

Inspection Report

22 and 26 June 2023



Parkview Care Home

Type of Service: Nursing Home
Address: Glencairn Road, Forthriver Road,
Belfast, BT13 3PU
Tel no: 028 9039 1393

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider: Beaumont Care Homes Limited	Registered Manager: Ms Codrina Aioanei
Responsible Individual Mrs Ruth Burrows	Date registered: 04/11/2022
Person in charge at the time of inspection: Ms Codrina Aioanei	Number of registered places: 71 A) The Dementia Nursing unit (Carrickfergus unit) is temporarily non-operational. The unit will instead operate a maximum of 10 beds for patients diagnosed with delirium. Admissions to the NH-DE category of care will cease. This condition will be subject to a review after 6 months or earlier at the request of the registered persons. B) There shall be a maximum of 1 named resident receiving nursing care in category NH-MP
Categories of care: Nursing Home (NH) I – Old age not falling within any other category PH – Physical disability other than sensory impairment PH(E) - Physical disability other than sensory impairment – over 65 years TI – Terminally ill DE – Dementia MP – Mental disorder excluding learning disability or dementia.	Number of patients accommodated in the nursing home on the day of this inspection: 42
Brief description of the accommodation/how the service operates: This home is a registered Nursing Home which provides nursing care for up to 71 persons. The home is divided in three units; Carrickfergus which provides care for people with delirium and Strathern and Cambridge units which provide general nursing care. Patients have access to communal lounges, dining rooms and a garden area.	

2.0 Inspection summary

An announced inspection took place on 22 & 26 June 2023, from 10:00am to 13:00pm by and estates and care inspector and on 26 June 2023, from 10:00am to 11:00am by an estates inspector in connection with a variation application.

This inspection focused on the newly adapted sections of the premises associated with the variation application.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

The inspection consisted of checks to related documentation submitted by the provider during the assessment of the variation application, followed by a walk around the home on the date of the inspections. This inspection focussed only on the new and adapted accommodation associated with the variation.

4.0 What people told us about the service

We spoke with the manager during the inspection who highlighted and described the changes made within the home and the intended use of the new facilities for use by patients and staff.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 8 November 2022		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
Area for improvement 1 Ref: Regulation 13 (7) Stated: Third and final time	<p>The registered person shall ensure the infection prevention and control issues identified on inspection are managed to minimise the risk and spread of infection.</p> <p>This area for improvement relates to the following:</p>	Carried forward to the next inspection

	<ul style="list-style-type: none"> • donning and doffing of personal protective equipment • appropriate use of personal protective equipment • staff knowledge and practice regarding hand hygiene. 	
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Area for improvement 2 Ref: Regulation 21 (1) (b) Stated: First time	<p>The registered person shall ensure that a robust system is implemented and maintained in regard to monitoring staff registration with the Northern Ireland Social Care Council (NISCC) at all times.</p>	Carried forward to the next inspection
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Area for improvement 3 Ref: Regulation 13 (1) (b) Stated: First time	<p>The registered person shall ensure that staff deployment at mealtimes is reviewed to ensure appropriate supervision of patients.</p>	Carried forward to the next inspection
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Action required to ensure compliance with the Care Standards for Nursing Homes (April 2015)		Validation of compliance
Area for improvement 1 Ref: Standard 21.1 Stated: First time	<p>The registered person shall ensure wounds are managed in keeping with the assessed needs of the patient. Wound care plans should be in place with assessments completed in keeping with best practice guidance.</p>	Carried forward to the next inspection
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	

Area for improvement 2 Ref: Standard 12 Stated: First time	The registered person shall ensure that records are maintained to evidence the choice of meal offered to patients, that choices are varied, recorded accurately and retained in the home.	Carried forward to the next inspection
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Area for improvement 3 Ref: Standard 6.14 Stated: First time	The registered person shall ensure that any patient that requires oral hygiene has their needs met as planned and accurate records of oral care delivery are maintained.	Carried forward to the next inspection
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.	
Area for improvement 4 Ref: Standard 35.3 Stated: First time	The registered person shall ensure monitoring and governance arrangements in relation to infection prevention and control (IPC) practices are effective in identifying shortfalls in staff practice.	Carried forward to the next inspection
	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this is carried forward to the next inspection.	

5.2 Inspection findings

A physical inspection of the ground floor of the premises was undertaken by the care and estates inspectors, and the following was noted.

The Strathearn Unit contains 18 beds. These bedrooms were found to be well decorated and they continue to exceed the current care standards with regards to area and critical dimensions. Communal space in the form of lounge and dining rooms, along with toilet, shower and bathroom facilities will also exceed the current care standards. Sluicing facilities are provided and a new nurses station has been created within the unit.

The Carrickfergus Unit contains 14 Beds. These bedrooms were also found to be well decorated and will continue to exceed the current care standards with regards to area and critical dimensions. A new staff room has been created within this unit. The communal space provided, along with toilets, shower and bathroom facilities, will also continue to exceed the current care standards.

Documentation presented during the inspection and forwarded following the inspection indicated that the premises and the engineering services and equipment are installed and commissioned in line with relevant legislation, ACOPs and best practice guidance. All relevant risk assessments, including for fire and water safety, had been updated to take account of the alterations and additions made to the home.

Fire safety measures were in place and well managed to ensure patients, staff and visitors to the home were safe. Staff were aware of their training in these areas and how to respond to any concerns or risks.

A current water safety risk assessment was also in place, and suitable control measures have been implemented and continue to be maintained by the provider. All seldom used water outlets are flushed in accordance with the risk assessment by staff within the home.

6.0 Quality Improvement Plan/Areas for Improvement

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

	Regulations	Standards
Total number of Areas for Improvement	3*	4

* the total number of areas for improvement includes three under the regulations and four under the standards that have been carried forward for review at the next inspection.

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Codrina Aioanei, Registered Manager and the senior management team.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005	
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To be completed by: Immediate action required	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next inspection.

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