The registered manager must ensure that a written nursing care plan is prepared by a nurse in consultation with the patient or patient's representative as to how the patient's needs in respect of his health and welfare are to be met.</p> <p>The requirement and function of the 1:1 supervision must be clearly defined and recorded in care records.</p>	This requirement is carried forward for validation at the next inspection.	Carried forward
6.	30	The registered persons must ensure that incidents as defined in Regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005 are reported appropriately to the authority and reported within the specified time frame.	The inspector can confirm that the reporting of notifiable events are now maintained within the specified time frame.	Compliant

7.	13(1)(b)	<p>The registered person must ensure that the nursing home is conducted so as to make proper provision for the nursing and where appropriate, treatment and supervision of patients:</p> <ul style="list-style-type: none"> • A robust management plan must be developed and made ready for use during any periods when the registered manager has planned or unplanned leave • The management plan must be implemented when the registered manager is on leave from the home. 	This requirement is carried forward for validation at the next inspection.	Carried forward
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No.	Minimum Standard Ref.	Recommendations	Action Taken - As Confirmed During This Inspection	Inspector's Validation Of Compliance
1.	30.2	<p>It is recommended that the registered person and registered manager review staffing levels in respect of the Staffing Guidance 2009 document issued by RQIA which stipulates a ratio for staffing.</p> <p>This ratio must also reflect the 35%; 65% divide for registered nurses and care staff.</p>	Compliance was achieved following a conversation with the responsible person post inspection.	Compliant
2.	16.1	It is recommended that the registered manager ensures that DHSSPS guidance, regional protocols and local procedures issued by Health and Social Care Trusts were available in the home.	This requirement is carried forward for validation at the next inspection.	Carried forward
3.	28.8	It is recommended that the registered manager ensures that training delivered in respect of safeguarding of vulnerable adults is fully embedded into practice. Evidence of the validation of staff knowledge and understanding must be retained for inspection.	The inspector can confirm that this training has been delivered and that evidence is available for inspection to validate that training is embedded into practice.	Compliant

6.0 Inspection Findings

Purpose of inspection

To seek evidence of compliance with the requirements as stated in the Failure to Comply with Regulations Notice issued on 18 June 2014. Specific actions to be taken are detailed below:

- The registered persons must ensure that all registered nursing staff and care staff in the nursing home receive training in the identification of what must be notified to RQIA in respect of Regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005.
- The registered persons must ensure that notifiable events such as death, illness and other events are reported to RQIA without delay.
- The registered persons must establish a process of audit to quality assure the reporting of notifiable events, validating that all notifiable events occurring are reported appropriately.
- The registered persons must ensure that any episode of patient behaviour's which challenge staff and have impact upon other patients are reported appropriately to RQIA without delay of occurrence.
- The registered persons must ensure that any episode of patient behaviour's which challenge staff and may have led to self-harm are reported appropriately to RQIA without delay of occurrence.

6.1 Staff Training

The inspector examined the training records of the registered nursing team to validate that all registered nurses have received training in the following:

1. The identification of what constitutes a reportable event in accordance with Regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005
2. The management of reporting such events to all as required.

The inspector can confirm from evidence available that 100% of the registered nursing team have received update training in the identification of what constitutes a reportable event. The knowledge and understanding of the registered nursing team following training was evidenced to have been tested both orally and in writing. Records of the written tests of understanding were available for inspection.

One such record was evidenced to record 'I now have a greater understanding of what should be reported and how to do this'.

6.2 Reportable events management in the home

The inspector examined the records of incidents submitted to RQIA since 18 June 2014.

On examination of these submissions the inspector can confirm the following:

- All were received by RQIA within the required time frame.
- A number of gaps in the detail provided were identified.

The inspector discussed the level of detail required when reporting:

- The event occurring
- The actions taken immediately following the event
- The actions taken to prevent or minimise the risk of occurrence.

The inspector also discussed at length with the registered manager and the responsible person, the importance of analysing each reportable event to determine all possible reasons for the event occurring, and what actions should be taken to ensure the event is fully and appropriately investigated to minimise risks to the patients.

The registered manager must always consider the possibility of unexplained bruising or other injury being caused as a consequence of poor moving and handling techniques or physical abuse therefore as potential safeguarding events. In accordance with the regional policy on safeguarding of vulnerable adults all such matters should be referred to both the safeguarding team of the local HSC Trust and to RQIA.

The inspector can confirm that compliance is now achieved with Regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005.

6.3 Managers Audit of reportable events

The inspector examined the records of monthly audit of reportable events maintained in the home.

The inspector was able to validate that regular audits are maintained as required. Whilst the audit is maintained as required the depth and level of scrutiny of the audit should be increased to evidence that all risks have been considered and appropriate actions taken.

From evidence in 6.1, 6.2 and 6.3 the inspector can confirm that the home is evidenced to be compliant with Regulation 30 of the Nursing Homes Regulations (Northern Ireland) 2005.

7.0 Additional areas examined

7.1 Management of emergency admissions in the absence of the registered manager

The inspector raised concerns regarding the management of one specific admission identified from a reportable events record submitted to RQIA.

Patient 'A' (identity known to the registered manager)

Over a weekend period when the registered manager was on planned days off, the home were contacted by a local hospital with regards to accepting an emergency admission. The registered nurse in charge accepted the admission and based on the information provided by the staff in the emergency department. A full pre admission assessment was not undertaken and no one from Castlevue was able to visit the patient and confirm the suitability of the placement.

