



Unannounced Enforcement Monitoring Care Inspection Report 29 October 2020



St Francis Private Care Home Limited

Type of Service: Nursing Home

**Address: 71 Charles Street, Portadown,
Craigavon, BT62 4BD**

Tel No: 028 3835 0970

Inspectors: Julie Palmer and John McAuley

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.

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.

1.0 What we look for



2.0 Profile of service

This is a registered nursing home which provides care for up to 25 patients.

3.0 Service details

Organisation/Registered Provider: St Francis Private Care Home Ltd Responsible Individual: Cathal Breen	Registered Manager and date registered: Laura Lavery - 17 October 2017
Person in charge at the time of inspection: Romegen Uy - nurse in charge	Number of registered places: 25
Categories of care: 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.	Number of patients accommodated in the nursing home on the day of this inspection: 17

4.0 Inspection summary

An unannounced enforcement monitoring inspection took place on 29 October 2020 from 09.30 to 13.30 hours.

Due to the coronavirus (COVID-19) pandemic the Department of Health (DOH) directed RQIA to prioritise inspections to homes on the basis of risk.

The inspection sought to assess if compliance had been achieved regarding the five Failure to Comply (FTC) Notices issued by RQIA to the responsible individual on 22 September 2020:

FTC Ref: FTC000120 with respect to Regulation 21
 FTC Ref: FTC000121 with respect to Regulation 20 (1)
 FTC Ref: FTC000122 with respect to Regulation 19 (5)
 FTC Ref: FTC000123 with respect to Regulation 14 (4)
 FTC Ref: FTC000124 with respect to Regulation 10 (1)

A Notice of Proposal (NOP) to impose conditions on the home's registration was also issued to impose the following conditions on the home's registration:

1. Admissions to St Francis Care Home Limited will cease on a temporary basis until RQIA is assured that compliance with the failure to comply notices is achieved and sustained

2. The registered person must ensure that a copy of the Regulation 29 monthly monitoring reports are shared with the home manager, the registered person and RQIA within five working days of the visits/reports having been completed. This condition will continue until such time that RQIA is satisfied that the home is operating in sustained compliance with The Nursing Homes Regulations (Northern Ireland) 2005 and the Care Standards for Nursing Homes 2015.

Evidence was available to validate compliance in relation to FTC000121. Sufficient evidence was not available to determine that compliance had been achieved in relation to the four remaining FTC notices; however, there was evidence of some progress made to address the required actions. A decision was made to extend the date of compliance for FTC000120, FTC000122, FTC000123 and FTC000124. Compliance with these notices is to be achieved by 22 December 2020.

The following areas were examined in addition to the actions required to validate compliance with the FTC notices:

- care delivery
- the environment

Patients commented positively about living in the home, they said “there is always someone to help me” and “there are no problems here”.

Staff spoken with during the inspection also commented positively about the home, they said there were “no problems” and “it’s a very homely home, I love working here”. A poster was displayed for staff inviting them to provide feedback to RQIA on-line following the inspection. We received responses from three members of staff. Comments made anonymously by staff appeared to lend credence to concerns which RQIA were already aware of and had referred to the adult safeguarding team in the Southern Health and Social Care Trust (SHSCT) following the last inspection carried out on 8 September 2020. The additional information received was also passed to the adult safeguarding team for their review and action if required.

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
Total number of areas for improvement	0	0

The inspection resulted in no new areas for improvement being identified. One area for improvement from the previous inspection has been subsumed into the conditions imposed under a NOP which was issued to the home on 22 September 2020. The areas requiring improvement are outlined in the FTCs and a QIP is not required or included, as part of this inspection report. The findings of the inspection were discussed with Romegen Uy, nurse in charge, as part of the inspection process. Verbal feedback was also provided to Cathal Breen, responsible individual, via a telephone call on 2 November 2020.

Ongoing enforcement action resulted from the findings of this inspection with the date of compliance extended to 22 December 2020.

The enforcement policies and procedures are available on the RQIA website at [https://www.rqia.org.uk/who-we-are/corporate-documents-\(1\)/rqia-policies-and-procedures/](https://www.rqia.org.uk/who-we-are/corporate-documents-(1)/rqia-policies-and-procedures/)

Enforcement notices for registered establishments and agencies are published on RQIA's website at <https://www.rqia.org.uk/inspections/enforcement-activity/current-enforcement-activity> with the exception of children's services.

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 previous care inspection report
- the returned QIP from the previous care inspection
- the FTC notices issued on 22 September 2020.

We met with seven patients and five staff. Questionnaires were left in the home to obtain feedback from patients and patients' relatives. No completed questionnaires were returned by patients or their relatives within the indicated timeframe.

