

# Unannounced Follow Up Care Inspection Report 27 February 2018



## Richmond

**Type of Service: Nursing Home**  
**Address: 19 Seafront Road, Cultra, BT18 0BB**  
**Tel No: 028 9042 6558**  
**Inspector: Lyn Buckley**

[www.rqia.org.uk](http://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 nursing home registered to provide nursing care for up to 35 persons.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Richmond Nursing Home Ltd  <b>Responsible Individual(s):</b> Sharon Ruth Radcliffe-Bryans	<b>Registered Manager:</b> Sharon Ruth Radcliffe-Bryans
<b>Person in charge at the time of inspection:</b> Nursing Sister Alex Coughlin	<b>Date manager registered:</b> 1 April 2005
<b>Categories of care:</b> 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.	<b>Number of registered places:</b> Total number of registered beds: 35

### 4.0 Inspection summary

An unannounced inspection took place on 27 February 2018 from 10:00 to 12:12 hours.

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.

RQIA received intelligence on the 26 February 2018 regarding recruitment practices in Richmond and specifically the receipt of satisfactory AccessNI checks prior to staff commencing work in the home.

During this inspection we reviewed four staff personnel files. It was evidenced that two staff had commenced working in the home prior to the receipt of satisfactory AccessNI checks and in addition only one reference had been received in respect of one of the four staff. The lack of safeguards to protect and minimise risk to patients through robust and effective recruitment practices and the potential impact on patients was concerning.

The inspection findings were discussed with RQIA senior managers and as a consequence, it was agreed that we would meet with the registered provider/manager. A meeting was arranged with the intention of issuing a failure to comply notice regarding safe, robust and effective recruitment practices.

During this meeting the registered provider/manager acknowledged the failings identified and provided an action plan to address the identified concerns. Based on the information and assurances provided regarding the management and governance arrangements in respect of recruitment practices, RQIA made a decision not to serve the failure to comply notice.

However, RQIA advised that should any further breaches of regulations, regarding the safe and effective recruitment of staff be evidenced, then this breach would be reviewed accordingly.

In addition two areas for improvement were identified in relation to management of staff references and the availability of records for 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
<b>Total number of areas for improvement</b>	*5	1

\*The total number of areas for improvement includes two areas for improvement under regulation and one under the care standards carried forward to the next care inspection.

Details of the Quality Improvement Plan (QIP) were discussed with Alex Coughlin, nursing sister as part of the inspection process. The timescales for completion commence from the date of inspection.

Enforcement action resulted from the findings of this inspection.

The enforcement policies and procedures are available on the RQIA website.

[https://www.rgia.org.uk/who-we-are/corporate-documents-\(1\)/rgia-policies-and-procedures/](https://www.rgia.org.uk/who-we-are/corporate-documents-(1)/rgia-policies-and-procedures/)

#### 4.2 Action/enforcement taken following the most recent inspection

The most recent inspection of the home was an unannounced medicines management inspection undertaken on 30 November 2017. Other than those actions detailed in the QIP no further actions were required to be taken following this 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
- the returned QIP from the previous care inspection
- the previous care inspection report.

During the inspection the inspector met with two staff.

The following records were examined during the inspection:

- four staff recruitment records.

Only one of the areas for improvement identified at the last care inspection was reviewed as part of this inspection. The remaining areas for improvement are carried forward to the next care inspection.

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 30 November 2017

The most recent inspection of the home was an unannounced medicines management inspection. The completed QIP was returned and approved by the pharmacist inspector.

This QIP will be validated by the pharmacist inspector at the next medicines management inspection.

### 6.2 Review of areas for improvement from the last care inspection dated 3 April 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance
<b>Area for improvement 1</b> <b>Ref:</b> Regulation 27 (4) <b>Stated:</b> Second time	The registered person must ensure that fire safety practices are adhered to at all times and that compliance monitoring is in place.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> RQIA estates team undertook and unannounced visit to the home on 13 December 2017. Compliance with this area for improvement was met.  During this inspection we also reviewed the ground floor fire exits and escape route which evidenced that compliance with this area for improvement was sustained and embedded into practice.	

<b>Area for improvement 2</b> <b>Ref:</b> Regulation 15 (2) <b>Stated:</b> First time	<p>The registered provider must ensure that risk assessments and associated care plans are regularly reviewed and revised at any time when it is necessary to do so having regard to any change of circumstances.</p> <p><b>Action taken as confirmed during the inspection:</b>  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>	<b>Carried forward to the next care inspection</b>
<b>Area for improvement 3</b> <b>Ref:</b> Regulation 30 <b>Stated:</b> First time	<p>The registered provider must ensure that accidents/incidents occurring in the home are notified to RQIA in accordance with The Nursing Homes Regulations (Northern Ireland) 2005 – regulation 30.</p> <p>Accidents/incidents dating back to 1 June 2016 should be reviewed and retrospective notifications submitted as required.</p> <p>Refer to RQIA’s guidance; A Statutory Notification of Incidents and Deaths: Guidance for Registered Providers and Managers of Regulated Services, July 2015, which is available on the web site <a href="http://www.rqia.org.uk">www.rqia.org.uk</a></p> <p><b>Action taken as confirmed during the inspection:</b>  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>	<b>Carried forward to the next care inspection</b>
<b>Action required to ensure compliance with The DHSSPS Care Standards for Nursing Homes 2015</b>		<b>Validation of compliance</b>
<b>Area for improvement 1</b> <b>Ref:</b> Standard 42 <b>Stated:</b> First time	<p>The registered provider should ensure that staffing levels are reviewed from 18:00 hours to ensure patients’ needs are met.</p> <p><b>Action taken as confirmed during the inspection:</b>  Action required to ensure compliance with this regulation was not reviewed as part of this</p>	<b>Carried forward to the next care inspection</b>

	inspection and this will be carried forward to the next care inspection.	
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This inspection focused solely on issues previously outlined in section 4.0. Only one of the areas for improvement from the last care inspection on 3 April 2017 was reviewed as part of the inspection. The remaining areas for improvement are carried forward to the next care inspection.