From records of events occurring within a few hours of admission it was evident that the underlying condition of the patient was causing significant management problems for the home and the patient's safety was significantly at risk. Appropriate action at this time was taken by the home and medical advice was sought. The patient was later transferred back to hospital for further review and alternate placement.

The inspector discussed the admission with the registered manager at length and it was agreed that full consideration had not been given by the admitting registered nurse to:

- The patient's underlying condition
- The heightened level of confusion to be anticipated due to the current acute infective state of the patient
- The heightened level of confusion to be anticipated due to the current bony injury
- The heightened level of confusion to be anticipated due to the change in the patients living environment and staff delivering care
- The registration status of the home.

Whilst the registered nurse in charge did take appropriate action to minimise risks to the patient, the overall risks should have been avoided with a professional assessment of need being undertaken and the registered nurse in charge displaying a greater understanding of the underlying conditions of the patient.

The registered manager is required to review and update the homes policy on admissions; to clarify what professional assessments must be undertaken prior to a patient being admitted to the home. The policy must also indicate what actions should be taken in the absence of the registered manager.

A copy of the updated policy should be forwarded to the inspector with the return of the QIP.

7.2 Staffing

Post inspection the inspector received the return of the QIP from the inspection of 2 May 2014.

Whilst a number of requirements and recommendations were able to be evidenced as compliant the inspector raised concerns regarding the ongoing staffing ratio of registered nurses to care staff over periods when the registered manager is on planned days off.

The inspector discussed the staffing levels with the responsible person post inspection. The responsible person confirms that the ratio of registered nurses to care staff will be maintained in keeping with the recommendations of the Nursing Homes Minimum Standards 2008.

Quality Improvement Plan

The details of the Quality Improvement Plan appended to this report were discussed with; Mrs Jacqueline Felicitas 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 Compliance Inspection

Castleview

30 July 2014

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 the registered nurse in charge of the home and the registered person 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 Nursing Homes Regulations (NI) 2005

No.	Regulation Reference	Requirements	Number of Times Stated	Details Of Action Taken By Registered Person(S)	Timescale
C/F	19(2) Schedule 4 (6).	<p>The registered person must ensure that all registered nurses charged with the responsibility of being in charge of the home in the absence of the registered manager; have been assessed and deemed competent and capable of doing so.</p> <p>The records of this assessment must be retained for inspection and updated <u>at least</u> annually.</p> <p>Carried forward for validation at the next inspection.</p>	One	Competency assessment for nurses updated and completed. This includes assessment of nurses to be in charge of the home in the absence of Nurse manager. Deputy manager to start sept.	From May 2014 and on going
C/F	16(1)	<p>The registered manager must ensure that a written nursing care plan is prepared by a nurse in consultation with the patient or patient's representative as to how the patient's needs in respect of his health and welfare are to be met.</p> <p>The requirement and function of the 1:1 supervision must be clearly defined and recorded in care records.</p> <p>Carried forward for validation at the next inspection.</p>	One	Care Plan for this resident was already in place 21-01-13 this can be found in the resident's old file under safe environment not in the epicare. Primary nurse updated and transferred to epicare system.	From May 2014 and on going

C/F	13(1)(b)	<p>The registered person must ensure that the nursing home is conducted so as to make proper provision for the nursing and where appropriate, treatment and supervision of patients:</p> <ul style="list-style-type: none"> • A robust management plan must be developed and made ready for use during any periods when the registered manager has planned or unplanned leave • The management plan must be implemented when the registered manager is on leave from the home. <p>Carried forward for validation at the next inspection.</p>	One	The Policy" management of the home in the absence of the registered manager has been reviewed statting clearly the roles and responsibilities of the nurse in charge to ensure there is a clear and robust management procedure to be followed in the absence of the registered manager and this will be implemented when the registered manager is on leave.	By end June 2014
1.	19 (1)(a) Schedule 3 (3)(j)	<p>The registered person must ensure that registered nursing staff are knowledgeable in how to record and report onwards any notifiable incidents occurring in the home.</p> <p>Ref section 5.0, 6.2</p>	Two	Policy on notification of incidents updated. this was discussed during nurse meeting and supervision.	From the date of inspection and on going

2.	3(1)(c) Schedule 1	<p>The registered manager must review and update the homes policy on emergency admissions to ensure that it minimises the risk of inappropriate admissions and thus risks to patient's health and well-being.</p> <p>A copy of the revised policy should be forwarded to the inspector with the return of the QIP.</p> <p>Ref section 7.1</p>	One	Policy on emergency admission updated. nurse meeting schedule on the 5-09-14 to discuss further how to minimise risk of inappropriate admissions.	By return of QIP
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Recommendations

These recommendations are based on the Nursing Homes Minimum Standards (2008), 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	16.1	<p>It is recommended that the registered manager ensures that DHSSPS guidance, regional protocols and local procedures issued by Health and Social Care Trusts were available in the home.</p> <p>Ref section 5.0</p>	One	Available for reference.	From the date of inspection and on going

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 return to nursing.team@rqia.org.uk

Name of Registered Manager Completing Qip	Jacqueline Felicitas
Name of Responsible Person / Identified Responsible Person Approving Qip	Robert Duncan

QIP Position Based on Comments from Registered Persons	Yes	Inspector	Date
Response assessed by inspector as acceptable	yes	Linda Thompson	22/9/14
Further information requested from provider			