



# Unannounced Enforcement Care Inspection Report 9 October 2019



## Rockfield Care Home

**Type of Service: Nursing Home (NH)**  
**Address: Windmill Road, Newry, BT34 2QW**  
**Tel No: 028 3026 9546**  
**Inspector: Michael Lavelle**

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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 registered nursing home which provides care for up to 35 patients.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Burnview Healthcare Ltd  <b>Responsible Individual(s):</b> Briega Agnes Kelly	<b>Registered Manager:</b> Jaya Ajith
<b>Person in charge at the time of inspection:</b> Jaya Ajith	<b>Date manager registered:</b> Application received, registration pending
<b>Categories of care:</b> Nursing Home (NH) I – Old age not falling within any other category. MP – Mental disorder excluding learning disability or dementia. PH – Physical disability other than sensory impairment.	<b>Number of registered places:</b> 35

### 4.0 Inspection summary

An unannounced inspection took place on 9 October 2019 from 09.20 hours to 11.00 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 sought to assess the level of compliance achieved in relation to three Failure to Comply (FTC) Notices. The areas identified for improvement and compliance with the regulation were in relation to the health and welfare of patients, staffing and governance and management arrangements in the home. The date of compliance with the notices was 9 October 2019.

The following FTC Notices were issued by RQIA:

**FTC ref: FTC000060 issued on 9 July 2019 and FTC000060E1 extended from 9 September 2019 to 9 October 2019**

**FTC ref: FTC000061 issued on 9 July 2019 and FTC000061E1 extended from 9 September 2019 to 9 October 2019**

**FTC ref: FTC000062 issued on 9 July 2019 and FTC000062E1 extended from 9 September 2019 to 9 October 2019**

Evidence was available to validate compliance with the Failure to Comply Notices.

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

## 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. Further enforcement action did not result from the findings of this inspection.

The enforcement policies and procedures are available on the RQIA website.

[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

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous inspection findings including registration information and any other written or verbal information received.

During our inspection we:

- where possible, speak with patients, people who visit them and visiting healthcare professionals about their experience of the home
- talk with staff and management about how they plan, deliver and monitor the care and support provided in the home
- observe practice and daily life
- review documents to confirm that appropriate records are kept

The following records were examined during the inspection:

- three patient care records
- incident and accident records
- a sample of governance audits/records

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

The findings of the inspection were provided to Jaya Ajith, Manager, and Briege Agnes Kelly, Responsible Individual, at the conclusion of the inspection.

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 9 September 2019

The most recent inspection of the home was an unannounced enforcement care inspection undertaken on 9 September 2019. There was evidence of some improvement and progress made to address the required actions within the notices. However, we were unable to validate full compliance with the above FTC Notices. A decision was made to extend the compliance date up to the maximum legislative timeframe of three months.

### 6.2 Review of areas for improvement from the last care inspection dated 9 September 2019

This inspection focused solely on the actions contained within the Failure to Comply Notices issued on 9 July 2019 and extended from 9 September 2019 to 9 October 2019. The one area for improvement from the last care inspection on 28 June 2019 was not reviewed as part of the inspection and is carried forward to the next care inspection.

## 6.3 Inspection findings

**FTC Ref: FTC000060**

**Notice of failure to comply with Regulation 13 (1) (a) and (b) of The Nursing Homes Regulations (Northern Ireland) 2005**

**13.-**

- (1) *The registered person shall ensure that the nursing home is conducted so as –*
- (a) to promote and make proper provision for the nursing, health and welfare of patients;*
  - (b) to make proper provision for the nursing and where appropriate, treatment and supervision of patients*

In relation to this notice the following six actions were required to comply with this regulation:

- The registered person must ensure that falls are managed in accordance with best practice, regional guidelines and protocols.
- The registered person must ensure that a falls policy is developed to guide staff on the actions to be taken following a fall.
- The registered person must ensure that registered nursing staff are provided with training relevant to their role and responsibilities in relation to the completion and management of patient care records.
- The registered person must ensure that patients' care records are completed within five days of admission to the home.
- The registered person must ensure that patients' care records are individualised, accurately reflect patients' assessed needs and are kept under review.
- The registered person must ensure supplementary care records are reflective of care planning directions and are completed contemporaneously.

Evidence was available to validate compliance with the Failure to Comply Notice.

Through review of records, observations of staff practice and discussion with staff and the registered manager we evidenced and acknowledged the progress made in relation to this FTC Notice.