The following records were examined during the inspection:

- duty rotas from 19 October to 8 November 2020
- staff training records
- three staff recruitment files
- records confirming registration of staff with the Nursing and Midwifery Council (NMC) and Northern Ireland Social Care Council (NISCC)
- nurse in charge competency assessment records
- a sample of governance audits
- recruitment, adult safeguarding and record keeping policies
- night duty monitoring checks
- six patients' care records.

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

The most recent inspection of the home was an unannounced care inspection undertaken on 8 September 2020.

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 29 Stated: First time To be completed by: With immediate effect	The registered person shall ensure that monthly monitoring reports are consistently completed. The monthly monitoring report should be meaningful, comprehensive, include the views of patients, patients' representatives and staff, detail any improvements made or required and contain an action plan. A copy of the monthly monitoring report should be submitted to RQIA within five days of completion on a monthly basis until further notice.	Not met
	Action taken as confirmed during the inspection: The monthly monitoring reports are being submitted to RQIA as part of the conditions imposed on the home in the NOP which was issued on 22 September 2020. The responsible individual had submitted a Regulation 29 monthly monitoring report before 5 October 2020 as requested. Following submission of this we had discussed with the responsible individual the need for the reports to contain more comprehensive and meaningful content. This AFI has been subsumed into the NOP to place conditions placed on the home's registration and will be kept under review.	

6.2 Inspection findings

FTC000120

The Nursing Homes Regulations (Northern Ireland) 2005

Fitness of workers

Regulation 21.—

(1) The registered person shall not employ a person to work at the nursing home unless –

(a) the person is fit to work at the nursing home;

(b) subject to paragraph (5), he has obtained in respect of that person the information and documents specified in paragraphs 1 to 7 of Schedule 2;

(c) he is satisfied on reasonable grounds as to the authenticity of the references referred to in paragraph 3 of Schedule 2 in respect of that person.

(2) Paragraph 1 applies to a person who is employed by a person (“the employer”) other than the registered person.

(3) Paragraph 1 applies to a position in which a person may in the course of his duties have regular contact with patients at the nursing home.

(4) The registered person shall not allow a person to whom paragraph (2) applies to work at the nursing home in a position to which paragraph (3) applies, unless –

(a) the person is fit to work at the nursing home;

(b) the employer has obtained in respect of that person the information and documents specified in –

(i) paragraphs 1 to 7 of Schedule 2; and has confirmed in writing to the registered person that he has done so; and

(c) the employer is satisfied on reasonable grounds as to the authenticity of the references referred to in paragraph 3 of Schedule 2 in respect of that person, and has confirmed in writing to the registered person that he is so satisfied.

(5) For the purposes of paragraphs (1) and (4), a person is not fit to work at a nursing home unless –

(a) he is of integrity and good character;

(b) he has qualifications or training suitable to the work that he is to perform, and the skills and experience necessary for such work;

(c) he is physically and mentally fit for the purposes of the work he is to perform at the nursing home;

(d) full and satisfactory information is available in relation to him in respect of the following matters –

(i) each of the matters specified in paragraphs 1 to 7 of Schedule 2;

(6) The registered person shall ensure that all health care professionals are covered by appropriate professional indemnity.

Action required to comply with regulations:

- at all times staff are recruited and employed in accordance with statutory legislation and that all necessary checks are carried out prior to an offer of employment being made
- Access NI enhanced checks must be completed and scrutinised effectively prior to an individual commencing employment in the home
- two written references must be obtained including one from the present or most recent employer and these are scrutinised effectively

- the registration status of any nurse seeking to be employed in the home is ascertained and any restrictions on practice explored prior to commencing employment
- a policy is in place for staff recruitment which clearly defines the roles and responsibilities of those involved in the recruitment process
- anyone involved in the recruitment process can clearly articulate these roles and responsibilities as they pertain to recruitment
- there is evidence of effective communication to ensure that any recruitment issues are dealt with or explored in a timely manner
- a robust monitoring system must be in place to ensure that the recruitment process is compliant with statutory legislation and mandatory requirements.

Review of three staff recruitment files evidenced that some improvements had been made regarding recruitment practices; a checklist system was in place to record that the necessary checks, including Access NI and registration status with the NMC or NISCC, had been made prior to employment. Previously reviewed files had been updated with required information.

However, an identified file reviewed contained two written references and all other necessary checks but no reference from the most recent employer.

We observed that the home's recruitment policy had not been reviewed since the previous inspection.

Due to unavoidable circumstances neither the responsible individual nor the manager were in attendance on the day of the inspection. During the inspection we discussed recruitment, via a telephone call, with the responsible individual who told us that, although their role involved managing all aspects of recruitment, they had not undertaken any training in this area.

