

Inspector: Lyn Buckley Inspection ID: IN024907

Bohill Bungalows RQIA ID: 12199 69 Cloyfin Road Coleraine BT52 2NY

Tel: 028 7032 5180

Email: yvonnediamond@priorygroup.com

REGULATION AND QUALITY

14 APR 2013

IMPROVEMENT AUTHORITY

Unannounced Care Inspection of Bohill Bungalows

14 March 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An unannounced care inspection took place on 14 March 2016 from 10:05 to 13:35 hours.

The inspection sought to assess progress with the issues raised during and since the previous inspection and areas of concern raised by the Northern Health and Social Care Trust (NHSCT) during a meeting with RQIA on 14 January 2016. Refer to section 3 and 5 for further details.

On the day of the inspection, the care in the home was found to be safe, effective and compassionate. The inspection outcomes found no significant areas of concern; however, some areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) within this report.

1.1 Actions/Enforcement Taken Following the Last Care Inspection

There were no further actions required to be taken following the last care inspection on 15 July 2015 as there were no requirements or recommendations made.

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	1

The details of the Quality Improvement Plan (QIP) within this report were discussed with the registered manager, Yvonne Diamond, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Parkcare Homes (no.2) Limited Sarah Hughes – Responsible Individual	Registered Manager: Yvonne Diamond
Person in Charge of the Home at the Time of Inspection: Yvonne Diamond – Registered Manager	Date Manager Registered: 26 February 2016
Categories of Care: NH – LD, LD(E), PH and PH(E) A maximum of 6 patients in categories NH- PH/PH(E) to be accommodated in Bungalow 1. A maximum of 18 patients in categories NH- LD/LD(E) to be accommodated in Bungalows 2, 3 and 4 with a maximum of 6 patients accommodated in each bungalow.	Number of Registered Places: 24
Number of Patients Accommodated on Day of Inspection: 21	Weekly Tariff at Time of Inspection: £657 - £6666

3. Inspection Focus

RQIA were invited to attend a meeting with the Northern Health and Social Care Trust's (NHSCT) safeguarding team on 14 January 2016 in respect of Bohill Bungalows Care Home. During the meeting concerns were raised, by the Trust, in relation to staffing arrangements, management of safeguarding issues and the provision of activities.

It is not the remit of RQIA to investigate complaints made by or on behalf of individuals, as this is the responsibility of the providers and commissioners of care. However, if RQIA is notified of a potential breach of regulations or associated standards, it will review the matter and take whatever appropriate action is required; this may include an inspection of the home.

Following discussion with senior management, it was agreed that as an inspection to Bohill Bungalows was scheduled, this inspection would review the following areas;

- staffing including deployment and recruitment
- · safeguarding of vulnerable adults
- provision of activities.

4. Methods/Process

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

- discussion with the registered manager
- · discussion with the registered nurses
- discussion with care staff and support staff
- discussion with patients
- review of the environment and review of a random selection of patient and resident bedrooms, bathrooms and communal areas in each bungalow
- examination of a selection of care records
- examination of a selection of records pertaining to the inspection focus
- observation of care delivery
- evaluation and feedback.

During the inspection, the inspector met with patients individually and with others in smaller groups; nursing and care staff on duty in each bungalow and one registered nurse who was working supernumerary to plan the training for the site.

Prior to inspection the following records were analysed:

- the registration status of the home
- written and verbal communication received by RQIA since the previous care inspection.
- the previous care inspection report
- · the inspector's pre inspection assessment.

The following records were examined during the inspection:

- nursing and care duty rotas from 15 February to 13 march 2016 for all bungalows
- records pertaining to safeguarding referral and investigations
- planner for staff supervisions and appraisals
- planner and outcomes regarding staff training
- · complaints record
- record of visits undertaken on behalf of the responsible individual in accordance with Regulation 29 of the Nursing Homes Regulations (Northern Ireland) 2005 in January and February 2016
- a random sample of care records pertaining to activities within each bungalow.

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of Bohill Bungalows was an unannounced care medicines management inspection dated 26 October 2015. The completed QIP was returned and approved by the pharmacy inspector.

5.2 Review of Requirements and Recommendations from the Last Care Inspection on 15 July 2015.

Last Care Inspection Statutory Requirements	Validation of Compliance
There were no requirements made	
Last Care Inspection Recommendations	Validation of Compliance
There were no recommendations made	

5.3 Staffing

Discussion with the registered manager and staff on duty indicated that staffing levels were appropriate to meet the needs of patients. Review of duty rotas from 15 February to 13 March 2016 confirmed that the arrangements for 'one to one' staffing were maintained as required.

