



Unannounced Follow-up Care Inspection Report 7 January 2019



Ravenhill

Type of Service: Nursing Home (NH)
Address: 79-81 Shore Road, Greenisland BT38 8TZ
Tel No: 02890862169
Inspector: Lyn Buckley

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 registered nursing home which is registered to provide nursing care and residential care for up to 38 persons.

3.0 Service details

Organisation/Registered Provider: Ravenhill Private Nursing Home Responsible Individual: William Trevor Gage	Registered Manager: Isabella Christine Kim
Person in charge at the time of inspection: Isabella Christine Kim – registered manager	Date manager registered: 1 November 2007
Categories of care: Nursing Home (NH) I – Old age not falling within any other category. PH – Physical disability other than sensory impairment.	Number of registered places: 38 There shall be a maximum of 1 named resident receiving residential care (RC) in category RC-I.

4.0 Inspection summary

An unannounced inspection took place on 7 January 2019 from 10.05 to 12.45 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.

The inspection focused on assessing the level of the progress and/or compliance with the areas for improvement identified during the last care inspection on 17 September 2018 and discussed at the serious concerns meeting of 26 September 2018.

We can confirm that all areas of improvement identified during the September 2018 inspection have been met.

There were no areas for improvement identified during this 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.

The term 'patient' is used to describe those living in Ravenhill which provides both nursing and residential care.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Christine Kim, registered manager, as part of the inspection process and can be found in the main body of the report.

4.2 Action/enforcement taken following the most recent inspection

The most recent inspection of the home was an unannounced care inspection undertaken on 17 September 2018. As a result of this inspection, RQIA was concerned that some aspects of the quality of care and service delivery within Ravenhill were below the standard expected. A decision was taken to invite the registered persons and the home's owner to a serious concerns meeting in relation to infection prevention and control measures and practices and the recording of care and treatment in relation to pressure area care.

This meeting took place at RQIA on 26 September 2018. At this meeting RQIA were provided with appropriate assurances that all areas of improvement identified would be addressed. A decision was made that RQIA would take no further enforcement action at this time; however an unannounced inspection was scheduled in the near future to ensure that the assurances given were fully actioned and that the home had returned to compliance.

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 four patients and two staff. Questionnaires were also left in the home to obtain feedback from patients and patients' representatives. Ten patients' questionnaires and ten patients' relatives/representatives questionnaires were left for distribution. A poster was provided for staff inviting them to provide feedback to RQIA on-line. The inspector also provided the registered manager with 'Have we missed you' cards which were to be placed in a prominent position to allow patients and their relatives/representatives, who were not present on the day of inspection, the opportunity to give feedback to RQIA regarding the quality of service provision.

A poster informing visitors to the home that an inspection was being conducted was displayed on the front door.

The following records were examined during the inspection:

- governance records pertaining to:
 - infection prevention and control measures
 - care records
 - management of wounds

- management of falls
- management of bedrails or other equipment used to maintain patient safety
- three patients' care records
- four patients' repositioning charts
- a sample of accident records
- a sample of monthly quality monitoring reports, from 1 October 2018, undertaken in accordance with Regulation 29 of The Nursing Homes Regulations (Northern Ireland) 2005

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met, partially met, or not met.

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 17 September 2018

The most recent inspection of the home was an unannounced care inspection conducted on 17 September 2018. The completed QIP was returned and approved by the care inspector. This QIP was validated by the care inspector during this inspection.

