



Announced Pre-Registration Care Inspection Report 20 August 2019



Drumclay Care Home

Type of Service: Nursing Home (NH)
Address: 15 Drumclay Road, Enniskillen, BT74 6NG
Tel No: 02866327255
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Assurance, Challenge and Improvement in Health and Social Care

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 from their responsibility for maintaining compliance with legislation, standards and best practice.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Nursing Homes Regulations (Northern Ireland) 2005 and the DHSSPS Care Standards for Nursing Homes. 2015.

1.0 What we look for



2.0 Profile of service

This is a registered nursing home which is registered to provide nursing care for up to 52 persons.

3.0 Service details

<p>Applicant Organisation/Registered Provider: Western Health and Social Care Trust (WHSCCT)</p> <p>Applicant Responsible Individual: Dr Anne Kilgallen</p>	<p>Applicant Registered Manager: Denise Foster</p>
<p>Categories of care: Nursing Home (NH) I – Old age not falling within any other category. DE – Dementia. LD – Learning disability. PH – Physical disability other than sensory impairment. PH(E) - Physical disability other than sensory impairment – over 65 years.</p>	<p>Number of registered places: 52</p> <p>The registered persons must inform RQIA of any intention to open up and use the facilities beyond the current 14 beds.</p>
<p>Person in charge at the time of inspection: Denise Foster</p>	

4.0 Inspection summary

An announced pre-registration care and estates inspection of Drumclay Care Home took place on 20 August 2019 from 10.30 hours to 14.30 hours.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003; The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005; The Nursing Homes Regulations (Northern Ireland) 2005; and the DHSSPS Care Standards for Nursing Homes 2015.

The inspection sought to assess an application submitted to RQIA for the registration of Drumclay Care Home as a nursing home.

An application was also submitted for the registration of the Western Health and Social Care Trust (WHSCCT) as the registered provider, Dr Anne Kilgallen as the responsible individual and Denise Foster as the registered manager.

Areas of good practice were identified in relation to the governance and management arrangements; staff development and training and the phasing of planned admissions to the home.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients' experience.

Information has been gathered throughout the registration process. Scrutiny of this information means that registration of this nursing home is granted from a care and estates perspective.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Denise Foster, registered manager, as part of the inspection process and can be found in the main body of the report.

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

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- application to register the nursing home
- application to register the responsible person/registered provider
- application to register the manager
- the proposed statement of purpose
- the proposed patients' guide
- fire risk assessment
- BS5839 fire detection & alarm maintenance engineer service certificates
- BS5266 emergency lighting maintenance engineer service certificates
- fire-fighting equipment annual service certificate
- BS7671 electrical installation periodic inspection certificate
- portable appliance test certificates for electrical equipment
- legionella risk assessment
- water samples bacteriological analysis certificates
- hot/cold water storage & distribution system chlorination certificate
- building user seldom used outlets water flushing
- thermostatic mixing valve (TMV) maintenance certificates
- lifting operations & lifting equipment regulations (LOLER) certificates/reports for patient hoists
- kitchen & laundry gas safe register engineer reports for gas appliances
- space heating oil boilers maintenance inspection reports
- emergency generator annual maintenance service report.

During the inspection the inspector met with a selection of staff including members of the multidisciplinary team that will be working within the home.

The following records were examined during the inspection:

- sample of operational policies and procedures
- sample of patient care records to be used by nursing and care staff
- sample of the proposed staff duty rotas for all grades of staff
- training records and schedules
- NIHTM84 compliance certificate.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

6.1 Inspection findings

Environment

The clinical lead guided the inspectors around the entire premises.

Drumclay Care Home will provide accommodation for 52 patients which is provided over two units once all beds have been registered. The home is situated in a quiet residential area and offers bright and spacious accommodation on the one level. All areas of the home are wheelchair accessible.

Patient bedrooms, communal lounge areas and communal dining areas were presented to a high specification and were tastefully decorated. All bedrooms were equipped with a range of furniture. A number of bedrooms did not have wardrobes secured to the wall. In addition, many of the bedrooms did not have a lockable space or bedside lighting. This was discussed with the manager who assured this would be addressed before patients were admitted to the home.

Communal bathrooms and toilet facilities are also available throughout the home. One raised toilet seat was observed to be stained. This was brought to the attention of the clinical lead who arranged for it to be replaced before the end of the inspection.

Dining areas were well furnished with tables and chairs suitable to the individual needs of the patients. The sluice and treatment room which were equipped with appropriate equipment. An area on one of the walls in the dirty utility was observed to be unpainted. The clinical lead confirmed that this was on a schedule of works and was due to be painted imminently.

There is a nurses' station in each unit where there is adequate storage space available to ensure that the patients' care records are stored securely. The manager's office is situated near the front entrance to the home.

Observation of the environment and discussion with staff evidenced that infection prevention and control measures were well managed. Hand hygiene posters were on display and personal protective equipment (PPE) and alcohol gels were readily available.

