

# Unannounced Follow Up Care Inspection Report 15 January 2020



# **Valley Nursing Home**

Type of Service: Nursing Home (NH) Address: 8 Tullybroom Road, Clogher, BT76 0UW Tel No: 028 8554 8048 Inspector: Laura O'Hanlon

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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 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 nursing home which is registered to provide nursing care and residential care for up to 96 persons. Patients' bedrooms are located within two buildings. The 'Main House' comprises three distinct units: one unit providing care for people requiring frail elderly nursing care (the Valley unit), one unit for people living with dementia (the Lane unit) and one unit for people living with a brain injury (the Amadeus unit). The adjacent building (Tullybroom House) provides care for people living with dementia.

### 3.0 Service details

Organisation/Registered Provider: Valley Nursing Home (MPS) Ltd	Registered Manager and date registered: Anna Senir – acting
<b>Responsible Individual:</b> Paul Warren-Gray	
Person in charge at the time of inspection: Louise Hughes-McKenna – deputy manager	Number of registered places: 96 A maximum number of 58 patients in category NH-DE, in addition 2 persons may receive care on a day basis only in Tullybroom House and 2 persons who do not require bath/shower
	facilities may receive care on a day basis only in the Dementia Unit (Main House). There shall be a maximum of 4 named residents receiving residential care in category RC-DE and 4 named residents receiving residential care in category RC-A
Categories of care: Nursing Home (NH)	Number of patients accommodated in the nursing home on the day of this inspection:
<ul> <li>DE – Dementia</li> <li>I – Old age not falling within any other category.</li> <li>PH – Physical disability other than sensory impairment.</li> <li>PH(E) - Physical disability other than sensory impairment – over 65 years.</li> <li>TI – Terminally ill.</li> <li>MP – Mental disorder excluding learning disability or dementia.</li> <li>MP(E) - Mental disorder excluding learning disability or dementia – over 65 years.</li> </ul>	information not requested

### 4.0 Inspection summary

An unannounced inspection took place on 15 January 2020 from 13.00 to 14.00 hours. The inspection was carried out following information received by RQIA that neither the current acting manager of the home nor the proposed new manager, were appropriately registered with the Nursing and Midwifery Council (NMC). As a result neither individual could be the manager for the home under the relevant legislation and standards.

Following an inspection on 16 and 17 December 2019 significant concerns were identified in relation to the quality of care and service delivered at Valley Nursing Home. As a result and meeting was held at RQIA on 20 December 2019 which resulted in the issue of a Notice of Proposal to Cancel the Registration of the Responsible Individual, Mr Paul Warren-Gray in respect of the Valley Nursing Home (MPS Ltd).

### 4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	23*	10*

\*Areas for improvement made at the previous care inspection were not reviewed at this inspection and have been carried forward for assessment at a future care inspection.

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Louise Hughes-McKenna, Deputy Manager and Mark Laight, Operations Director, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

# 4.2 Action/enforcement taken following the most recent inspection dated 16 and 17 December 2019

The most recent inspection of the home was an unannounced follow up care inspection undertaken on 16 and 17 December 2019.

Following this inspection, RQIA decided to issue a Notice of Proposal (NOP) to Cancel the Registration of the Responsible Individual (MPS Ltd) in respect of Valley Nursing Home. Enforcement action is ongoing in respect of the home.

#### 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, 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 and/or discussed during the inspection:

- duty rota for all staff for the period 30 December 2019 to 19 January 2020
- records of staffs' registration with their professional bodies

Areas for improvement identified at the last inspection were not reviewed and have been carried forward to be reviewed at a future care inspection.

The findings of the inspection were provided to the deputy manager and operations director at the conclusion of the inspection.

### 6.0 The inspection

#### 6.1 Review of areas for improvement from previous inspection(s)

The areas for improvement from the previous inspection on 16 and 17 December 2019 were not reviewed and have been carried forward to a future care inspection.

#### 6.2 Inspection findings

RQIA had been informed on 6 December 2019 by the Director of Care, Quality and Compliance that a new manager, Sheila O'Donaghue, was to commence employment on 6 January 2020. RQIA did not receive any further information from the Responsible Individual that that Mrs O'Donaghue was not in a position to take up post on the date advised. Upon arrival to the home we were informed that Louise Hughes-McKenna (deputy manager) was currently the acting manager of the home with effect from 15 January 2020. RQIA had not been appropriately informed of this change in management arrangements. The most recent information available to RQIA was that Anna Senir was to be the acting manager for Valley Nursing Home until Mrs O'Donaghue commenced in post.

