



Oakridge Clinic
RQIA ID: 1276
14 Magheraknock Road
Ballynahinch
BT24 8TJ

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**Announced Care Inspection
of
Oakridge Clinic**

16 February 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 announced care inspection took place on 16 February 2016 from 10.15 to 15.15.

Overall on the day of the inspection, the care in the home was found to be safe, effective and compassionate. The inspection outcomes found no areas of concern. A Quality Improvement Plan (QIP) is not included in this report.

For the purposes of this report, the term 'patients' will be used to describe those living in Oakridge Clinic which provides both nursing and residential care.

1.1 Actions/Enforcement Taken Following the Last Care Inspection

Other than those actions detailed in the previous QIPs there were no further actions required to be taken following the last care inspection on 15 June 2016.

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	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Spa Nursing Homes Christopher Arnold	Registered Manager: Jessica Dezzutto (Acting)
Person in Charge of the Home at the Time of Inspection: Linda Kelly Operation Support Manager	Date Manager Registered: Jessica Dezzutto is currently acting manager for Oakridge Clinic. A new home manager, Kelly Kilpatrick (no application received) has recently been appointed and will commence on 7 March 2016.
Categories of Care: NH-I, NH-PH, NH-PH(E), NH-TI, NH-DE	Number of Registered Places: 58
Number of Patients Accommodated on Day of Inspection: 40	Weekly Tariff at Time of Inspection: £593 - £616

3. Inspection Focus

The focus of this inspection was to assess the day to day operations of the home since registration on 25 January 2016.

4. Methods/Process

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

- discussion with operation support manager
- discussion with patients
- discussion with staff
- review of care records
- observation during an inspection of the premises
- evaluation and feedback

Prior to the inspection the following records were analysed:

- incident and accident notifications
- the previous care inspection reports

During the inspection, care delivery / care practices were observed and a review of the general environment of the home was undertaken. The inspector met with 18 patients, two patient representatives, three registered nursing staff, five care assistants and two ancillary staff members.

The following records were reviewed during the inspection:

- complaints records
- accidents and incidents
- staffing arrangements
- two patient care records

Following the inspection the statement of purpose and the patients guide was requested and sent to RQIA.

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspections

The previous inspection of the home was an unannounced care inspection dated 10 November 2016. The completed QIP was returned and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the Last Care Inspections

Requirements and recommendations from the previous care inspections were not reviewed during this inspection and will be reviewed in an identified follow up inspection.

5.3 Additional Areas Examined

5.3.1 Consultation with Patients, Representatives and Staff

During the inspection process, 18 patients individually and in small groups, two patient representatives, five care staff, two ancillary staff member and three registered nursing staff were consulted with to ascertain their personal view of life in Oakridge Clinic following the takeover by Spa Nursing Homes Ltd on 25 January 2016.

Some patients' comments received are detailed below:

'We near had a party. The care is brilliant. Couldn't be better.'

'I was very upset when I was told I had to move but then very happy when I was told we didn't have to move.'

'It doesn't affect me much. Home's not too bad.'

'The home is very nice.'

Two patient representatives consulted were positive in their experience of Chestnut Lodge.

Some representative comments received are detailed below:

'We are made to feel very welcome.'

'The staff are very friendly.'

Some staff comments received are detailed below:

'Not a big difference. Same staff and residents. Still like a family. There's new paperwork. We still have the same uniforms.'

'We are still working the same way we did under Four Seasons. There is some new charts and new policies.'

'I'm very happy. The Sister showed us new charts before they were implemented. We had meetings before and after the takeover.'

'Everything is the same. I was worried before but happy and settled now. Very happy with the takeover. Think we're better with smaller company.'

'It's good and they are positive. They work with us instead of overpowering us. Much hasn't changed yet.'

'So far so good. We got an extra staff member when we asked for it. The mealtimes are brought forward. I felt we were being listened too. I'm impressed.'

5.3.2 Management Arrangements

Currently the home does not have a registered manager in post. A manager has been appointed and is due to commence on 7 March 2016. In the interim an acting manager has been nominated and has been supported by the responsible person, Christopher Arnold and the Operation Support Manager, Linda Kelly. Once the new manager is in post they should submit an application of registration to RQIA. A regional manager for Spa Nursing Homes Ltd. has also been appointed and due to commence on 7 March 2016.

5.3.3 Quality Assurance

Quality assurance in the home was discussed with the operation support manager. The following was confirmed through discussion. The Spa Nursing Homes Ltd. have developed their own audit tools. Areas such as Infection Control and Care Records have been identified for monthly audits to be completed to ensure compliance of legislation and best practice. The dependency levels of patients in the home will be reviewed weekly and recorded monthly. Regulation 29 monthly monitoring visits will be carried out by the operation support manager. A daily walk around the home to identify any issues will be carried out by the acting manager in the absence of a registered manager.