**6.3 Inspection findings**

**6.3.1 Recruitment**

As stated previously in section 4.0 we reviewed four staff recruitment files and the registered provider/manager was required to attend a meeting with the intention to issue a failure to comply regarding safe, robust and effective recruitment practices. As discussed RQIA did not issue the failure to comply notice based on the assurances provided at the meeting by the registered provider/manager.

The review of the recruitment files evidenced that two of the four staff had been employed to work in the home prior to the receipt of a satisfactory AccessNI check. An area for improvement under regulation was made.

In addition we evidenced that the requirement for two written references was not adhered to as only one of the four files examined had one reference received and there was no evidence that the registered provider/manager had determined the suitability of the persons to work in the home. The administrator did confirm that the references were being ‘chased up’ but there was no written evidence to support this or that an interview had taken place. An area for improvement under the regulations was made.

**Areas for improvement**

Two areas for improvement were made regarding recruitment practices.

	Regulations	Standards
<b>Total number of areas for improvement</b>	2	0

**6.3.2 Records available for inspection.**

We asked to review reports of monthly visits undertaken in accordance with regulation 29 of The Nursing Homes Regulations (Northern Ireland) 2005 also referred to as quality monitoring reports. The nurse in charge of the home in the absence of the manager was unable to access these records. An area for improvement was made under the regulations.

**Areas for improvement**

An area for improvement was made under regulations regarding the availability of records for inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	1	0

**7.0 Quality improvement plan**

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with the nursing sister, Alex Coughlin, 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 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 DHSSPS 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.



<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulation 15 (2)  <b>Stated:</b> First time  <b>To be completed by:</b> 15 May 2017	<p><b>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.</b></p> <p>The registered provider must ensure that risk assessments and associated care plans are regularly reviewed and revised at any time when it is necessary to do so having regard to any change of circumstances.</p> <p>Ref: Section 6.2</p> <p><b>Response by registered person detailing the actions taken:</b>            This was actioned as follows prior to 15 May 2017:            All RN staff reminded to update risk assessments as change occurs as well as monthly updates. This is monitored in monthly Care Plan Audits.</p>
<b>Area for improvement 2</b>  <b>Ref:</b> Regulation 30  <b>Stated:</b> First time  <b>To be completed by:</b> 15 May 2017	<p><b>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.</b></p> <p>The registered provider must ensure that accidents/incidents occurring in the home are notified to RQIA in accordance with The Nursing Homes Regulations (Northern Ireland) 2005 – regulation 30.</p> <p>Accidents/incidents dating back to 1 June 2016 should be reviewed and retrospective notifications submitted as required.</p> <p>Refer to RQIA’s guidance; A Statutory Notification of Incidents and Deaths: Guidance for Registered Providers and Managers of Regulated Services, July 2015, which is available on the web site <a href="http://www.rqia.org.uk">www.rqia.org.uk</a></p> <p>Ref: Section 6.2</p> <p><b>Response by registered person detailing the actions taken:</b>            This was actioned as followed prior to 15 May 2017:            All retrospective notifications have been submitted to RQIA and any accidents/incidents since date of inspection also submitted. RN staff aware of this.</p>
<b>Area for improvement 3</b>  <b>Ref:</b> Regulation 21(1)(a) and (b)	<p>The registered person shall ensure that a satisfactory AccessNI check is in place prior to the person commencing work in the nursing home</p> <p>Ref: Section 4.0 and 6.3.1</p>

<p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate action required.</p>	<p><b>Response by registered person detailing the actions taken:</b> All current staff have AccessNI checks in place prior to commencing employment. This is evidenced on the new recruitment template as provided to RQIA on 15 March 2018.</p>
<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Regulation 21</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate action required.</p>	<p>The registered person shall ensure that were a previous employer will not provide written references; there is evidence maintained to demonstrate all reasonable steps taken to secure an employment reference prior to the person commencing work in the nursing home.</p> <p>In addition the registered person must demonstrate that they have sought to determine the suitability of person applying to work in the nursing home. For example, the recording of an interview process.</p> <p>Ref: Section 6.3.1</p> <p><b>Response by registered person detailing the actions taken:</b> All efforts are made to obtain written references for new staff. This is evidenced on the new recruitment template as provided to RQIA on 15 March 2018.</p>
<p><b>Area for improvement 5</b></p> <p><b>Ref:</b> Regulation 19 (2)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> Immediate action required.</p>	<p>The registered person shall ensure that records as required are available for inspection. For example – reports of visits undertaken in accordance with regulation 29.</p> <p>Arrangements to access records in the absence of the registered person should be put into place.</p> <p>Ref: Section 6.3.2</p> <p><b>Response by registered person detailing the actions taken:</b> Regulation 29 reports are now accessible and available for inspection. Appropriate arrangements are in place to allow access to above in the absence of the registered manager.</p>
<p><b>Action required to ensure compliance with The Care Standards for Nursing Homes 2015</b></p>	
<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Standard 42</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 15 May 2017</p>	<p><b>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.</b></p> <p>The registered provider should ensure that staffing levels are reviewed from 18:00 hours to ensure patients' needs are met.</p> <p>Ref: Section 6.2</p>
	<p><b>Response by registered person detailing the actions taken:</b></p>

	<p>This was actioned as followed prior to 15 May 2017: Staffing levels are continually reviewed to ensure resident's needs are met.</p>
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***\*Please ensure this document is completed in full and returned via Web Portal\****



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