



# Unannounced Follow Up Care Inspection Report 11 May 2018



## Kintullagh Care Home

**Type of Service: Nursing Home**  
**Address: 36 Westbourne Avenue, Carniny Road,  
Ballymena, BT43 5LW**  
**Tel No: 02826 654444**  
**Inspector: Norma Munn**

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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 and residential care for up to 61 persons.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Runwood Homes Ltd  <b>Responsible Individual:</b> Mr Gavin O'Hare-Connolly	<b>Registered Manager:</b> Ms Julie-Ann Jamieson (acting)
<b>Person in charge at the time of inspection:</b> Ms Julie-Ann Jamieson	<b>Date manager registered:</b> Ms Julie-Ann Jamieson – application not yet submitted
<b>Categories of care:</b> Nursing Home (NH) I – Old age not falling within any other category. LD – Learning disability. PH – Physical disability other than sensory impairment.  Residential Care (RC) I – Old age not falling within any other category. MP(E) - Mental disorder excluding learning disability or dementia – over 65 years. PH(E) - Physical disability other than sensory impairment – over 65 years.	<b>Number of registered places:</b> 61 comprising: 57 – NH-I and PH 1 – NH-LD 3 – RC-I, MP(E) and PH(E)  There shall be a maximum of 1 named patient in Category NH-LD. There shall be a maximum of 3 named residents receiving residential care in category RC-I.

### 4.0 Inspection summary

An unannounced inspection took place on 11 May 2018 from 09.55 to 13.30 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 information from an anonymous source, raising concerns in relation to the management and governance arrangements within Runwood Homes which included staff recruitment and selection processes, registration of staff with their professional body and that two of the registered homes were being used to conduct business in respect to another service.

This inspection was undertaken to provide assurance in relation to the management and governance arrangements within Runwood Homes and the safety and wellbeing of patients in Kintullagh Care Home.

The following areas were examined during the inspection:

- the use of Kintullagh Care Home to conduct business in respect to another service
- governance and management arrangements
- monthly quality monitoring visits by the registered provider
- recruitment and selection of staff
- registration of staff with their professional bodies

All staff spoken with stated that they had no concerns in relation to the management and governance arrangements within Runwood Homes and that they felt supported in their role.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and resident experience.

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

#### 4.1 Inspection outcome

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

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

Enforcement action did not result from the findings of this inspection.

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

No further actions were required to be taken following the most recent care inspection on 19 August 2017.

#### 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- the registration status of the home
- written and verbal communication received since the previous care inspection
- the previous care inspection report

During the inspection the inspector met with Ms Julie-Ann Jamieson, Manager, Ms Amanda Leitch, Head of Quality and Governance in Runwood Homes, three staff nurses and three care assistants.

The following records were examined during the inspection:

- three reports of monthly quality monitoring visits by an individual nominated by the registered provider
- three staff recruitment files
- staff registration with professional bodies

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 5 January 2018**

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 19 August 2017**

This inspection focused solely on issues previously outlined in section 4.0. There were no areas for improvement identified at the last care inspection on 19 August 2017.

## **6.3 Inspection findings**

### **6.3.1 Use of premises by unregulated service**

The manager advised that the premises were not used to conduct business in respect to another service. They were not unaware of the establishment being used to take bookings, meet clients/potential clients or undertake medical assessments.

### **6.3.2 Governance and management arrangements**

There was a clear organisational structure and all staff were aware of their roles, responsibility and accountability.

The manager outlined the management arrangements and governance systems in place within the home. The manager stated that the registered provider was kept informed regarding the day to day running of the home including telephone calls, emails and visits to the home.

The manager confirmed that they felt supported in their role by Ms Amanda Leitch, Head of Quality and Governance in Runwood Homes.

Discussion with staff confirmed that there were generally good working relationships within the home and that management were responsive to suggestions and/or concerns raised. One member of staff felt that the some staff had not been working well together as a team and sickness levels had recently increased. This was discussed with the manager who agreed to address these issues. There were open and transparent methods of working and effective working relationships with internal and external stakeholders.

### **6.3.3 Visits by registered provider**

The manager confirmed that visits by the registered provider were undertaken as required under Regulation 29 of The Nursing Homes Regulations (Northern Ireland) 2005; reports were produced and made available for patients, their representatives, staff, RQIA and any other interested parties to read. An action plan was developed to address any issues identified which included timescales and person responsible for completing the action.

Prior to this inspection RQIA had been informed that the March 2018 visit had not taken place due to an outbreak in the home. Review of the last three reports dated 26 February 2018, 10 April 2018 and 24 April 2018 evidenced that:

- the visits on 26 February 2018 and 10 April 2018 had been completed by Ms Amanda Leitch, Head of Quality and Governance in Runwood Homes and the visit on 24 April 2018 had been completed by Ms Rosemary Dilworth, Operations Director in Runwood Homes
- the reports contained the date of visit; the time commenced and the time concluded
- patients were spoken with as part of the visit
- staff were interviewed as part of the visit
- there is a system in place to escalate areas for concern up through the governance structures within Runwood Homes

### **6.3.4 Recruitment and selection of staff**

Review of the recruitment and selection policy and procedure confirmed that it complied with current legislation and best practice. Discussion with the manager and review of three staff files confirmed that staff were recruited in line with Regulation 21 (1) (b), Schedule 2 of The Nursing Homes Regulations (Northern Ireland) 2005.

Staff confirmed that inductions had been completed when new staff commenced employment however, induction records were not available in two of the staff files reviewed. The manager confirmed that these two members of staff had received their induction templates and were in the process of completing these.

The manager advised that AccessNI enhanced disclosures were undertaken for all staff prior to the commencement of employment. Staff files reviewed confirmed that AccessNI information was recorded and managed in line with best practice.

### **6.3.5 Registration of staff with their professional bodies**

Arrangements were in place to monitor the registration status of staff with their professional body. Care staff spoken with advised that they were either registered or in the process of registering with the Northern Ireland Social Care Council (NISCC).

### Areas of good practice

There were examples of good practice found in relation to the quality of and level of detail within the monthly quality monitoring reports, the procedures in respect of staff recruitment, the arrangements to monitor and review staff registration with professional bodies and management and governance oversight arrangements.

### Areas for improvement

No areas for improvement were identified during the inspection.

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



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