As the manager was unavailable we were unable to ascertain their understanding of their role and responsibilities regarding recruitment.

Sufficient evidence was not available to validate compliance with this FTC notice.

FTC000121

The Nursing Homes Regulations (Northern Ireland) 2005

Staffing

Regulation 20.—

(1) The registered person shall, having regard to the size of the nursing home, the statement of purpose and the number and needs of patients –

(a) ensure that at all times suitably qualified, competent and experienced persons are working at the nursing home in such numbers as are appropriate for the health and welfare of patients;

Action required to comply with regulations:

The registered person must ensure that:

- at all times there is a suitably qualified, competent and experienced registered nurse in charge of the home
- there is a robust system in place to ensure that all nurses who take charge of the home, in the absence of the registered manager, are suitably qualified

- all registered nurses who take charge of the home, in the absence of the registered manager, have completed a suitable competency and capability assessment
- all staff are appropriately supported and supervised
- a person, who is not a registered nurse, is not employed in the role of a registered nurse
- a clear record of any communication with the Nursing and Midwifery Council (NMC) or any other regulatory body regarding staff and/or staffing arrangements is maintained.

At the previous inspection we had identified that a nurse, who was not registered with the NMC, had been left in charge in the home on occasions.

Review of the duty rota, registered nurse competency and capability assessments and records of NMC checks completed, evidenced that all nurses who took charge in the home were suitably qualified, experienced and appropriately registered with the NMC. There was a robust system in place to monitor that nurses left in charge in the home were appropriately registered with the NMC and had completed the necessary competency and capability assessments.

Prior to the inspection RQIA had received information from the SHSCT raising a concern regarding night duty nurse cover in the home. We had brought this to the attention of the responsible individual who told us that unannounced monitoring checks were regularly completed during night duty shifts but agreed to carry out unannounced monitoring checks within an agreed timeframe to ensure that nurse cover was maintained as required. The responsible individual provided a response to RQIA with assurances that night duty staffing had been monitored and was maintained as required. Review of the duty rota evidenced that staffing levels appeared to be appropriately maintained on night duty. Patients and staff spoken with did not raise any concerns regarding night duty cover in the home. RQIA provided feedback to the SHSCT on actions taken to address this concern.

There was sufficient evidence available to demonstrate compliance with this FTC notice.

FTC000122

The Nursing Homes Regulations (Northern Ireland) 2005

Records

Regulation 19.—

(5) The registered person shall ensure that information about a patient's health and treatment is handled confidentially and is only disclosed to those persons who need to be aware of that information in order to treat the patient effectively or minimise any risk of the patient harming himself or another person, or for the purpose of the proper administration of the nursing home.

Action required to comply with regulations:

The registered persons must ensure that:

- they undertake training in records management commensurate with their roles and responsibilities in the home
- they can demonstrate their understanding of the rights of patients' confidentiality, privacy and dignity with particular regard to their care records
- where there is a breach in confidentiality regarding patients they can demonstrate the arrangements in place to ensure that the appropriate agencies and next of kin, are notified

- there is a policy and procedure for the management of records detailing the arrangements for the creation, use, retention, storage, transfer and disposal of and access to those records
- staff in the home can demonstrate their understanding of this policy and are aware of the systems in place to ensure the confidentiality of patient records.

Review of training records and discussion with staff evidenced that they had received the appropriate level of training in this area. Staff spoken with demonstrated their understanding of maintaining confidentiality and reporting a breach in confidentiality. We reviewed six patients' care records and found that entries made had been completed appropriately by staff who were employed in the home and were authorised to do so. Care records were stored in the administration office which was locked when unoccupied.

As the manager was unavailable we were unable to ascertain their understanding of their role and responsibilities regarding record keeping and it was not discussed during our telephone conversation with the responsible individual.

We also observed that the relevant policy lacked detail regarding the arrangements for the creation, use, retention, storage, transfer and disposal of and access to those records; the policy had also not been reviewed since the previous inspection.

Sufficient evidence was not available to validate compliance with this FTC notice.

FTC000123

The Nursing Homes Regulations (Northern Ireland) 2005

Further Requirements as to health and welfare

Regulation 14.—

(4) The registered person shall make arrangements, by training staff or by other measures, to prevent patients being harmed or suffering abuse or being placed at risk of harm or abuse.

Action required to comply with regulations:

The registered persons must:

- undertake safeguarding training commensurate with their role and function in the home
- demonstrate their understanding of the importance of safe recruitment in safeguarding patients from potential harm or abuse
- demonstrate their understanding of the importance of staff being registered with the appropriate professional body in safeguarding patients from harm or abuse.

