

Unannounced Premises Inspection Report 06 June 2017



Glenview

Type of Service: Nursing Home
Address: 9 Cabragh Rd, Dungannon, BT70 3AH
Tel No: 028 8776 7132
Inspector: Raymond Sayers

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 nursing home that provides nursing care for 45 patients/residents.

3.0 Service details

Registered organisation/registered provider: Mrs Jennifer Elizabeth Gregg & Mr Mervyn John Gregg	Registered manager: Mrs Veronica McElmurray
Person in charge of the home at the time of inspection: Kirsty McCammon	Date manager registered: 29 September 2016
Categories of care: NH-PH(E), NH-DE, NH-PH, NH-I & RC-I	Number of registered places: 45

4.0 Inspection summary

An unannounced inspection took place on 06 June 2017 from 13.20 to 14.25.

This inspection was underpinned by

- The Nursing Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015

The inspection was undertaken to investigate a concern raised with relating to an untoward incident allegedly involving a patient sustaining a fracture whilst using a WC sanitary appliance RQIA reference CS003632.

The adult safeguarding team from the Southern Health & Social Care Trust are currently investigating the circumstances associated with this incident.

The following areas were examined during the inspection:

1. The stability of WC pans and WC base fixings to floor screeds in the older section of the care home were reviewed during the inspection.

The findings of this report will equip the provider with the necessary information to assist them to fulfil their responsibilities, enhancing patient safety.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Kirsty McCammon, Staff Nurse, as part of the inspection process. The timescales for completion commence from the date of inspection

4.2 Action/enforcement taken following the most recent premises inspection dated 01 November 2016

Other than the issues detailed in the QIP no further actions were required to be taken following the most recent inspection IN024754 on 01 November 2016.

5.0 How we inspect

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

- recent inspection reports and returned QIPs
- recent correspondence with the provider
- the premises related incidents reported to RQIA since the last premises inspection.

During the inspection we met with the administrator, Sandra Blackburn, Administrator and Staff Nurse, Kirsty McCammon.

Areas for improvement identified at the last premises inspection were not reviewed as part of this inspection and are carried forward to the next premises inspection.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection. The contents and report requirements were confirmed to Veronica McIlmurray, Manager by telephone call on 16 June 2017.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection IN027923 dated 17 May 2017.

The most recent inspection of the establishment was an unannounced care inspection.

This QIP will be validated by the care inspector at the next care inspection.

6.2 Review of areas for improvement from the last premises inspection dated 01 November 2016

Areas for improvement from the last premises inspection		
Action required to ensure compliance with		Validation of compliance
<ul style="list-style-type: none"> Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015 		
Recommendation 1 Ref: Standards 48.6 & 48.8 Stated: First time	The registered provider should ensure that suitable and sufficient fire drills are completed, and recorded in accordance with Northern Ireland Health Technical Memorandum 84.	Carried forward to the next premises inspection
	Action taken as confirmed during the inspection: Not examined	
Recommendation 2 Ref: Standard 47.1 Stated: First time	The registered provider should ensure that all ceiling mounted overhead hoist equipment is subjected to LOLER regulation 9 thorough examination.	Carried forward to the next premises inspection
	Action taken as confirmed during the inspection: Not examined	
Recommendation 3 Ref: Standard 44.1 Stated: First time	The registered provider should undertake a condition survey of all floor and wall finishes, and plan a refurbishment works contract to replace deteriorated surface finishes.	Carried forward to the next premises inspection
	Action taken as confirmed during the inspection: Only bedroom en-suites in older section of home reviewed.	

This inspection focused solely on issues previously outlined in section 4.0. The areas for improvement from the last premises inspection on 01 November 2016 were not reviewed as part of the inspection and are carried forward to the next premises inspection.

6.3 Inspection findings

Inspection & evaluation of WC pan stability:

Slight movement was detected when lateral pressure was applied to the following bedroom en-suite WC pans (older section of home): bedroom 5 & bedroom 7. Bedroom 6 WC en-suite pan had a hairline crack adjacent a base fixing bolt.

Areas of good practice

N/A

Areas for improvement

All WC pan fixings should be inspected throughout the home, the stability of WC pans should be evaluated in accordance with a health and safety risk assessment.

	Regulations	Standards
Total number of areas for improvement	1	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Kirsty McCammon, staff nurse, 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 Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 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 provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

RQIA will phase out the issue of draft reports via paperlite in the near future. Registered providers should ensure that their services are opted in for the receipt of reports via Web Portal. If you require further information, please visit www.rqia.org.uk/webportal or contact the web portal team in RQIA on 028 9051 7500.

Quality Improvement Plan	
Action required to ensure compliance with	
<ul style="list-style-type: none"> The Nursing Homes Regulations (Northern Ireland) 2005 	
Area for improvement 1 Ref: Regulations 14.(2)(a),(b) & (c) 27.(2)(b)	The registered person shall complete a survey of all WC pans, assessing stability and completing a health & safety risk assessment to safeguard service users. Implement repairs/improvements to verify the stability of WC pans. Ref: 6.3.1
Stated: First time To be completed by: 09 June 2017	Response by registered person detailing the actions taken: All en-suites (7 in total) in the "older" part of the Home have been priced for new flooring, wall panelling and new sanitary wear. Rooms 4 and 6 will be complete by 30 th June 2017 with the remainder planned for completion in July, August and September 2017.



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