

Unannounced Care Inspection Report 4 May 2017



Knockagh Rise

Type of Service: Nursing Home
Address: 236 Upper Road Greenisland, BT38 8RP
Tel no: 028 9085 5930
Inspector: Lyn Buckley

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Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An unannounced inspection of Knockagh Rise took place on 4 May 2017 from 09:15 to 12:00 hours.

This inspection was undertaken to determine what progress had been made in addressing the requirements and recommendations made during the previous unannounced care inspection on 20 February 2017. The inspection had been undertaken in response to concerns raised by a whistle blower who contacted RQIA. As a consequence of the inspection, the registered person and the manager were required to attend a serious concerns meeting at RQIA on 6 February 2017. At this meeting we discussed concerns regarding catering systems and processes, patients' nutritional risk assessment and care planning and the management of patient's therapeutic diets and weight management. During the serious concerns meeting, an action plan was submitted and assurances were given to RQIA that the identified issues would be addressed in a timely manner to achieve compliance.

The term 'patient' is used in throughout the report to describe those living in Knockagh Rise which provides both nursing and residential care.

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.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	4*	1

*The total number of requirements includes one requirement stated for the third and final time and two requirements stated for the second time.

Details of the Quality Improvement Plan (QIP) within this report were discussed with the nurse in charge of the home as part of the inspection process. Mrs Ethel Colquhoun, manager, Mr James Wilson, registered person were available at the beginning of the inspection but were unable to remain until its completion.

The timescales for completion commence from the date of inspection.

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

1.2 Actions/enforcement taken following the most recent inspection

The most recent inspection of the home was an unannounced care inspection undertaken on 30 January 2017. As a result of this inspection the registered person was required to attend a serious concerns meeting in RQIA on 6 February 2017. RQIA were provided with assurances that the identified issues would be addressed in a timely manner to achieve compliance.

Other than those actions detailed in the QIP there were no further actions required to be taken.

RQIA have also reviewed any evidence available in respect of serious adverse incidents (SAI's), potential adult safeguarding issues, whistle blowing and any other communication received since the previous care inspection.

2.0 Service details

Registered organisation/registered person: Knockagh Rise Limited/ Mr Malcom James Wilson	Registered manager: See box below.
Person in charge of the home at the time of inspection: Mrs Ethel Colquhoun – Manager	Date manager registered: Mrs Ethel Colquhoun – Manager since 20 October 2016; application not yet submitted
Categories of care: NH- I, NH-PH, NH-PH(E),RC- I, RC-PH and RC-PH(E). A maximum of six residential places in categories RC- I, RC-PH and RC-PH(E).	Number of registered places: 29

3.0 Methods/processes

Prior to inspection we analysed the following records:

- notifiable events received by RQIA since the last care inspection
- the registration status of the home
- written and verbal communication received since the previous care inspection
- the returned quality improvement plan (QIP) from the previous care inspection
- the previous care inspection report
- pre-inspection audit information
- the action plan submitted in response to RQIA on 6 February 2017

During this inspection, care delivery and care practices were observed in the dining room and we also spoke with four patients individually and with others in small groups, the nurse in charge of the home, one member of care staff and the cook. In addition the registered person, Mr James Wilson, and the manager, Mrs Ethel Colquhoun were available for discussion from approximately 10:00 hours as they came into the home prior to them attending a pre-arranged meeting outside the home.

The following information was examined during the inspection:

- two patient care records
- record of patients' weights
- accident/incident records from 30 January 2017
- catering and food records
- menus
- food choice and intake records
- diet notification records.

4.0 The inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 30 January 2017

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector. This QIP was validated by the care inspector during this inspection. Details can be viewed in the next section.

4.2 Review of requirements and recommendations from the last care inspection dated 30 January 2017 and inspection findings.