5.3.4 Policies and Procedures

Spa Nursing Home Ltd. policies and procedures had been printed and made accessible to staff in a central location. The operation support manager confirmed that policies and procedures were currently under review. Policies, which management considered as requiring staffs immediate awareness of, were sent to staff and/or displayed on staff noticeboards. Some policies required evidence of staff signature and date read such as the fire policy.

5.3.5 Communication

A 'relatives' noticeboard was maintained at the entrance to the home. Information relating to the takeover was included on the board and details of the new regional and home manager was also displayed. Similar notices were on display throughout the home. The registered person had met with relatives on 13 January 2016. The operation support manager took the opportunity to meet with relatives during a planned Valentines tea party on 14 February 2016.

The registered person also met with all staff on 13 January 2016. Two further meetings between the registered person and registered nurses took place on 1 February and 12 February 2016. Further staff meetings are currently being arranged to meet with members of the Human resources team.

Spa Nursing Home memorandums are also on display in selected areas to inform staff of information on staff handovers, staff meals, out of hours cover, weekly payments, 1st payment, timesheets and attendance.

5.3.6 Documentation

Almost all documentation used in the home had been implemented by Four Seasons Health Care. Spa Nursing Homes have implemented their repositioning charts and fluid intake charts. Spa Nursing Home documentation will gradually replace Four Seasons Health Care documentation as staff are made familiar with the documents. Spa Nursing Home accident and incident books are used in the home and computer access has been changed to Spa Nursing Homes central server.

5.3.7 Recruitment

The home currently has vacancies for four full time registered nurses and four full time care assistants. This was discussed with the operation support manager who confirmed due to the high numbers of vacancies, a number of beds within the home have been left empty until suitable safe staffing is available. The vacant posts have been advertised through jobs online, through nursing agencies, through local newspapers and through information on a banner on display outside the nursing home. Job interviews had been planned for care assistants in the home on 18 February 2016.

5.3.8 Activities

Discussion with the activities therapist confirmed they had spent a day in one of the Spa Nursing Homes sister homes sharing ideas with their activities person. A monthly newsletter is created and left at the front entrance to the home for relatives to take home and read. The newsletter contains content of activities from the previous month and planned activities for the upcoming month. An activities board is maintained within the home to identify upcoming activities.

5.3.9 Environment

Areas for improvement have been identified by the operation support manager. These areas include refurbishment, storage within the home and boilers within the home. The responsible person and the company's estates manager have planned to walk around the home on 16 February 2016 to identify areas for improvement. The homes maintenance person is continuing an ongoing repainting programme.

5.3.10 Training

Copies of staff induction, preceptorship and competency and capability of nurse in charge were available for review on the day of inspection. Staff supervisions and review of training needs had not commenced. The new manager is due to start on 7 March 2016 and it was anticipated, with support, the supervisions and reviews would commence from then.

Discussion with the operation support manager confirmed that normally Spa Nursing Home management would select staff to attend training. Training is arranged through the head office and training registers are maintained in the home. Outside trainers are normally brought into the organisation to facilitate identified training needs and in-house trainers normally facilitate mandatory training. All training provided by the Trust is utilised where possible.

On the day of inspection two training opportunities were advertised within a poster on a noticeboard and staff had indicated their interest in attending by adding their names to the posters.

5.3.11 Complaints

No complaints had been received from the date of the takeover. The Spa Nursing Homes complaints procedure was on display at the reception desk. Copies of the complaints procedure are included within the Spa Nursing Homes welcome pack for new admissions.

5.3.12 Uniforms

Domestics and kitchen staff were wearing Spa Nursing Home uniforms on the day of inspection. However, registered nursing staff and care assistants were wearing Four Seasons Health Care uniforms. This was discussed with the operation support manager and it was confirmed that Spa Nursing Home staff uniforms had now arrived to the home. The plan was for these uniforms to be issued to all available staff within a week.

Areas for Improvement

There were no identified areas for improvement.

Number of Requirements:	0	Number of Recommendations:	0
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6. No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager	K.Kilpatrick	Date Completed	13/4/16
Registered Person	C.Arnold	Date Approved	13/4/16
RQIA Inspector Assessing Response	Dermot Walsh	Date Approved	15/4/16

Please provide any additional comments or observations you may wish to make below:

Please ensure this document is completed in full and returned to Nursing.Team@rqia.org.uk 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 within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations.