

Unannounced Care Inspection Report 24 April 2018



Ladyhill Private Nursing Home

Type of Service: Nursing Home (NH)
Address: 40 Creevery Road Antrim BT41 2LQ
Tel No: 02894466905
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 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 for up to 31 persons.

3.0 Service details

Organisation/Registered Provider: Town and Country Care Homes Ltd Responsible Individual: Dr Marina Lupari	Registered Manager: See below
Person in charge at the time of inspection: Registered Nurse Foteini Kourakou	Date manager registered: Lisa Craig – acting – no application required
Categories of care: Nursing Home (NH) LD – Learning disability. LD(E) – Learning disability – over 65 years.	Number of registered places: 31

4.0 Inspection summary

An unannounced inspection took place on 24 April 2018 from 13:00 to 13:55 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 focus was to assess progress with any areas for improvement identified during and since the last care inspection and to review the management of:

- recruitment and selection practices
- registration of staff with their professional body
- notifications to RQIA in accordance with Regulation 30
- the availability of quality monitoring reports undertaken on behalf of the registered person in accordance with Regulation 29
- staffing.

Areas requiring improvement were identified in relation to the availability of records in the home for inspection; notification of events to RQIA, and the recording of appropriate clinical observations following a fall.

RQIA were concerned regarding the availability of records within the home and the responsible individual, Dr Marina Lupari, was invited to a meeting in RQIA on 30 April 2018.

The findings of this report will provide the homewith the necessary information to assist them to fulfil their responsibilities, enhance practice and patients' experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	2*	2*

* The total number of areas for improvement includes one area for improvement under the regulations which has been stated for a second time and one area for improvement under the care standards carried forward for review at the next care inspection.

Details of the Quality Improvement Plan (QIP) were discussed with the nurse in charge of the home and two other members of the management team, 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.

4.2 Action/enforcement taken following the most recent inspection dated 23 January 2018

The most recent inspection of the home was an unannounced medicines management inspection undertaken on 23 January 2018. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of 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
- written and verbal communication received since the previous care inspection which includes information in respect of serious adverse incidents (SAI's), potential adult safeguarding issues and whistleblowing .
- the returned QIP from the previous care inspection
- the previous care inspection report.

Questionnaires were left in the home to obtain feedback from patients' representatives/relatives and a poster inviting staff to provide on line feedback was also provided.

The following records were examined during the inspection:

- duty rota for nursing and care staff from 2 to 29 April 2018
- incident and accident records
- RQIA registration certificate
- monthly quality monitoring reports undertaken in accordance with Regulation 29 of The Nursing Homes Regulations (Northern Ireland) 2005, from 1 January 2018.

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 22 June 2017

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector. This QIP was reviewed by the care inspector during this inspection.

6.2 Review of areas for improvement from the last care inspection dated 17 May 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
Area for improvement 1 Ref: Regulation 19 (2) Schedule 4 Stated: First time	The registered provider must ensure that records and/or information required to be kept in the nursing home is available for inspection.	Not met
	Action taken as confirmed during the inspection: We requested recruitment records for staff and monitoring records pertaining to the registration status of nursing and care staff with their professional bodies. The nurse in charge of the home advised that the records were not available in the home for inspection but held centrally in the sister home which was also head office. This area for improvement has not been met. Following discussion with senior managers in RQIA a meeting was held with the responsible individual on 30 May 2018. Refer to section 6.3.1 for details. This area for improvement is stated for a second time.	

Area for improvement 2 Ref: Regulation 29 Stated: First time	The registered provider must ensure that copies of the report undertaken in accordance with Regulation 29 of The Nursing Homes Regulations (Northern Ireland) 2005 are maintained in the home and available on request.	Met
	Action taken as confirmed during the inspection: Review of records from 1 January 2018 evidenced that reports were available in the home. Visits were recorded as unannounced and completed on a monthly basis by or on behalf of the responsible individual, in accordance with Regulation 29 of The Nursing Homes Regulations (Northern Ireland) 2005. This area for improvement had been met.	
Action required to ensure compliance with The Care Standards for Nursing Homes (2015)		Validation of compliance
Area for improvement 1 Ref: Standard 35 Stated: First time	The registered provider should consider further development of the current governance processes in accordance with DHSSPS Care Standards for Nursing Homes	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: Action required to ensure compliance with this regulation/standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.	

6.3 Inspection findings

6.3.1 Recruitment and selection Practices.

As stated in section 6.2 an area for improvement under regulation relating to the availability of records for inspection was found not to be met. Recruitment records requested for staff were not available in the home; and in addition records to evidence the process in place to monitor the registration status of registered nurses with the Nursing and Midwifery Council (NMC) and care staff registration with the Northern Ireland Social Care Council (NISCC) were also not available in the home.

Following discussion with senior managers in RQIA we invited the responsible individual, Dr Marina Lupari, to a meeting in RQIA on 30 April 2018. During this meeting we were provided with assurances that the records which were held centrally on a computerised database would be available to the person in charge of the home in the absence of the registered manager/person. A checklist of the recruitment process would also be maintained in the home as a 'hard copy' along with evidence of NMC and NISCC registration checks. Dr Lupari

confirmed that all nursing and care staff, working in Ladyhill, were registered, as required, with their professional body.

Areas for improvement

No new areas for improvement were identified.

	Regulations	Standards
Total number of areas for improvement	0	0

6.3.2 Notification of events

We reviewed accidents/incidents records in comparison with the notifications submitted by the home to RQIA in accordance with Regulation 30 of The Nursing Homes Regulations (Northern Ireland) 2005 from 1 January 2018.

Two accidents/incidents occurring in the home during the timeframe reviewed had not been notified to RQIA as required. Details were provided to the nurse in charge who agreed to report the incidents retrospectively. An area for improvement under regulation was made.

One of the incidents involved a head injury; review of the accident record evidenced that nursing staff had recorded, "keep observed during night". There was no evidence on the report that neurological observations had been undertaken. Details were discussed with the nurse in charge who also confirmed that the care records for this patient had been archived and were not available. An area for improvement under the care standards was made.

Areas for improvement

An area for improvement under the regulations was identified in relation to notifications to RQIA.

An area for improvement under the care standards was identified in relation to the recording of observations following a head injury.

	Regulations	Standards
Total number of areas for improvement	1	1

6.3.3 Staffing

The nurse in charge confirmed the planned daily staffing levels for the home and that these levels were subject to regular review to ensure the assessed needs of the patients were met. A review of the staffing rota for nursing and care staff from 2 to 29 April 2018 evidenced that the planned staffing levels were adhered to. The nurse in charge of each shift was clearly identified and the manager's hours were recorded to demonstrate the capacity in which they were worked; for example, the hours worked in management or as the nurse in charge of a shift. Rotas also confirmed that catering and housekeeping were on duty daily to meet the needs of the patients and to support the nursing and care staff.

The nurse in charge was satisfied that there was sufficient staff on duty to meet the needs of the patients.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.3.4 Consultation

As part of the inspection process we provided the home with questionnaires for patients and patient representatives /relatives;none were returned within the timescale specified.

A poster was provided inviting staff to complete an on line survey, we had no responses at the time of issuing this report.

Any comments from patients, patient representatives/relatives and staff in returned questionnaires/survey responses received after the issue of this report, will be shared with the registered person 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

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Foteini Kourakou, nurse in charge, 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 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.

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 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 providers should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 19 (2) Schedule 4 Stated: Second time To be completed by: 31 May 2018.	The registered provider must ensure that records and/or information required to be kept in the nursing home is available for inspection. Ref: Sections 6.2 and 6.3.1
	Response by registered person detailing the actions taken: All records are available on one drive which is set up between both homes. All nurses have been trained on how to use this and are aware of where to find the information needed.
Area for improvement Ref: Regulation 30 Stated: First time To be completed by: Immediate action required.	The registered person shall ensure that all incidents/events occurring in the nursing home are notified to RQIA, without delay, in accordance with Regulation 30 of The Nursing Homes Regulations (Northern Ireland) 2005. Ref: Section 6.3.2
	Response by registered person detailing the actions taken: All nurses have been made aware that all incidents must be reported to the RQIA immediately. Nurses are aware of how to use the RQIA portal to report any incidents. Each RN is currently being facilitated with their own login details for the RQIA portal to avoid delay in reporting
Action required to ensure compliance with The Care Standards for Nursing Homes (2015).	
Area for improvement 1 Ref: Standard 35 Stated: First time To be completed by: 30 June 2017.	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this is carried forward to the next care inspection. The registered provider should consider further development of the current governance processes in accordance with DHSSPS Care Standards for Nursing Homes. Ref: Section 6.2
	Response by registered person detailing the actions taken: The Registered Provider continues to expand the Reg29 monitoring report to enable the capture of all relevant information. Regular audits continue which are driven by specific resident centred needs. A management structure is in place which supports a robust governance approach Town & Country Care Homes Ltd.

<p>Area for improvement 2</p> <p>Ref: Standard 4.8</p> <p>Stated: First time</p>	<p>The registered person shall ensure that the appropriate clinical observations are carried out following a fall, in accordance with current best practice guidance; and recorded within the relevant documents.</p> <p>Ref: Section 6.3.2</p>
<p>To be completed by: 31 May 2018</p>	<p>Response by registered person detailing the actions taken: The NHSCT postfalls process/ Town & Country Care Homes Ltd Falls operating procedure has been recirculated for staff to ensure staff are aware of the correct procedure following a fall. The individual RN has been communicated to via her clinical supervision session</p>

**Please ensure this document is completed in full and returned via Web Portal*



The Regulation and
Quality Improvement
Authority

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

Tel 028 9051 7500
Email info@rqia.org.uk
Web www.rqia.org.uk
@RQIANews

Assurance, Challenge and Improvement in Health and Social Care