We were informed that the new manager, Shelia O'Donaghue, had not yet commenced in post but was completing an induction. The duty rota was reviewed and it was confirmed that Sheila was not yet working in the home.

Upon review of records in relation to NMC registration it was confirmed that neither Anna Senir nor Sheila O'Donaghue were registered with NMC and could not therefore manage the nursing home.

Review of records and feedback from the senior management team provided assurance that other recruitment checks, including AccessNI checks, had been completed satisfactorily for both the incoming manager and the acting manager, Anna Senir.

The need to ensure that RQIA are informed in a timely manner of any changes to the management of the home was stressed along with the need to ensure personnel appointed have the relevant qualifications to undertake the role.

We spoke with four registered nurses and it was evident that they were confused about the management arrangements in the home.

This was discussed with the Responsible Individual following the inspection and it was agreed that Lorraine Cozma would be appointed to manage the nursing home. Lorraine previously managed the home and upon stepping down as manager has continued to work there as a registered nurse. RQIA were assured that she had the appropriate registration, qualifications and skill to manage the home. The responsible individual agreed to submit a notification in relation to the management arrangements to RQIA forthwith.

#### Areas for improvement

No new areas for improvement were identified.

	Regulations	Standards
Total number of areas for improvement	0	0

### 7.0 Quality improvement plan

Areas for improvement which have been carried forward from the previous care inspection are detailed in the QIP.

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 previously 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 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.

## **Quality Improvement Plan**

Action required to ensure Ireland) 2005	compliance with The Nursing Homes Regulations (Northern
Area for improvement 1 Ref: Regulation 13 (4)	The registered person shall review the systems in place for the management of oxygen to ensure that signage is in place, the location of oxygen is detailed in the fire plan and a policy for the
Stated: First time	use of oxygen in an emergency is available.
To be completed by:	Ref: 6.1
With immediate effect	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.
Area for improvement 2	The registered person shall take adequate precautions against the risk of fire.
<b>Ref:</b> Regulation 27 (4) (b) <b>Stated:</b> Third and final	This is with specific reference to the gaps identified to fire resistant doors.
	Ref: 6.1
To be completed by: With immediate effect	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.
Area for improvement 3	The registered person shall ensure that persons employed to work at the nursing home receive training relevant to their role.
<b>Ref:</b> Regulation 20 (1) (c) (iii)	With specific reference to:
Stated: Third and final time	<ul><li>the management of wounds</li><li>first aid</li></ul>
To be completed by:	dementia awareness
<b>To be completed by:</b> 31 December 2019	<ul> <li>behaviours which are challenging</li> <li>training in the use of Person Centred Software</li> </ul>
	Ref: 6.1
	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.

Area for improvement 4 Ref: Regulation 27 (2) (b)	The registered person shall ensure that the premises both internally and externally are kept in good state of repair. This relates to the uneven surface of the outdoor patient smoking area within the Valley suite.
<b>Stated:</b> Third and final time	Ref: 6.1
<b>To be completed by:</b> 31 August 2019	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.
<ul> <li>Area for improvement 5</li> <li>Ref: Regulation 13 (1) (a) (b)</li> <li>Stated: Third and final time</li> <li>To be completed by: With Immediate effect</li> </ul>	<ul> <li>The registered person shall promote and make proper provision for the nursing, health and welfare of patients as follows:</li> <li>Care plans must be written in a comprehensive and person centred manner; they must also be reflective of multiprofessional recommendations, as appropriate, and regularly reviewed by staff.</li> <li>Patients' wound care need must be consistently met in keeping with their prescribed care and best practice standards.</li> <li>Ref: 6.1</li> </ul>
	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.
Area for improvement 6 Regulation 14 (2) (a) (b) and (c)	The registered person shall ensure that cleaning chemicals are suitably labelled and stored in accordance with COSHH regulations. Ref: 6.1
Stated: Third and final time To be completed by: Immediate effect	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.
Area for improvement 7 Ref: Regulation 18 (2) (c) Stated: Second Time	The registered person shall having regard to the size of the nursing home and the number of patients provide adequate furniture, bedding and other furnishings suitable to meet the needs of the patients.
<b>To be completed by:</b> 7 July 2019	Ref: 6.1 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.