Review of training records and discussion with staff evidenced that they had received the appropriate level of training in this area. Staff spoken with demonstrated their understanding of their role and responsibilities around adult safeguarding. Staff spoken with also confirmed that they were appropriately registered with either the NMC or NISCC. There was a system in place to check the registration status of staff with the NMC or NISCC. The recruitment checklist in use indicated that an Access NI check and the registration status of staff with the NMC or NISCC should be completed prior to employment.

Review of the duty rotas and discussion with staff and patients indicated that only staff who were appropriately employed in the home were afforded access to patients.

As the manager was unavailable we were unable to ascertain their understanding of their role and responsibilities regarding adult safeguarding. We did discuss this with the responsible individual during our telephone conversation; they informed us that their mandatory training update on adult safeguarding was overdue.

We observed that the adult safeguarding policy had not been reviewed since the last inspection; the policy also made no reference to the Adult Safeguarding: Prevention and Protection in Partnership Policy (DHSSPS 2015).

Sufficient evidence was not available to validate compliance with this FTC notice.

FTC000124

The Nursing Homes Regulations (Northern Ireland) 2005

Registered person: general requirements

Regulation 10.—

(1) The registered provider and the registered manager shall, having regard to the size of the nursing home, the statement of purpose, and the number and needs of the patients, carry on or manage the nursing home (as the case may be) with sufficient care, competence and skill.

Action required to comply with regulations:

The registered person must ensure that:

- at all times the registered manager carries on and manages the nursing home with sufficient care, competence and skill
- audits carried out to review care and other services provided in the home, are robust, identify deficits and actions required to rectify deficits in a timely manner
- there is a robust system in place to monitor recruitment practices in the home
- there is a robust system in place to monitor staffing arrangements in the home
- at all times a suitably qualified, competent and experienced person is in charge of the home
- there is evidence of a robust system to ensure effective communication between the responsible individual and the registered manager
- they both have a clear understanding of their roles and responsibilities in the day to day management of the home
- comprehensive and meaningful Regulation 29 monthly monitoring reports must be completed and submitted to RQIA on the fifth day of each month until further notice.

As the manager was unavailable we were unable to discuss the day to day management of the home or how effective communication with the responsible individual was maintained during the inspection.

Review of a sample of audits evidenced that these were regularly completed, identified deficits and contained an action plan.

As previously discussed the system in place to monitor recruitment continues to lack robustness.

Review of the duty rota, registered nurse competency and capability assessments and records of NMC checks completed evidenced that a system was in place to ensure that all nurses who took charge in the home were suitably qualified and experienced. However, we evidenced that the manager was spending the majority of their hours working in a clinical capacity. Following the inspection we discussed this with the responsible individual; they explained that the manager was keen to keep footfall into the home to a minimum during the COVID-19 pandemic and therefore opted to cover shifts herself rather than bring in bank or agency staff. We understood the rationale for this decision; however, we pointed out that the evidence reviewed during the inspection indicated that the manager's working pattern did not allow them sufficient time to fulfil their responsibilities in relation to management and governance arrangements in the home.

Sufficient evidence was not available to validate compliance with this FTC notice.

Additional areas reviewed

Care delivery

Patients in the home looked well cared for and were seen to be content and settled in their surroundings and in their interactions with staff. Patients spoken with told us there were enough staff to help them and they felt well looked after, comments included:

- "The staff are helpful."
- "The food is great."
- "The nurse has been in with me three times already today."
- "Sometimes I have a bit of wait but I understand."

We observed that staff treated patients with respect and kindness and were responsive to their needs. Staff were seen to use personal protective equipment (PPE) appropriately and according to the regional guidance.

The environment

The home was found to be warm, clean, tidy and fresh smelling throughout. A required repair had been carried out to flooring in an identified bathroom. Fire exits and corridors were observed to be clear of clutter and obstruction. Robust infection prevention and control (IPC) measures were employed in the home; frequently touched points were cleaned regularly in addition to the normal cleaning schedule and there were plentiful supplies of PPE and cleaning products.

Areas of good practice

Areas of good practice were identified in relation to the care provided, staff treating patients with respect and kindness, the appropriate use of PPE and the cleanliness of the environment.

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.3 Conclusion

Patients in the home looked well cared for, staff were seen to treat patients with respect and kindness and the home was warm, clean and tidy.

Following the inspection the responsible individual told us that a reference had been sought and obtained from the most recent employer of the identified staff member.

Ongoing enforcement action resulted from the findings of this inspection. As discussed in section 4.0 a decision was made to extend the date of compliance for FTC000120, FTC000122, FTC000123 and FTC000124. Compliance with these notices is to be achieved by 22 December 2020.

7.0 Quality improvement plan

There were no new areas for improvement identified during this inspection. The areas requiring improvement are outlined in the FTCs, 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)

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