

# Announced Care Inspection Report 14 October 2016



# Greerville

Type of Service: Nursing Home Address: 192 Newtownbreda Road, Belfast, BT8 6QB Tel no: 028 9064 4244 Inspector: Heather Sleator and Gavin Doherty

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Assurance, Challenge and Improvement in Health and Social Care

### 1.0 Summary

An announced inspection of Greerville Manor Care Centre took place on 14 October 2016 from 13.30 to 16.30 hours.

The purpose of this inspection was to review the application of variation submitted to RQIA RQIA and to determine compliance with:

- The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005
- The Nursing Homes Regulations (Northern Ireland) 2005

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

Details of the Quality Improvement Plan (QIP) within this report were discussed with Ricardo Papa, Registered Manager, as part of the inspection process. 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 18 August 2016.

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.

There were no further actions required to be taken following the most recent inspection.

### 2.0 Service details

<b>Registered organisation/registered person:</b> Four Seasons Health Care D Claire Royston	Registered manager: Ricardo Papa
Person in charge of the home at the time of inspection: Ricardo Papa	Date manager registered: 4 September 2012
Categories of care: NH-A, NH-MP, NH-MP(E), NH-DE	Number of registered places: 60

## 3.0 Methods/processes

The methods/process used in this inspection included the following:

- review of the submitted application pack
- discussion with Lorraine Kirkpatrick, regional manager and Ricardo Papa, registered manager
- assessment of the environment;
- action plan submitted by Four Seasons Healthcare
- review of documentation required by legislation and good practice; and
- evaluation and feedback

## 4.0 The inspection

# 4.1 Review of requirements and recommendations from the most recent inspection dated 22 September 2016

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

# 4.2 Review of requirements and recommendations from the last care inspection dated 18 August 2016

Last care inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 20 (1) (c) (i) and (2) Stated: First time	The registered provider must ensure systems are established to evidence that staff are in receipt of an annual appraisal and regular supervision. Action taken as confirmed during the inspection: Nor reviewed	Not validated as the timescale for compliance had not been reached
Requirement 2 Ref: Regulation 21 Schedule 2 Stated: First time	The registered provider must ensure that the recruitment and selection procedures are completed in accordance with regulatory requirements and employment legislation and all required information is retained by the registered manager. Action taken as confirmed during the inspection: Not reviewed	Not validated as the timescale for compliance had not been reached
Requirement 3 Ref: Regulation 13 (7) Stated: First time	The registered provider must ensure that infection prevention and control procedures are adhered to by staff at all times. Action taken as confirmed during the inspection: Not reviewed	Not validated as the timescale for compliance had not been reached
Requirement 4 Ref: Regulation 13 (1) (b) Stated: First time	The registered provider must ensure that care plans accurately reflect patients' needs. Care plans must be specific and reflect the recommendations of the multidisciplinary team, where applicable. Action taken as confirmed during the inspection: Not reviewed	Not validated as the timescale for compliance had not been reached

Last care inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 44.12 Stated: Second time	The registered provider should inform RQIA, in writing, of the action to be taken and timescale for completion, for the repair/refurbishment of the shower facilities in Millbrook suite. Action taken as confirmed during the inspection: Not reviewed	Not validated as the timescale for compliance had not been reached
Recommendation 2 Ref: Standard 38 Stated: First time	The registered provider should ensure that a robust system is established to regularly monitor the registration of staff with their professional bodies.  Action taken as confirmed during the inspection: Not reviewed	Not validated as the timescale for compliance had not been reached
Recommendation 3 Ref: Standard 18 Stated: First time	The registered provider should ensure staff receive appropriate training regarding the use of restrictive practice. Care plans should accurately reflect the rationale for the use of a restrictive practice, be known to all staff and regularly reviewed. Action taken as confirmed during the inspection: Not reviewed	Not validated as the timescale for compliance had not been reached
Recommendation 4 Ref: Standard 12 Stated: First time	The registered provider should ensure that the approach to meals and mealtimes in Millbrook and Belvoir units are conducive to the needs and views of the patients and in accordance with best practice. Action taken as confirmed during the inspection: Not reviewed	Not validated as the timescale for compliance had not been reached

## 4.3 Inspection findings

An application of variation was submitted to RQIA by Four Seasons Healthcare in respect of Greerville Manor Care Centre due to remedial works being required to Belvoir, Dixon and Millbrook units following a water leak in the home.

Lorraine Kirkpatrick, Regional Manager, and Ricardo Papa, Registered Manager, were available during the inspection and for verbal feedback at the conclusion of the inspection.

During the course of the inspection we discussed operational issues and carried out a general inspection of the home.

The following actions were agreed:

- The lock on the dining room door in Dixon unit will be changed to enhance the security of this area.
- The registered manager will establish daily monitoring checks in each of the three units in respect of health and safety and infection prevention and control procedures.
- The registered manager will liaise with the Environmental Health Officer regarding the catering and dining arrangements both during and after the remedial works.
- The registered manager will confirm the if the activity room in Dixon unit will be used, on a temporary basis, as a patients lounge.
- The registered manager will confirm that consultation had taken place regarding infection prevention and control procedures and the correct instalment of the urinal in Millbrook unit.
- An application of variation must be submitted to RQIA for the change of use/function of a room to a cinema/recreational room for patients.
- The treatment rooms of Millbrook and Belvoir units will be temporary moved to another office in Millbrook unit and made secure.

Ms Kirkpatrick confirmed that patients and relatives have been kept informed of the proposed remedial work and confirmed an updated letter would be sent to relatives on 17 October 2016.

Liaison with the health professionals from the relevant health and social care trusts had occurred and individual support was available for patients, as required.

Confirmation that the agreed actions, as detailed above, have been completed should be submitted to RQIA. A recommendation has been made.

## Areas for improvement

The registered person should submit confirmation to RQIA that all identified actions, as detailed in section 4.3, have been addressed.

Number of requirements	0	Number of recommendations	1

## 5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Ricardo Papa, Registered Manager, as part of the inspection process. 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 via <u>web portal</u> 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		
Recommendations		
Recommendation 1	The registered provider should ensure that confirmation of compliance with the agreed actions is submitted to RQIA.	
Ref: Standard 44	Ref: section 4.3	
Stated: First time		
	Response by registered provider detailing the actions taken:	
<b>To be completed by:</b> 21 November 2016		

\*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 9051 7500

 Fax
 028 9051 7501

 Email
 info@rqia.org.uk

 Web
 www.rqia.org.uk

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