



Announced Variation to Registration Care Inspection Report 7 March 2019



Dunmurry Manor

Type of Service: Nursing Home
Address: 2a Hazel Avenue, Dunmurry BT17 9QU
Tel No: 028 9061 0435
Inspector: Dermot Walsh

www.rqia.org.uk

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

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 40 persons.

3.0 Service details

Organisation/Registered Provider: Runwood Homes Ltd Responsible Individual(s): Gavin O'Hare-Connolly	Registered Manager: Michelle Montgomery
Person in charge at the time of inspection: Michelle Montgomery	Date manager registered: 15 March 2019
Categories of care: Nursing Home (NH) DE – Dementia.	Number of registered places: 40 A maximum of 24 patients in category NH-DE to be accommodated on the First Floor.

4.0 Inspection summary

An announced variation to registration inspection of Dunmurry Manor took place on 7 March 2019 from 13.50 to 16.00 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 a variation to the registration of Dunmurry Manor Nursing Home to reduce the number of registered places from 40 to 24 in order to accommodate residential patients on the Rowan Unit.

The variation to registration to reduce the number of registered places from 40 to 24 was granted from a care perspective following this inspection.

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.

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 Michelle Montgomery, manager and Michael Doolin, Director of Operations - North, Runwood Homes, 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.

4.2 Action/enforcement taken following the most recent inspection dated 17 January 2019

The most recent inspection of the home was an unannounced care inspection. Other than those actions detailed in the QIP no further actions were required to be taken following the most recent 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:

- notifiable events since the previous care inspection
- the registration status of the home
- written and verbal communication received since the previous care inspection which includes information in respect of serious adverse incidents(SAI's), potential adult safeguarding issues and whistleblowing
- the application for variation
- the previous care inspection report

During the inspection the inspector met with the manager and the Director of Operations - North.

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

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 17 January 2019

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector and will be validated at the next care inspection.

6.2 Review of areas for improvement from the last care inspection dated 17 January 2019

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 21 (5) (d) (i) Stated: Second time	The registered person shall ensure that the system to monitor care staffs' registrations with NISCC is more robust.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation/standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	
Action required to ensure compliance with The Care Standards for Nursing Homes (2015)		Validation of compliance
Area for improvement 1 Ref: Standard 46 Criteria (2) Stated: First time	The registered person shall ensure that patients' hoists are maintained clean at all times and that patients' own slings are stored appropriately.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	
Area for improvement 2 Ref: Standard 44 Criteria (1) Stated: First time	The registered person shall ensure that storage areas within both identified kitchenettes are maintained clean and hygienic.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	

Area for improvement 3 Ref: Standard 12 Stated: First time	The registered person shall review the management of mealtimes for patients to ensure adequate gaps between meals.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	

This inspection focused solely on the variation to registration application made by the registered provider to RQIA. The areas for improvement from the last care inspection on 17 January 2019 were not reviewed as part of the inspection and are carried forward to the next care inspection.

6.3 Inspection findings

Environment

Dunmurry Manor was a purpose built home to accommodate nursing patients on the first floor and residential patients on the ground floor. The residential home registered separately from the nursing home on 6 July 2018. This variation will reduce the number of patients in the nursing home from 40 to 24. Nursing patients will be accommodated in the Hill Unit on the first floor. A separate variation was submitted to RQIA in respect of increasing the number of registered places for the residential home and this variation was reviewed by the RQIA inspector for the residential home. The additional residential patients will be accommodated in the Rowan Unit on the first floor.

A second lounge was developed in the nursing home in order to comfortably accommodate a social communal space for the 24 patients. Development of this lounge involved building works. An RQIA estates inspector accompanied the care inspector to review the works and certified checks which had been conducted from relevant authorities. The works had been completed to a high standard. The lounge was well decorated and well furnished. The room was bright and spacious. A kitchenette had been included within the lounge where relatives could avail of tea making facilities. The manager also confirmed that patients could receive meals in this area if that was their wish.

All bedrooms were en-suite and appropriately furnished. There were adequate storage facilities for domestic cleaning utensils and for patient equipment. A staff nursing station was located at the centre of the home. Access to the home was gained through a passenger lift or via a stairwell.

The home was clean. There were no malodours detectable. Corridors were clear of clutter and obstruction. Stairwells and fire exits were also clear. Personal protective equipment such as gloves and aprons were available for staff use.

Management arrangements

The manager in the home was employed in a full time capacity. A separate application to register the manager with RQIA had been received and was being processed. The manager confirmed that a deputy manager had been employed in the nursing home and was due to commence in post on 15 March 2019.

Staffing arrangements

The manager confirmed that staffing levels and skill mix were determined through the monitoring of patient dependency levels. The manager also confirmed that additional staff had recently been recruited for identified shift patterns in the home and that they will continue to monitor the staffing arrangements in the home to ensure that patients' needs are met.

Areas of good practice

An area of good practice was observed in relation to the maintenance of the environment.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.4 Conclusion

The application to vary the registration of Dunmurry Manor Nursing Home was granted from a care perspective following this inspection.

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Michelle Montgomery, manager and Michael Doolin, Director of Operations - North, Runwood Homes, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Nursing Home Regulations (Northern Ireland) 2005 and The Care Standards for Nursing Homes (2015).

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 21 (5) (d) (i) Stated: Second time To be completed by: 17 February 2019	<p>The registered person shall ensure that the system to monitor care staffs' registrations with NISCC is more robust.</p> <p>Ref: 6.2</p> <p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>
Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015	
Area for improvement 1 Ref: Standard 46 Criteria (2) Stated: First time To be completed by: 23 January 2019	<p>The registered person shall ensure that patients' hoists are maintained clean at all times and that patients' own slings are stored appropriately.</p> <p>Ref: 6.2</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>
Area for improvement 2 Ref: Standard 44 Criteria (1) Stated: First time To be completed by: With immediate effect	<p>The registered person shall ensure that storage areas within both identified kitchenettes are maintained clean and hygienic.</p> <p>Ref: 6.2</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>
Area for improvement 3 Ref: Standard 12 Stated: First time To be completed by: 17 February 2019	<p>The registered person shall review the management of mealtimes for patients to ensure adequate gaps between meals.</p> <p>Ref: 6.2</p> <p>Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>

Please ensure this document is completed in full and returned via Web Portal



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

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)