Last care inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 30 Stated: Second time	<p>The registered provider must ensure that RQIA are appropriately notified of accidents and/or incidents occurring in the home in accordance with The Nursing Homes Regulations' (Northern Ireland) 2005 – regulation 30.</p> <p>Action taken as confirmed during the inspection: Review of notifications submitted to RQIA since 30 January 2017 and the home's accident/incident records evidenced that this requirement had been met.</p>	Met
Requirement 2 Ref: Regulation 13 (1) Stated: First time	<p>The registered provider shall ensure that nursing staff adhere to professional standards for medicines management at all times to ensure patients are not put at risk of harm.</p> <p>Action taken as confirmed during the inspection: Observation of the two registered nurses on duty conducting their medicine rounds evidenced that this requirement had been met.</p>	Met
Requirement 3 Ref: Regulation 12 (1) Stated: First time	<p>The registered provider shall ensure that care planning reflects specific care and treatment requirements in relation to specialist seating, the position of patients with swallowing difficulties when they are assisted to eat and drink; and pressure relief mattress settings.</p> <p>Action taken as confirmed during the inspection: Review of care records and discussion with staff evidenced that this requirement had been met.</p>	Met

<p>Requirement 4</p> <p>Ref: Regulation 29</p> <p>Stated: Second time</p>	<p>The registered provider shall ensure that reports from visits undertaken on behalf of the responsible individual and in accordance with The Nursing Homes Regulations (Northern Ireland) 2005 – regulation 29, are available in the home.</p> <p>Action taken as confirmed during the inspection: The manager informed the inspector that the records from February to April 2017 had been completed but were not available in the home. This was discussed with senior management in RQIA as the requirement had been stated for a second time. It was agreed that we would ask the registered person to submit the reports, post inspection, to enable us to review content and actions as recommended.</p> <p>The reports were submitted and reviewed. As the recommendation was met regarding the quality of the reports, the decision was made to state this requirement for a third and final time. Further noncompliance with this requirement could result in enforcement action.</p>	<p>Not Met</p>
<p>Requirement 5</p> <p>Ref: Regulation 13 (1)</p> <p>Stated: First time</p>	<p>The registered provider shall ensure that structures and systems are implemented to ensure the planned menu is adhered to; any variance/change to the planned menu and the reason for it is recorded to enable anyone inspecting records to determine the food served/eaten.</p> <p>Action taken as confirmed during the inspection: Discussion with the registered person, staff and review of records evidenced that this requirement had been met.</p>	<p>Met</p>
<p>Requirement 6</p> <p>Ref: Regulation 14 (2) (a) (b) and (c)</p> <p>Stated: First time</p>	<p>The registered provider shall ensure that required food hygiene requirements for record keeping are adhered to and that safe food handling practices are adhered to.</p> <p>Action taken as confirmed during the inspection: Discussion with the registered person and cook, review of records and observation of the kitchen areas evidenced that this requirement had been met.</p>	<p>Met</p>

<p>Requirement 7</p> <p>Ref: Regulation 12 (4)</p> <p>Stated: First time</p>	<p>The registered provider shall ensure that a structured and traceable process of ordering food supplies is implemented to ensure the provision of food to meet the nutritional needs of patients.</p> <p>Action taken as confirmed during the inspection: Discussion with the registered person and cook, review of records and observation of the kitchen areas evidenced that this requirement had been met.</p>	<p>Met</p>
<p>Requirement 8</p> <p>Ref: Regulation 16</p> <p>Stated: First time</p>	<p>The registered provider shall ensure that up to date care plans are in place to meet patients' nutritional needs regarding therapeutic diets and the management of weight loss. Care plans shall be</p> <ul style="list-style-type: none"> • reflective of recommendations made by healthcare professionals • reviewed on a regular basis by registered nursing staff <p>Action taken as confirmed during the inspection: Discussion with the manager and nurses; and review of two patients' care records evidenced that since the last care inspection nursing staff had reviewed and rewritten care plans, as required. However, one record was not reflective of the patient's needs as recommended by healthcare professionals on 19 July 2016 and a number of the care plans and risk assessments had been reviewed since January 2017. This was disappointing given the assurances provided to RQIA during the serious concerns meeting in February 2017.</p> <p>Details of the findings were discussed with the manager and the nurse in charge. This requirement has been stated for a second time.</p>	<p>Not Met</p>
<p>Requirement 9</p> <p>Ref: Regulation 13 (1)</p> <p>Stated: First time</p>	<p>The registered provider shall ensure that governance audits are undertaken on a regular basis to promote and make proper provision for the nursing, health and welfare of patients.</p> <p>Action taken as confirmed during the inspection: Governance records were not inspected on this occasion. This requirement is carried forward for review during the next care inspection.</p>	<p>Carried forward for review at next care inspection.</p>