We discussed the use of rooms as office space for the multidisciplinary team including physiotherapists, occupational therapists, pharmacists and dieticians. Assurances were given that these offices would only be used by staff working in Drumclay Care Home. We also discussed the potential change of use of a large lounge to facilitate rehabilitation equipment for patients. We requested that this be discussed with RQIA prior to any changes being made to ensure there was adequate communal space for patient's accommodated in the home.

Parts of the home were found to be very warm during the inspection. This was discussed with the manager who agreed to monitor this to ensure patient comfort. Some parts of the home were observed to be untidy including patient bedrooms and communal bathrooms. This was discussed with the management team. Assurances were given that these areas would be tidied and form part of the cleaning schedule for the home. This will be reviewed at a future care inspection.

Adequate car parking facilities are provided.

Estates Inspector comment

All required estates registration documents were inspected prior to the inspection, and were all noted as compliant with estates registration requirements. (Ref 5.0)

The physical inspection of the premises resulted in no concerns being raised from an estates inspector's perspective, concluding that subject to care inspector approval the facility could be registered.

Home's Statement of Purpose and Patient Guide

Prior to the inspection the statement of purpose and the service user guides were submitted to RQIA and a review of both documents found them to be satisfactory. The manager agreed to review all the contact numbers on both documents to ensure they were correct.

Policies and procedures

A policy and procedure manual was available and centrally indexed the policies and procedures for all operational areas of the home. A sample of policies and procedures reviewed evidenced that they included the date when issued, reviewed or revised. A system is in place to ensure that policies and procedures are reviewed three yearly minimum and more frequently if required.

Recruitment processes and staff induction

No recruitment records were reviewed during the inspection. Discussion with the manager confirmed they were aware of the legislative requirements regarding recruitment records. Systems and processes were in place to ensure the staff received a comprehensive induction and records were appropriately maintained. This will be reviewed at a future care inspection.

Staff training records

A review of information evidenced that a training schedule was in place. A review of a training matrix included details of all staff employed and evidenced that a number of staff have received mandatory training and/or arrangements were in place for other staff to complete the training. Records for training completed were maintained in accordance with the Care Standards for Nursing Homes, DHSSP's 2015.

Admission planning

A discussion with the manager and other management representatives advised that the arrangements for admission of patients to the home were being co-ordinated with input from the multiprofessional team. Admissions to the home are planned to proceed on a phased basis ensuring that adequate time is given to allow staff to get to know the patients and become familiar with their new surroundings. A copy of the admission policy was shared with RQIA post inspection.

Staffing

A review of the template for recording the staff duty rota confirmed that it was in keeping with legislation and Care Standards for Nursing Homes, 2015. A discussion with the manager outlined the proposed staffing structure and that these would be reviewed in accordance with the health and welfare needs of the patients to be accommodated. The staffing arrangements will be reviewed and monitored at subsequent care inspections.

Menu and mealtimes

We discussed the provision of meals in the home. Breakfast will be prepared on site with the midday and evening meals transferred from the South West Acute Hospital (SWAH). Staff confirmed patients on modified diets will have a choice of meals and there will be a selection of snacks available. At present meals are provided on a two week rotational menu. The manager gave assurances that this would be monitored on a regular basis with patient's opinion being actively sought.

Governance Arrangements

Review of governance arrangements evidenced good management oversight of the day to day working of the home. A number of audits are in place to assure the quality of care and services. We discussed the importance of audits generating action plans that highlight areas for improvement and to ensure that any deficits identified were actioned as required.

Discussion with the manager confirmed that systems were in place to ensure that notifiable events are investigated and reported to RQIA or other relevant bodies appropriately. Arrangements are also in place for quality monitoring visits to be completed on a monthly basis on behalf of the responsible individual in accordance with the relevant regulations and standards.

Areas of good practice

There were examples of good practice evidenced in relation to the governance and management arrangements, staff development and training and the phasing of planned admissions to the home.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.2 Fit persons interview

Providers of regulated establishments require to be registered with RQIA in accordance with Article 12 of The Health and Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, as it is an offence to carry on an establishment of any description without being registered in respect of it.

WHSCCT submitted an application to RQIA to become the registered provider of Drumclay Care Home. The relevant information, supporting documentation and appropriate fees accompanied the application.

A fit person's interview was undertaken on 24 June 2019 by the Chief Executive of RQIA. Discussion with Dr Anne Kilgallen evidenced that she had a clear understanding of her roles and responsibilities as a registered person under the relevant legislation and minimum standards.

Registration of Dr Anne Kilgallen with RQIA as responsible individual is granted.

Drumclay Care Home was required to appoint a registered manager. An application was received in respect of Denise Foster. Following submission and review of the application registration with RQIA is granted.

6.3 Conclusion

Registration of Drumclay Care Home was granted from a care and premises inspector's perspective following this inspection. One condition was placed on the registration to ensure the registered person must inform RQIA of any intention to open up and use the facilities beyond the current 14 beds.

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.



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