



The Regulation and
Quality Improvement
Authority

Unannounced Secondary Care Inspection

Name of Establishment:	Loughview
Establishment ID No:	1266
Date of Inspection:	10 June 2014
Inspector's Name:	Lorraine O'Donnell
Inspection ID:	17131

The Regulation And Quality Improvement Authority
9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501

General Information

Name of Home:	Loughview
Address:	68 Fortwilliam Park Belfast BT15 4AS
Telephone Number:	028 9077 1930
E mail Address:	loughviewhomes@btconnect.com
Registered Organisation/ Registered Provider:	Loughview Homes Ltd. Mr Michael Curran & Mr Paul Steele
Registered Manager:	Ms Margaret Lakehall
Person in Charge of the Home at the Time of Inspection:	Ms Margaret Lakehall
Categories of Care:	NH-I ,NH-PH ,NH-PH(E) ,NH-TI
Number of Registered Places:	36
Number of Patients Accommodated on Day of Inspection:	28
Scale of Charges (per week):	£580
Date and Type of Previous Inspection:	10 September 2013, Primary unannounced inspection
Date and Time of Inspection:	10 June 2014 10 45 – 13 00 hours
Name of Inspector:	Lorraine O'Donnell

1.0 Introduction

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect nursing homes. A minimum of two inspections per year are required.

This is a report of an inspection to assess the quality of services being provided. The report details the extent to which the standards measured during inspection are being met.

1.1 Purpose of the Inspection

The purpose of this inspection was to consider whether the service provided to patients was in accordance with their assessed needs and preferences and was in compliance with legislative requirements, minimum standards and other good practice indicators. This was achieved through a process of analysis and evaluation of available evidence.

The Regulation and Quality Improvement Authority aims to use inspection to support providers in improving the quality of services, rather than only seeking compliance with regulations and standards. For this reason, annual inspection involves in-depth examination of a limited number of aspects of service provision, rather than a less detailed inspection of all aspects of the service.

The aims of the inspection were to examine the policies, practices and monitoring arrangements for the provision of nursing homes, and to determine the Provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Nursing Homes Regulations (Northern Ireland) 2005
- The Department of Health, Social Services and Public Safety's (DHSSPS) Nursing Homes Minimum Standards (2008)
- Other published standards which guide best practice may also be referenced during the Inspection process

1.2 Methods/Process

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

- Discussion with Registered Provider
- Discussion with the Registered Nurse Manager
- Discussion with staff
- Discussion with patients individually and to others in groups
- Review of a sample of staff duty rotas
- Evaluation and feedback
- Observation during a tour of the premises

1.3 Inspection Focus

The inspection sought to establish the level of compliance being achieved with respect to the level of compliance achieved with requirements and recommendations raised following the previous inspection visit.

The inspector has rated the home's Compliance Level against each criterion and also against each standard.

The table below sets out the definitions that RQIA has used to categorise the service's performance:

Guidance - Compliance statements		
Compliance statement	Definition	Resulting Action in Inspection Report
0 - Not applicable		A reason must be clearly stated in the assessment contained within the inspection report
1 - Unlikely to become compliant		A reason must be clearly stated in the assessment contained within the inspection report
2 - Not compliant	Compliance could not be demonstrated by the date of the inspection.	In most situations this will result in a requirement or recommendation being made within the inspection report
3 - Moving towards compliance	Compliance could not be demonstrated by the date of the inspection. However, the service could demonstrate a convincing plan for full compliance by the end of the Inspection year.	In most situations this will result in a requirement or recommendation being made within the inspection report
4 - Substantially Compliant	Arrangements for compliance were demonstrated during the inspection. However, appropriate systems for regular monitoring, review and revision are not yet in place.	In most situations this will result in a recommendation, or in some circumstances a requirement, being made within the inspection report
5 - Compliant	Arrangements for compliance were demonstrated during the inspection. There are appropriate systems in place for regular monitoring, review and any necessary revisions to be undertaken.	In most situations this will result in an area of good practice being identified and comment being made within the inspection report.

2.0 Profile of Service

Loughview Private Nursing Home was registered in 1992 when the home was extended to care for 36 patients. The home is situated on the corner of Fortwilliam Road and Lansdowne Road, Belfast and is convenient to some local shops.

Car parking space is provided to the side and front of the home but can be limited at times depending on staff cars and relatives visiting. There is a garden to the front of the home and a small area to the side shaded by trees. The home has two main lounge areas and a small first floor room which can be used either by patients or their relatives. Downstairs some of the original features of the house have been maintained which helps to give the home its character

The home is registered to provide care under the following categories:

Nursing Care

I	Old age not falling into any other category
PH	Physical disability other than sensory impairment under pension age
PH (E)	Physical disability other than sensory impairment over pension age
TI	Terminally ill

3.0 Summary

This summary provides an overview of the services examined during an unannounced secondary care inspection to Loughview. The inspection was undertaken by Lorraine O'Donnell on 10 June 2014 from 10:45 to 13:00 hours.

The inspector was welcomed into the home by Ms Margaret Lakehall, registered manager who was available throughout the inspection. Verbal feedback of the issues identified during the inspection was given to Ms Lakehall at the conclusion of the inspection.

During the course of the inspection, the inspector met with patients and staff. The inspector observed care practices, examined a selection of records, issued patient, staff and representative questionnaires and carried out a general inspection of the nursing home environment as part of the inspection process.

While inspecting the home the inspector was informed the only registered nurse on duty from 8am to 8pm, was the registered manager. The inspector examined the duty rotas for a three week period from 26 May 2014 to 15 June 2014, which evidenced a number of periods during which only one registered nurse was on duty. The inspector issued an Urgent Action Notice to the registered manager.