Area for improvement 8	The registered person shall ensure that the competency and capability assessments are completed and regularly updated, for
Ref: Regulation 20 (3)	any nurse who is given the responsibility of being in charge of the home for any period of time in the absence of the registered
Stated: Second time	manager. Records should be retained and available for inspection.
To be completed by: With immediate effect	Ref: 6.1
	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.
Area for improvement 9	The registered person shall, having regard to the number and
<b>Ref</b> : Regulation 27 (2) (t)	needs of the patients, ensure that a risk assessment to manage health and safety is carried out and updated when necessary.
Stated: Second time	With specific reference to:
<b>To be completed by:</b> With immediate effect	<ul> <li>use of electric heaters within patient areas</li> </ul>
	Ref: 6.1
	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.
Area for improvement 10	The registered person shall take adequate precautions against the risk of fire.
Ref: Regulation 27 (4) (b)	With specific reference to ensuring that fire doors are not wedged
Stated: Second time	open.
To be completed by: With Immediate effect	Ref: 6.1
	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.
Area for improvement 11	The registered person shall ensure that the infection prevention
<b>Ref</b> : Regulation 13 (7)	and control issues identified during this inspection are managed to minimise the risk of spread of infection.
Stated: Second time	Ref: 6.1
To be completed by: With Immediate effect	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.

Area for improvement 12	The registered person shall ensure that there is a robust system
<b>Ref:</b> Regulation 14 (4)	in place which ensures/demonstrates that patients are not placed at risk of harm or abuse. All governance records relating to the management of adult safeguarding matters should be maintained
Stated: Second time	in an effective manner at all times.
To be completed by: With immediate effect	Ref: 6.1
	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.
Area for improvement 13	The registered person shall ensure that staff patients are assisted with their moving and handling poods by staff in a safe and
<b>Ref</b> : Regulation 14 (3)	with their moving and handling needs by staff in a safe and effective manner at all times.
Stated: First time	Ref: 6.1
To be completed by: With immediate effect	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.
Area for improvement 14	The registered person shall ensure that the effective measures are in place to ensure that the dietary needs of patients requiring
<b>Ref</b> : Regulation 12 (4) (a)(b)(c)(d) & (e)	a modified diet are safely and effectively met at all times.
Stated: First time	Ref: 6.1
<b>To be completed by:</b> With immediate effect	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.
Area for improvement 15 Ref: Regulation 13 (8) (a)	The registered person shall make suitable arrangements to ensure that the nursing home is conducted in a manner which respects the privacy and dignity of patients.
Stated: First time	Ref: 6.1
To be completed by: With immediate effect	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.
Area for improvement 16	The registered person shall ensure that the needs of patients who present with behaviours which may challenge staff are assessed
<b>Ref</b> : Regulation 15 (2) (a) and (b)	appropriately and their needs kept under review.
Stated: First time	Ref: 6.1
To be completed by: With immediate effect	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.

Area for improvement 17	The registered person must ensure that the personal hygiene needs of patients are met in an effective and timely manner. The
<b>Ref</b> : Regulation 12 (1) (a) and (b)	delivery of this care must be documented appropriately particularly in relation to hair, nail and eye care.
Stated: First time	Ref: 6.1
To be completed by: With immediate effect	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.
Area for improvement 18 Ref: Regulation 12 (2); 27	The registered person shall ensure that equipment is properly maintained and suitable for use by patients.
(2) (c)	Ref: 6.1
Stated: First time	Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be
To be completed by: With immediate effect	carried forward to the next care inspection.
Area for improvement 19 Ref: Regulation 16 (1); (2) (b)(c) & (d) Stated: First time	The registered person shall ensure that care plans are in place to meet the needs of patients and that these are kept under regular review. The registered person shall also ensure that patients' care plans and risk assessments are reviewed in an effective and timely manner. This should include but is not limited to:
To be completed by: With immediate effect	<ul> <li>care of enteral sites</li> <li>insulin management</li> <li>daily fluid intake</li> <li>pressure relief/repositioning needs</li> <li>urinary catheter care</li> <li>management of distressed reactions</li> <li>Ref: 6.1</li> </ul>
	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.
Area for improvement 20 Ref: Regulation 17	The registered person shall introduce and ensure systems are maintained for reviewing at appropriate intervals the quality of nursing and other service provision in or for the purposes of the
Stated: First time	nursing home.
To be completed by:	Ref: 6.1
With immediate effect	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.