<p>Requirement 10</p> <p>Ref: Regulation 12</p> <p>Stated: First time</p>	<p>The registered provider shall ensure that patients' weight is monitored on a regular basis and in accordance with DHSSPS Care Standards for Nursing Homes (2015) – Standard 12 and recommendations from healthcare professionals.</p>	<p style="text-align: center;">Not Met</p>
<p>Action taken as confirmed during the inspection:</p> <p>The home's process of monitoring patients' weights requires staff to record centrally into a spiral bound notebook and nursing staff then record the patient's weight into individual care records.</p> <p>Review of the spiral bound notebook found that pages were missing from the notebook. The manager was able to locate the loose pages; however, a recommendation was made to consider using a bound book to prevent loss of information. The manager was advised that, if required, advice could be sought from the Information Commissioner's Office.</p> <p>The information reviewed indicated that all patients were weighed regularly in keeping with good practice for nutritional screening and other patients, indicated by an asterisk, required to be weighed weekly. However, gaps in the recording of patients' weight were evident. This was disappointing given the assurances provided to RQIA during the serious concerns meeting in February 2017.</p> <p>Details of the findings were discussed with the manager and the nurse in charge. This requirement is now stated for a second time and as stated a further recommendation was made regarding the management of records.</p>		

<p>Requirement 11</p> <p>Ref: Regulation 15 (2)</p> <p>Stated: First time</p>	<p>The registered provider shall ensure that patient assessments are kept under review and are revised at any time when it is necessary to do so having regard to any changes of circumstances.</p> <hr/> <p>Action taken as confirmed during the inspection: Discussion with the manager and nurses; and review of two patients' care records evidenced that since the last care inspection nursing staff had reviewed and/or rewritten risk assessments, as required. However, one record evidenced that risk assessments had not been reviewed regularly since January 2017 and some not reviewed since September 2016. This was disappointing given the assurances provided to RQIA during the serious concerns meeting in February 2017.</p> <p>Details of the findings were discussed with the manager and the nurse in charge. This requirement has been stated for a second time.</p>	<p>Not Met</p>
Last care inspection recommendations		Validation of compliance
<p>Recommendation 1</p> <p>Ref: Standard 12</p> <p>Stated: First time</p>	<p>The registered provider should ensure that the serving of meals is reviewed to ensure adequate time between meals is enabled in line with regional nutritional guidelines.</p> <hr/> <p>Action taken as confirmed during the inspection: Discussion with the manager, staff and patients confirmed that this recommendation had been met.</p>	<p>Met</p>
<p>Recommendation 2</p> <p>Ref: Standard 35</p> <p>Stated: Second time</p>	<p>The registered provider should ensure that any action plans generated following a regulation 29 visit clearly evidences that identified deficits have been addressed and that the person undertaking subsequent visits validates/reviews the actions taken.</p> <hr/> <p>Action taken as confirmed during the inspection: As previously discussed, reports were not available in the home for inspection. Reports from January to April 2017 were submitted to RQIA, by email, as agreed with the registered person. Review of the content of the reports submitted confirmed that this recommendation had been met.</p>	<p>Met</p>

Recommendation 3 Ref: Standard 4.8 Stated: First time	The registered provider should ensure that catering, nursing and care staff are kept informed regarding which patients require therapeutic diets and the type of diet they require. Where a patient's needs change this should be effectively communicated to staff.	Met
	Action taken as confirmed during the inspection: Review of records and discussion with nursing, care and catering staff confirmed that this recommendation had been met. Discussion with nursing staff took place regarding how staff describe modified diets on their record sheets. Advice was provided to consider using the descriptors for food textures and fluid consistency, used by speech and language therapists to avoid any confusion.	