We reviewed the one outstanding action that was not addressed satisfactorily on our previous compliance inspection on 9 September 2019. Review of three patient care records evidenced that a range of validated risk assessments were completed and reviewed as required. These assessments informed the care planning process. Care plans were in place to direct the care required, were individualised and reflected the assessed needs of the patient. We reviewed the management of wound care, falls and a patient who required their diet to be modified. Care records contained details of the specific care requirements in each of the areas reviewed and a daily record was maintained to evidence the delivery of care.

**FTC Ref: FTC000061E1**

**Notice of failure to comply with Regulation 20 (1) of The Nursing Homes Regulations (Northern Ireland) 2005**

**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;*

In relation to this notice the following five actions were required to comply with this regulation:

- The registered person must ensure the registered manager has sufficient management hours to ensure effective quality monitoring and governance systems are implemented and maintained.
- The registered person must 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.
- The registered person must ensure that a robust system for staff appraisal and supervision is implemented and sustained.
- The registered person must ensure that the effect of the training provided in relation to infection prevention and control (IPC) and control of substances hazardous to health (COSHH) is evaluated to assure that the necessary improvements have been made.
- The registered person must ensure that registered nurses are able to demonstrate their knowledge and safe practice in relation management of medicines.

Evidence was available to validate compliance with the Failure to Comply Notice.

Through review of records, observations of staff practice and discussion with staff and the manager we evidenced and acknowledged the progress made in relation to this FTC Notice.

We reviewed the one outstanding action that was not addressed satisfactorily on our previous compliance inspection on 9 September 2019. Examination of a selection of hand hygiene and IPC audits clearly evidenced improvements in previously identified deficits. For example, compliance with adherence to the World Health Organisation five moments for hand hygiene had greatly improved. The manager confirmed that compliance with best practice in IPC and control of substances hazardous to health formed part of the daily management audit. Records were retained to evidence this. Staff commented positively on improvements since the previous care inspection.

**FTC Ref: FTC000062**

**Notice of failure to comply with Regulation 10 (1) of The Nursing Homes Regulations (Northern Ireland) 2005**

10.-

*(1) The registered provider and the registered manager shall, having regards to the size of the nursing home, the statement of purpose, and the number and needs of the patients, carry out or manage the*

In relation to this notice the following five actions were required to comply with this regulation:

- The registered person must ensure that the registered manager or her representative delivers services effectively on a day-to-day basis in accordance with legislative requirements.
- The registered person must ensure that RQIA is notified of all incidents/accidents occurring in the home in accordance with Regulation 30 of The Nursing Homes Regulations (Northern Ireland) 2005. This includes retrospective notification of events identified during the inspections on 28 June 2019.
- The registered person must ensure that the registered manager establishes, implements and sustains robust quality monitoring and governance systems in relation to care records, falls, restrictive practice, IPC and COSHH.
- The registered person must ensure that the use of keypad locks within the home is reviewed in conjunction with guidance from the Department of Health on Human Rights / Deprivation of Liberty and the home's registered categories of care.
- The registered person must ensure that a copy of the monthly monitoring reports is submitted on a monthly basis to RQIA until further notice. This should be with RQIA no later than three days after the last day of the month.

Evidence was available to validate compliance with the Failure to Comply Notice.

Through review of records, observations of staff practice and discussion with staff and the registered manager we evidenced and acknowledged the progress made in relation to this FTC Notice.

We reviewed the one outstanding action regarding notification of incidents/accidents that was not addressed satisfactorily on our previous compliance inspection on 9 September 2019. Incidents/accidents records since May 2019 were reviewed in comparison with the notifications submitted by the home to RQIA. Records were maintained appropriately and notifications were submitted in accordance with regulation. All retrospective notifications were submitted.

## Areas for improvement

No new areas for improvement were identified during the inspection.

	Regulations	Standards
<b>Number of areas for improvement</b>	0	0

### 6.4 Conclusion

Evidence was available to validate compliance with the Failure to Comply Notices.

### 7.0 Quality improvement plan

There were no new areas for improvement identified during this inspection. The attached QIP contains the areas for improvement carried forward from the last care inspection on 28 June 2019. This inspection focused solely on the actions contained within the Failure to Comply Notices issued on 9 July 2019 and extended from 9 September 2019.

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 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 registered provider has confirmed that actions have been completed to address the areas for improvement identified during the last care inspection and has returned 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

<p><b>Area for improvement 1</b></p> <p><b>Ref:</b> Regulation 13 (7)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> Immediate action required</p>	<p>The registered person shall ensure the infection prevention and control issues identified on inspection are managed to minimise the risk and spread of infection.</p> <p>A more robust system should be in place to ensure compliance with best practice on infection prevention and control.</p>
	<p><b>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</b></p>



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](mailto:info@rqia.org.uk)  
**Web** [www.rqia.org.uk](http://www.rqia.org.uk)  
**Twitter** @RQIANews

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