Discussion with one student nurse confirmed that they were not included in the staffing numbers and were supported by an identified mentor.

Duty rotas reviewed clearly indicated:

- the nurse in charge of the home in the absence of the registered manager
- · the name and grade of each staff member
- where each staff member was working and the shift they worked.

Duty rotas indicated a 'sleep over' shift. An example of a sleep over was provided by the registered manager and discussed in detail. The registered manager stated that the use of 'sleep overs' to cover night duty was only utilised when all other options to cover the shift had been exhausted. It was expected that this practice would be phased out because of recent recruitment. The duty rotas evidenced that the 'sleep over' shift was not used consistently. However, a recommendation was made.

Discussion with the registered manger confirmed that two full time registered nurses and two full time care assistant posts had recently been recruited and staff would commence once the pre-employment checks had been completed. In addition, a recruitment exercise was due to close on 24 March 2015.

Areas for Improvement

It was recommended that the use of 'sleep overs' is phased out, as soon as possible, to ensure that at all times the needs of patients are met, taking into account the size and layout of the home, the Statement of Purpose and the fire safety requirements.

Number of Requirements:	0	Number of Recommendations:	1

5.4 Safeguarding of vulnerable adults

Discussion with the registered manager and with staff on duty evidenced that they were aware of the regional protocols for the safeguarding of vulnerable adults and the home's procedures for escalating concerns about staff conduct and practice. Review of training records confirmed that 90.3% of staff had completed level one of the mandatory safeguarding training for 2016.

The registered manager provided an update of investigations being conducted by the Trust.

Review of notifications submitted to RQIA, since the previous care inspection in July 2015 evidenced that any potential/actual safeguarding was appropriately notified.

RQIA were assured that the management of safeguarding of vulnerable adults was appropriate and in line with regional guidance.

Areas for Improvement

There were no areas for improvement identified.

Number of Requirements:	0	Number of Recommendations:	0	

5.5 Provision of activities

Review of records and discussion with the registered manager and staff evidenced that a structured activity programme was developed for each patient. Activities were based on patients' identified needs and provided a positive outcome. Review of a random sample of five patient records also confirmed this approach.

Staff confirmed that while they had an activity programme to refer to, the planned activity could change or adapt to the patient's wishes and preferences at any time. A record of the outcome of 'activities' was maintained for each patient.

Two patients spoken with confirmed that they had a choice in how they spent their day and described outings to the local town and surrounding areas for shopping and eating out in the home's bus; and art and craft activities.

Areas for Improvement

There were no areas for improvement identified.

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Number of Requirements:	l U	Number of Recommendations:	U
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5.6 Additional Areas Examined

Regulation 29 visits and reports.

Review of the reports from the visits carried out on behalf of the responsible individual, were reviewed for January and February 2016. The reports evidenced review of the service provision within Bohill Bungalows. Any areas identified for improvement were clear and the registered manager's action to address these was also clearly evidenced.

During feedback the registered manager was advised to request that the person undertaking the visit should recorded the time of the visit as well as the date on the report.

Areas for Improvement

There were no areas for improvement identified.

Number of Requirements:	0	Number of Recommendations:	0	İ
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6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with the Registered Manager, Yvonne Diamond, as part of the inspection process. The timescales commence from the date of inspection.

The registered person/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 person/manager 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 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.

6.1 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 (Northern Ireland) 2005.

6.2 Recommendations

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

6.3 Actions Taken by the Registered Manager/Registered Person

The QIP must be completed by the registered person/registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and

approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to nursing.team@rgia.org.uk and assessed by the inspector.

Quality Improvement Plan				
Recommendations	<u>Merikan keli da sa sebenjang bendal</u> 2000-22 Supples (1901-2015)			
Recommendation 1 Ref: Standard 41	ensure that at all account the size	overs' should be phas times the needs of pati and layout of the home	ients are met, takir	ng into
Stated: First time	and the fire safety requirements.			
	Response by Registered Person(s) Detailing the Actions Taken:			
To be Completed by: 31 May 2016	The service is continuing to work towards phasing out sleep overs, recruitment continues to be a focus for Bohill Bungalows. We continue to utilise them only as a last resort when no other options are available.			
Registered Manager C	ompleting QIP	Planoid	Date Completed	12/04/2016
Registered Person Approving QIP		Style-	Date Approved	12.04.16
RQIA Inspector Asses	sing Response	E. Buckle	Date Approved	14/4/16.

^{*}Please ensure this document is completed in full and returned to <u>Nursing.Team@rgia.org.uk</u> from the authorised email address*

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained in this report do not absolve the registered provider/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered provider/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.