The inspector also examined the emergency equipment and found the supply of emergency airways to be out of date; the daily checking sheet used did not prompt staff to check the expiry dates on equipment. The registered manager agreed to add this to the checking sheet.

As a result of the previous inspection conducted on 10 September 2013, one requirement was issued.

This was reviewed during this inspection. The inspector evidenced that the requirement was not complied with. Details can be viewed in the section immediately following this summary.

Conclusion

The inspector can confirm that at the time of this inspection the delivery of care to patients was evidenced to be of a good standard.

The home's general environment was well maintained and patients were observed to be treated with dignity and respect. However, areas for improvement were identified in relation to levels of staff and the daily checks of emergency equipment, to ensure all equipment remains in working order.

Therefore, one requirement was restated. One recommendation is made. This requirement and recommendation are detailed throughout the report and in the quality improvement plan (QIP).

The inspector would like to thank the patients, registered manager, registered nurses and staff for their assistance and co-operation throughout the inspection process.

4.0 Follow-Up on Previous Issues

No.	Regulation Ref.	Requirements	Action Taken - As Confirmed During This Inspection	Inspector's Validation Of Compliance
1	20 (1) (a)	<p>The registered person shall, having regard to the size of the nursing home, the statement of purpose and the number and needs of patients –</p> <p>Ensure that at all times suitably qualified, competent and experienced persons are working at the nursing home in such numbers as are appropriate for the health and welfare of patients.</p>	<p>The inspector found only one registered nurse on duty for twenty eight patients on the day of inspection. The inspector examined the rotas for a three week period from 26 May 2014 to 15 June 2014. The inspector found a number of days when there was only one registered nurse on duty and on occasions this nurse was the registered manager. The registered manager informed the inspector the home had recruited a registered nurse who had after a short period of commencing employment had resigned; therefore the recruitment process had to recommence.</p>	Not compliant

4.1 Additional Areas Examined

Environment

The inspector undertook an inspection of the home and examined a number of patients' bedrooms, lounges, bathrooms/toilets and the dining room. The home was found to be clean, tidy and free from mal odours.

Care Practices

The inspector observed the interactions between staff and patients throughout the home which were seen to be respectful and considerate of the patient abilities and well-being.

Staff Rota

The inspector reviewed the staff duty rotas for the period from 26 May 2014 to 15 June 2014. This review evidenced a deficit in the staff to patient ratio, on a number of days. This was discussed with the registered manager and an urgent action notice was issued.

Quality Improvement Plan

The details of the Quality Improvement Plan appended to this report were discussed with Ms Margaret Lakehall, as part of the inspection process.

The timescales for completion commence from the date of inspection.

The registered provider/manager is required to record comments on the Quality Improvement Plan.

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.

Enquiries relating to this report should be addressed to:

Lorraine O'Donnell
The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT

Lorraine O'Donnell

Lorraine O'Donnell
Inspector/Quality Reviewer

Date

9/10/14



The Regulation and
Quality Improvement
Authority

Quality Improvement Plan
Unannounced Secondary Inspection

Loughview

10 June 2014



The areas where the service needs to improve, as identified during this inspection visit, are detailed in the inspection report and Quality Improvement Plan.

The specific actions set out in the Quality Improvement Plan were discussed with Ms Margaret Lakehall, during the inspection visit.

Any matters that require completion within 28 days of the inspection visit have also been set out in separate correspondence to the registered persons.

Registered providers/managers should note that failure to comply with regulations may lead to further enforcement and/or prosecution action as set out in The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.

It is the responsibility of the registered provider/manager to ensure that all requirements and recommendations contained within the Quality Improvement Plan 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.

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 (NI) 2005					
No.	Regulation Reference	Requirements	Number of Times Stated	Details Of Action Taken By Registered Person(S)	Timescale
1.	20(1)(a)	<p>The registered person shall, having regard to the size of the nursing home, the statement of purpose and the number and needs of patients –</p> <p>Ensure that at all times suitably qualified, competent and experienced persons are working at the nursing home in such numbers as are appropriate for the health and welfare of patients.</p> <p>Ref section 3.0</p>	Two	A full time 36 hour Staff Nurse has been recruited.	Immediate from date of inspection

Recommendations

These recommendations are based on the Nursing Homes Minimum Standards (2008), research or recognised sources. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

No.	Minimum Standard Reference	Recommendations	Number Of Times Stated	Details Of Action Taken By Registered Person(S)	Timescale
1.	20.2	<p>Where emergency resuscitation equipment is provided, it is checked daily and restocked to ensure that all equipment remains in working order.</p> <p>Ref: Additional Areas 4.1</p>	One	<p>Resuscitation equipment is checked nightly. Checking expiry dates of equipment has been added to checklist.</p>	Immediate from date of inspection

The registered provider / manager is required to detail the action taken, or to be taken, in response to the issue(s) raised in the Quality Improvement Plan. The Quality Improvement Plan is then to be signed below by the registered provider and registered manager and returned to:

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

Signed: *MW*

Signed: *Margaret Lakehal*

Name: *MICHAEL CURRAN*
 Registered Provider

Name: *Margaret Lakehal*
 Registered Manager

Date *17/10/14*

Date *16/10/14*

QIP Position Based on Comments from Registered Persons	Yes	Inspector	Date
Response assessed by inspector as acceptable	<i>YES</i>	<i>J Scanlon</i>	<i>5/11/14</i>
Further information requested from provider			