



# Announced Follow up Care Inspection Report 4 March 2020



## Valley Nursing Home

**Type of Service: Nursing Home (NH)**

**Address: 8 Tullybroom Road, Clogher, BT76 0UW**

**Tel no: 028 8554 8048**

**Inspector: Jane Laird, Elaine Connolly and Lyn Buckley**

[www.rqia.org.uk](http://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 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, one unit for people living with dementia and one unit for people living with a brain injury. The adjacent building (Tullybroom House) provides care for people living with dementia.

### 3.0 Service details

<p><b>Organisation/Registered Provider:</b> Valley Nursing Home (MPS) Ltd</p> <p><b>Responsible Individual:</b> Paul Warren-Gray</p>	<p><b>Registered Manager and date registered:</b> Lorraine Margaret Cozma – registration pending</p>
<p><b>Person in charge at the time of inspection:</b> Lorraine Margaret Cozma, Manager</p>	<p><b>Number of registered places:</b> 96</p> <p>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</p>
<p><b>Categories of care:</b> Nursing Home (NH) DE – Dementia 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. TI – Terminally ill. MP – Mental disorder excluding learning disability or dementia. MP(E) - Mental disorder excluding learning disability or dementia – over 65 years.</p>	<p><b>Number of patients accommodated in the nursing home on the day of this inspection:</b> 62</p>

### 4.0 Inspection summary

A short notice announced inspection took place on 4 March 2020 from 10.45 hours to 13.45 hours.

The purpose of the inspection was to meet with Health Care Ireland Ltd (HCI Ltd) management team who are currently operating the home on behalf of the current provider and who have applied for registration of the Valley Nursing Home. Mr Paul Warren-Gray, the responsible individual for the Valley Nursing Home (MPS Ltd) has applied to cancel his registration. A previous Notice of Proposal to cancel registration, issued on 27 December 2019 was lifted on 30 January 2020 as RQIA were assured that actions had been taken to mitigate any risk to patients.

The inspection sought to provide assurances that patients were receiving safe and effective care during this transition period and to monitor progress with the homes action plan.

During this inspection we were able to evidence positive progress in developing and implementing new systems within the home. This included a review of the management structure, staff training, assessment of staff competency; and governance arrangements to assure the quality of patient care and other services provided by the nursing home.

Evidence of good practice was found in relation to staffing, communication with patients, relatives and staff, governance arrangements, quality improvement and maintaining good working relationships.

There were no new areas for improvement identified as a result of this inspection.

We saw patients relaxed and comfortable in their surroundings and in their interactions with other patients and with staff.

We spoke with staff on duty who commented positively in respect of the training and support they were receiving from the management team.

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

#### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	*23	*13

\*The total number of areas for improvement includes 23 regulations and 13 standards which have been carried forward for review at a future care inspection.

This inspection resulted in no new areas for improvement being identified. Findings of the inspection were discussed with Lorraine Margaret Cozma, Manager, Amanda Mitchell, Responsible Individual (application pending), Mary Stevenson, Quality Improvement and Training Lead and Karen Agnew, Health Care Ireland Ltd (HCI Ltd) as part of the inspection process and can be found in the main body of the report.

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

#### 4.2 Action/enforcement taken following the most recent inspection dated 28 January 2020

The most recent inspection of the home was an unannounced care inspection undertaken on 28 January 2020. Other than those actions detailed in the QIP no further actions were required to be taken following this inspection.

## 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:

- action plan
- staffing arrangements
- adult safeguarding
- refurbishment plans
- staff training
- a sample of governance audits/records

Areas for improvement from the previous 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 person in charge at the conclusion of the inspection.

## 6.0 The inspection

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

Areas for improvement from the previous inspection on 28 January 2020 were not reviewed during this inspection and have been carried forward to be reviewed at a future care inspection.