6.2 Review of areas for improvement from the last care inspection dated 17 September 2018

Areas for improvement from the last care inspection		
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	The registered provider must ensure that suitable arrangements to minimise the risk of infection and toxic conditions and the spread of infections between patients and staff are in place and effective.	Met
	This includes the implementation of robust monitoring processes and evidence of actions taken, by the registered persons to address identified deficits.	
	Action taken as confirmed during the inspection: Review of governance records pertaining to infection prevention and control measures,	

	<p>discussion with the registered manager and review of the home's environment evidenced that this area for improvement had been met.</p> <p>Monitoring arrangements were in place to ensure that the improvements made were sustained.</p>	
Area for improvement 2 Ref: Regulation 17 Stated: Second time	<p>The registered person shall ensure that a robust governance system is in place to monitor and report on the delivery of nursing and other services provided, in accordance with legislative requirements, DHSSPS minimum standards and other related standards for nursing homes.</p> <p>Action taken as confirmed during the inspection: Review of governance records and discussion with the registered manager regarding monitoring arrangements to sustain the improvements made; evidenced that this area for improvement had been met.</p>	Met
Area for improvement 3 Ref: Regulation 14 (2) (a) (b) and (c) Stated: First time	<p>The registered person shall ensure that cleaning chemicals are handled and stored in accordance with COSHH regulations and product guidance.</p> <p>Action taken as confirmed during the inspection: Observations of the home's environment which included review of the home's sluice rooms and bathrooms; and discussion with the registered manager evidenced that this area for improvement had been met.</p> <p>Monitoring arrangements were in place to ensure that the improvements made were sustained.</p>	Met
Area for improvement 4 Ref: Regulation 13 (1) Stated: First time	<p>The registered person shall ensure that patient care records, including assessments, care plans and supplementary care charts:</p> <ul style="list-style-type: none"> • reflect the assessed needs of the patient • are kept under review • are evaluated effectively • are accurately and consistently recorded to reflect the delivery of care, as prescribed • evidence the action taken by nursing staff 	Met

	<p>when deficits are identified</p> <ul style="list-style-type: none"> are dated and timed consistently 	
	<p>Action taken as confirmed during the inspection:</p> <p>Review of governance records pertaining to care records, discussion with the registered manager and review of three patients' care records and four patients' repositioning records evidenced that this area for improvement had been met.</p> <p>Monitoring arrangements were in place to ensure that the improvements made were sustained.</p>	
<p>Area for improvement 5</p> <p>Ref: Regulation 29</p> <p>Stated: First time</p>	<p>The registered person shall ensure that the report undertaken in accordance with Regulation 29 reflects the conduct of the nursing home and identifies clearly when and how deficits in the quality of nursing or other services provided are to be met and the action taken if they are not.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>Review of reports from 1 October 2018 and discussion with the registered manager evidenced that the content of the report had been reviewed. The records reviewed evidenced that areas requiring improvement were identified and the actions taken by either the registered manager and/or the responsible individual to address these identified actions were recorded.</p>	
Action required to ensure compliance with The Care Standards for Nursing Homes (2015)		Validation of compliance
<p>Area for improvement 1</p> <p>Ref: Standard 22.9</p> <p>Stated: First time</p>	<p>The registered person shall ensure that a post falls analysis is completed for any patient who have fallen. This should include evidence that the patient's risk assessments and care plans, pertaining to the management of falls, are reviewed.</p>	Met
	<p>Action taken as confirmed during the inspection:</p> <p>Review of three patients' records, governance records pertaining to falls and discussion with the registered manager and nursing staff; evidenced that this area for improvement had been met.</p>	

6.3 Inspection findings

6.3.1 Consultation

We provided the registered manager with 10 patient and 10 relatives' questionnaires for distribution after the inspection; five questionnaires were returned from relatives within the timescale specified. All five indicated that they were very satisfied that the care delivered to their loved ones was safe, effective and compassionate; and that the service was well led. No additional comments were made.

Four questionnaires were also returned which did not indicate if they were from patients or relatives. However, all respondents indicated that they were very satisfied. No additional comments were recorded.

We provided a poster inviting staff to provide us with their views and opinions of the home and the care delivered, on-line; no responses were received before the issue of this report.

Any comments from patients, patient relatives/representatives in returned questionnaires received after the issuing of this report will be shared with the registered manager for their information and action as required.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included as part of this inspection report.



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

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
 [@RQIANews](https://twitter.com/RQIANews)

Assurance, Challenge and Improvement in Health and Social Care