



The Regulation and
Quality Improvement
Authority

Cherry Tree House
RQIA ID: 1433
79 North Road
Carrickfergus
BT38 7QZ

Inspector: Sharon McKnight
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**Unannounced Care Inspection
of
Cherry Tree House**

16 October 2015

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 unannounced care inspection took place on 16 October 2015 from 09:50 to 15:00 hours.

The inspection sought to assess progress with the issues raised during and since the previous inspection.

On the day of the inspection, the care in the home was found to be safe, effective and compassionate. The inspection outcomes found no significant areas of concern. A review of the Quality Improvement Plan (QIP) from the previous inspection evidenced that four out of five requirements were met; one requirement was partially met and stated for the second time. The three recommendations were met.

For the purposes of this report, the term 'patients' will be used to describe those living in Cherry Tree House 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 QIP, there were no further actions required to be taken following the last care inspection on 21 July 2015.

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	1*	0

*Please note: This requirement was made at the previous inspection on 21 July 2015. It was assessed as partially met and has been stated for a second time.

The details of the Quality Improvement Plan (QIP) within this report were discussed with the manager, Emeliza Insauriga, as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: Dr Dean Harron	Registered Manager: Please refer to section below
Person in Charge of the Home at the Time of Inspection: Emeliza Insauriga (Acting Manager)	Date Manager Registered: No application for registered manager has been submitted to RQIA

Categories of Care: RC-A, NH-I, NH-PH, RC-I, NH-LD, RC-MP(E), RC-PH(E) A maximum of 22 residential places. Category NH-LD for one identified patient only. Category RC-A for one identified resident only	Number of Registered Places: 56
Number of Patients Accommodated on Day of Inspection: 32 nursing 21 residential	Weekly Tariff at Time of Inspection: £470.00 - £637.00

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection.

4. Methods/Process

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

- discussion with the manager
- discussion with staff
- discussion with patients
- discussion with relatives
- a review of records
- a tour of the premises
- evaluation and feedback.

Prior to inspection the following records were analysed:

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

During the inspection, we met with eight patients individually and the majority of patients in small groups, two registered nurses, three care staff, the house keeper and four patients' relatives.

The following records were examined during the inspection:

- Statement of Purpose
- reports required to be prepared in accordance with regulation 29 of The Nursing Homes Regulations (Northern Ireland) 2005
- care records of four patients
- care charts of three patients
- audit records of wound care.

5. The Inspection

5.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 21 July 2015. The completed QIP was returned by the registered person and approved by the care inspector.

5.2 Review of Requirements and Recommendations from the Last Care Inspection - 21 July 2015

Last Care Inspection-Statutory Requirements		Validation of Compliance
<p>Requirement 1</p> <p>Ref: Regulation 13 (1) (a) and (b)</p> <p>Stated: First time</p> <p>To be Completed by: 28 July 2015</p>	<p>The registered person must ensure that the management strategy plan provided to RQIA is fully implemented so that nursing patients and residential residents are managed in accordance with the relevant DHSSPS Care Standards for Nursing Homes April 2015.</p> <hr/> <p>Action taken as confirmed during the inspection: A plan for the management of residential care within Cherry Tree House was received from the registered person on 23 July 2015.</p> <p>During this inspection, there was evidence that progress had been made in achieving the matters set out in the home's management plan. Five residents continued to reside in bedrooms outside of the identified residential area but this was due to individual choice.</p> <p>The manager, two registered nurses and a senior care assistant were knowledgeable regarding the management plan and the importance of bedroom allocation, prior to admission, of those prospective residents for residential care to the home.</p> <p>There was an identified staff team to deliver the care to the residential residents. The senior care assistant confirmed that she had the responsibility for the administration of medicines and the completion of care records for these residents.</p> <p>Through observation and discussion with staff, there were evidence of systems in place to provide assurances that the management plan would be fully implemented.</p> <p>This requirement has been met.</p>	<p>Met</p>

<p>Requirement 2</p> <p>Ref: Regulation 6</p> <p>Stated: First time</p> <p>To be Completed by: 18 August 2015</p>	<p>The registered person must ensure that the Statement of Purpose is updated to reflect, in sufficient detail, the services and categories of care provided in the home.</p> <hr/> <p>Action taken as confirmed during the inspection: A copy of the revised Statement of Purpose was on display in the foyer of the home. The revised copy contained the categories of care within which the home was registered to provide care. The conditions of registration as stated on the RQIA certificate of registration, regarding the maximum number of residential places and the category of care for two identified patients, were not referenced. This was discussed with the administrator who updated the Statement of Purpose.</p> <p>A further review of the Statement of Purpose evidenced that it detailed the services and categories of care provided in the home in keeping with The Nursing Homes Regulations (Northern Ireland) 2005.</p> <p>This requirement has been met.</p>	<p>Met</p>
<p>Requirement 3</p> <p>Regulation 14 (2) (c)</p> <p>Stated: First time</p> <p>To be Completed by: 18 August 2015</p>	<p>The registered person must ensure that the nurse call system is evidently monitored and records maintained of the action taken, if required.</p> <hr/> <p>Action taken as confirmed during the inspection: The manager and registered nurses spoken with confirmed that they monitored the response times to the nurse call system on a day to day basis. Notices were displayed in various locations throughout the home reminding staff of the importance of responding to the nurse call in a timely manner.</p> <p>The manager maintained a record in her diary of the date any action was required to be taken.</p> <p>Patients spoken with were satisfied with the response time of staff. The relatives of two patients stated that staff response to the nurse call system had improved over the past number of weeks.</p> <p>Observations made throughout the inspection evidenced that staff responded to the nurse call bell promptly.</p>	<p>Met</p>