5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with the nurse in charge at the conclusion of the inspection as part of the inspection process. Brief details were also discussed with Mrs Ethel Colquhoun, manager, and Mr James Wilson, registered person, during the inspection and by telephone on 8 May 2017. The timescales commence from the date of inspection.

The registered provider/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all requirements and recommendations contained within the QIP 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 the nursing home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

This section outlines the actions which must be taken so that the registered provider meets legislative requirements based on The Nursing Homes Regulations (Northern Ireland) 2005.

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Care Standards for Nursing Homes 2015. They promote current good practice and if adopted by the registered provider/manager may enhance service, quality and delivery.

5.3 Actions to be taken by the registered provider

The QIP should be completed and detail the actions taken to meet the legislative requirements and recommendations stated. The registered provider should confirm that these actions have been completed and return the completed QIP to nursing.team@rqia.org.uk for assessment by the inspector.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan

Statutory requirements	
<p>Requirement 1</p> <p>Ref: Regulation 29</p> <p>Stated: Third and final time</p> <p>To be completed by: Immediate action required.</p>	<p>The registered provider shall ensure that reports from visits undertaken on behalf of the responsible individual and in accordance with The Nursing Homes Regulations (Northern Ireland) 2005 – regulation 29, are available in the home.</p> <p>Ref: Section 4.2</p> <p>Response by registered provider detailing the actions taken: .All regulation 29 reports are available in a file within the managers office.The most recent report that was carried out, a copy can be obtained in the nurses office.</p>
<p>Requirement 2</p> <p>Ref: Regulation 16</p> <p>Stated: Second time</p> <p>To be completed by: 31 May 2017.</p>	<p>The registered provider shall ensure that up to date care plans are in place to meet patients’ nutritional needs regarding therapeutic diets and the management of weight loss. Care plans shall be</p> <ul style="list-style-type: none"> • reflective of recommendations made by healthcare professionals • reviewed on a regular basis by registered nursing staff. <p>Ref: Section 4.2</p> <p>Response by registered provider detailing the actions taken: Care plans are being up dated with the correct recommendations from the appropriate healthcare professionals with regards of therapeutic diets. All to be reviewed monthly or sooner if a new therapeutic diet is required.</p>
<p>Requirement 3</p> <p>Ref: Regulation 13 (1)</p> <p>Stated: First time</p> <p>To be completed by: 1 March 2017.</p>	<p>Carried forward for review during next care inspection. The registered provider shall ensure that governance audits are undertaken on a regular basis to promote and make proper provision for the nursing, health and welfare of patients.</p> <p>Ref: Section 4.2</p> <p>Response by registered provider detailing the actions taken: All new governance audit tools will be carried out on a regular basis.New system being implemented to reflect this practice. le new audit tools, filing to ensure that the health and wellbeing of residents is optimal.,</p>

<p>Requirement 4</p> <p>Ref: Regulation 12</p> <p>Stated: Second time</p> <p>To be completed by: Immediate action required.</p>	<p>The registered provider shall ensure that patients' weight is monitored on a regular basis and in accordance with DHSSPS Care Standards for Nursing Homes (2015) – Standard 12 and recommendations from healthcare professionals.</p> <p>Ref: Section 4.2</p> <p>Response by registered provider detailing the actions taken: Weight recording is composed in two parts. Residents on supplements are weighed weekly. This allows the nursing staff to monitor these ri weights closely and contact appropriate agencies for guidance and further reviews if required. All other weights are recored monthly, also if weight loss noted then contact appropriate agency, ie dietician.</p>
<p>Recommendations</p>	
<p>Recommendation 1</p> <p>Ref: Standard 37</p> <p>Stated: First time</p> <p>To be completed by: 31 May 2017</p>	<p>The registered provider should consider how records maintained by the home are managed. For example, patient information regarding weights, if held centrally, could be held in a bound book rather than a spiral type book to ensure information is not lost.</p> <p>If required, advice can be sought from the Information Commissioner's Office.</p> <p>Ref: section 4.2</p> <p>Response by registered provider detailing the actions taken: All weight records are recorded in a bound book in the nurses station</p>

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The Regulation and
Quality Improvement
Authority

The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email info@rqia.org.uk

Web www.rqia.org.uk

 @RQIANews