Area for improvement 21	The registered person shall ensure that complaints are recorded
Ref: Regulation 24	and managed appropriately.
Stated: First time	Ref: 6.1
To be completed by: With immediate effect	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.
Area for improvement 22 Ref: Regulation 21(1) (b)(c) Stated: First time	The registered person shall ensure that all persons are recruited in accordance with best practice and legislation and that the efficacy of this is present in staff recruitment and selection files prior to commencing employment. This relates specifically to ensuring that health checks for staff are completed and that gaps in previous employment are effectively reviewed.
To be completed by:	Ref: 6.1
With immediate effect	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.
Area for improvement 23	The registered person shall ensure that having regard to the size of the nursing home, the statement of purpose, and the number
Ref: Regulation 10 (1)	and needs of the patients, carry on or manage the nursing home
Stated: First time	(as the case may be) with sufficient care, competence and skill. This includes but is not limited to the management of staff
To be completed by:	sickness/absences, overview of training, induction, staff competencies, staff supervision/appraisal and audit systems.
With immediate effect	Ref: 6.1
	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.
-	compliance with the Department of Health, Social Services S) Care Standards for Nursing Homes, April 2015
Area for improvement 1	The registered person shall ensure that the level, nature and type of any restraint is proportionate to the risk it is attempting to
Ref: Standard 18	address and that relevant documentation is maintained including
Stated: First time	evidence of consultation with the patient (where appropriate), their next of kin and care manager.
<b>To be completed by:</b> 16 October 2019	This is with specific reference to the locking of bedroom doors within the identified unit of the home.
	Ref: 6.1
	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Area for improvement 2	The registered person shall ensure that all patients have a named
Ref: Standard 4	nurse who has responsibility for discussing, planning and agreeing the nursing interventions necessary to meet patients' assessed needs.
Stated: First time	Ref: 6.1
To be completed by: With immediate effect	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 3 Ref: Standard 39	The registered person shall ensure that newly appointed staff and agency staff complete a structured orientation and induction and records are retained.
<b>Stated:</b> Third and final time	Ref: 6.1
<b>To be completed by:</b> With immediate effect	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 4	The registered person shall review and revise the management of insulin. Insulin pens should be individually labelled and marked
Ref: Standard 30	with the date of opening. In-use insulin pens should be stored at room temperature.
Stated: Second time	Ref: 6.1
<b>To be completed by:</b> 20 September 2019	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 5	The registered person shall ensure that records of staff medicines management training and competency assessments are available
Ref: Standard 28	for inspection.
Stated: Second time	Ref: 6.1
To be completed by: With immediate effect	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 6 Ref: Standard 12	The registered person shall ensure that the dining experience of patients is promoted and maintained in keeping with best practice standards at all times.
Stated: Second time	Ref: 6.1
To be completed by: With immediate effect	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

Area for improvement 7	The registered person shall ensure that patients have effective access to the nurse call system at all times, as appropriate.
Ref: Standard 43	Ref: 6.1
Stated: First time	Action required to ensure compliance with this standard was
To be completed by: With immediate effect	not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 8	The registered person shall ensure that the confidentiality of patients' care records is effectively maintained at all times.
Ref: Standard 29	Ref: 6.1
Stated: First time	Action required to ensure compliance with this standard was
To be completed by: With immediate effect	not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 9 Ref: Standard 35	The registered person shall ensure that that an effective system is implemented and monitored for managing the professional registration of nursing and care staff at all times.
Stated: First time	Ref: 6.1
To be completed by: With immediate effect	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.
Area for improvement 10	The registered person shall ensure that effective arrangements are in place to ensure that person centred activities are provided
Ref: Standard 18	to patients in the absence of activities staff being on duty.
Stated: First time	Ref: 6.1
To be completed by: With immediate effect	Action required to ensure compliance with this standard was not reviewed as part of this inspection and this will be carried forward to the next care inspection.

\*Please ensure this document is completed in full and returned via Web Portal\*





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Tel028 9536 1111Emailinfo@rqia.org.ukWebwww.rqia.org.ukImage: Comparison of the state of t

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