<p>Requirement 4</p> <p>Ref: Regulation 12 (1) (a) and (b)</p> <p>Stated: First time</p> <p>To be Completed by: 18 August 2015</p>	<p>The registered person must ensure that the care practice of staff and the care afforded to patients is in accordance with their assessed needs and wishes and as stated in their care plans.</p> <hr/> <p>Action taken as confirmed during the inspection: Observations of care delivery and discussion with patients and their relatives evidenced that their needs were being met in accordance with their individual wishes.</p> <p>Care charts located in patients' bedrooms were managed appropriately.</p> <p>A review of one patient's care records evidenced that their needs were accurately identified and that the prescribed interventions were individualised and patient centred. Staff were observed delivering care as prescribed.</p> <p>A review of four patients' wound care records evidenced that: two patients wounds were being managed according to their care plans; one patient's prescribed dressing regime had not been adhered to on two out of three occasions and the frequency with which dressing were renewed for two out of the four patients varied between 3 – 5 days. This did not adhere to the prescribed care for these two patients.</p> <p>The manager confirmed that she completed an audit of wound care monthly. Following an examination of the audit records and discussion with the manager, it was agreed that the frequency of auditing would be increased to weekly and would include compliance with the prescribed care in the audit process.</p> <p>This requirement was assessed as partially met and was stated for a second time.</p>	<p>Partially Met</p>
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Recommendations		
<p>Recommendation 1</p> <p>Ref: Standard 35.6 and 35.7</p> <p>Stated: First time</p> <p>To be Completed by: 18 August 2015</p>	<p>The registered person should ensure that the Regulation 29 monitoring report is comprehensive and includes for example; auditing of the complaints record, accident and incident records and a review of staffing arrangements in the home.</p> <hr/> <p>Action taken as confirmed during the inspection: An examination of the regulation 29 reports for July to September 2015 evidenced a review of the governance arrangements in place in the home; for example, audit records, monthly overview of accidents and incidents, staff absence and the use of agency staff. Records reviewed were appended to the report.</p> <p>This recommendation has been met.</p>	<p>Met</p>
<p>Recommendation 2</p> <p>Ref: Standard 35</p> <p>Stated: First time</p> <p>To be Completed by: 18 August 2015</p>	<p>The registered person should ensure that the Regulation 29 monthly monitoring report reflects on one visit to the home to monitor the quality of services.</p> <hr/> <p>Action taken as confirmed during the inspection: A review of the regulation 29 reports for July to September 2015 evidenced that they were related to visits concluded on one day. The specific date was recorded on each report.</p> <p>This recommendation has been met.</p>	<p>Met</p>
<p>Recommendation 3</p> <p>Ref: Standard 46</p> <p>Stated: First time</p> <p>To be Completed by: 18 August 2015</p>	<p>The registered person should ensure that all protective personal equipment items are replaced regularly and that regular checks are conducted to ensure sufficient supply at all times.</p> <hr/> <p>Action taken as confirmed during the inspection: The housekeeper confirmed that the responsibility for checking that disposable gloves and aprons were available in the dispensers had been delegated to the domestic staff. Domestic staff were aware of their responsibility.</p> <p>A supply of gloves and aprons were observed in the dispensers throughout the home.</p> <p>This recommendation has been met.</p>	<p>Met</p>

5.3 Additional areas examined

5.3.1 Care practices

Whilst all patients in the home had a nurse call bell in place, three patients in their bedrooms did not have their call bells within easy reach. However these patients reported that this was not usual and was not observed to be common practice throughout the home. This matter was brought to the attention of the manager who gave assurances that this would be addressed and discussed with staff. All of the patients spoken with understood how to use the nurse call system and reported that staff would remind them of it before leaving the room. No issues or concerns were raised by patients or relatives regarding the operation of the nurse call system in the home.

Four patients' relatives confirmed that they were happy with the provision of care, staffing and the range of activities provided. One relative commented on the arrangements in place to encourage patients to vary what they wear on a day to day basis. The matter was raised with the manager who agreed to discuss it further with the relative.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Emeliza Insauringa as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained 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 your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Nursing Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and DHSSPS Care Standards for Nursing Homes, April 2015. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Manager/Registered Person

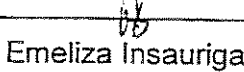


The QIP must be completed by the registered person/registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed. Once fully completed, the QIP will be returned to nursing.team@rqia.org.uk and assessed by the inspector.

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. It is expected that any requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan

Statutory Requirements

Requirement 1 Ref: Regulation 12 (1) (a) and (b) Stated: Second time To be Completed by: 13 November 2015	The registered person must ensure that the care practice of staff and the care afforded to patients is in accordance with their assessed needs and wishes and as stated in their care plans. Response by Registered Person(s) Detailing the Actions Taken: The Residents Plan Of Care are now adhered to by the Staff and this is being monitored. Wound Audits are done weekly and forwarded to RQIA.
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Registered Manager Completing QIP	 Emeliza Insauriga	Date Completed	02/11/2015
Registered Person Approving QIP		Date Approved	02/11/2015
RQIA Inspector Assessing Response		Date Approved	6-11-15

Please ensure this document is completed in full and returned to Nursing.Team@rqia.org.uk from the authorised email address