### 6.2 Inspection findings

#### Staffing arrangements/staff training

On arrival to the home we were greeted by the manager Lorraine Cozma along with the management team from Health Care Ireland Ltd (HCI Ltd) who provided an orientation of the home. The manager discussed the daily staffing levels within each unit and that these levels are reviewed regularly to ensure the assessed needs of the patients are met.

Staff were observed to be deployed in sufficient numbers during the inspection to ensure that patient needs were met in an appropriate time and manner. A discussion with staff further validated that improvements have been made since the previous inspection. Comments included:

- “Very positive atmosphere with new management.”
- “Staff morale is good at the moment.”
- “Lots of training.”

The notice board within each of the units clearly displayed the nurse in charge of the home in the absence of the manager and the names of the staff on duty for both day/night shifts over the 24 hour period. All nurses taking charge of the home had completed a competency assessment and a system had been implemented to include a written report at the end of each shift to ensure effective communication is maintained and reviewed daily by management. This was commended by the inspectors.

Discussion with staff evidenced that they were knowledgeable regarding their roles and responsibilities and confirmed that a new on line training system had been provided covering a range of topics relevant to patients care such as diabetes, dementia awareness and epilepsy. The management provided additional training dates for adult safeguarding and moving and handling.

### **Patient health and welfare**

Observation of the delivery of care evidenced that patients’ needs were met by the levels and skill mix of staff on duty. A system had been established for staff to record when patients decline assistance with personal hygiene so that this can be monitored by management. We observed staff attending to patients needs in a caring manner and as promptly as possible.

Consultation with eight residents individually, and with others in small groups, confirmed that living in the Valley Nursing Home was a positive experience. Comments included:

- “Everything is very good here.”
- “Happy. No concerns.”
- “Happy enough here.”
- “I’m doing the best.”

During the inspection there was clear evidence of a relaxed, pleasant and friendly atmosphere between patients and staff with music, television programmes, jigsaw puzzles and games observed throughout the home. An activity schedule was also on display in a prominent area within each unit in a colourful pictorial format and life story work had been commenced by the activity coordinators.

### **General Environment**

A review of the home’s environment was undertaken which evidenced ongoing redecoration/refurbishment within the home. Positive improvements had been made since the previous inspection with soft furnishing and decorative materials observed to a number of areas within the home. The HCI Ltd management team confirmed that the current refurbishment plan remains in effect with additional areas being reviewed to enhance the environment and patient experience. The progress of this plan will be reviewed at a future care inspection.

The outdoor surface to the courtyard within the Lane unit had been repaired and management discussed future plans to enhance the grounds and outdoor spaces for patient use. This was welcomed by the inspectors.

The management team discussed recent audits that had been completed on the overall environment to establish an oversight of the refurbishment plan and any equipment/furniture that required repair/replacement. Mattress audits had been completed on all mattresses within the home and staff were provided with training on how to assess a mattress for any issues and the appropriate action to take.

### **Management and governance arrangements**

Since the last inspection the acting manager, Lorraine Cozma, has applied for the registered manager's position and HCI Ltd are in the process of becoming the registered providers of the Valley Nursing Home.

We reviewed the homes action plan which had been devised following the most recent care inspection on 28 January 2020 by the management team with time frames and follow ups recorded. During the inspection the management team provided a detailed account of each action to be addressed and progress to quality assure the delivery of nursing and other services provided with written evidence of the action taken to improve and sustain the quality of care.

Staff confirmed that there were good working relationships in the home and that management were supportive and responsive to any suggestions or concerns raised. There was clear evidence of a robust governance network with the introduction of HCI Ltd to support the newly appointed manager in her role.

### **Areas for improvement**

There were no new areas for improvement identified during the inspection.

	<b>Regulations</b>	<b>Standards</b>
<b>Total number of areas for improvement</b>	0	0

### **7.0 Quality improvement plan**

There were no new areas for improvement identified during this inspection. Details of the QIP from the previous inspection as outlined below were not reviewed and have been carried forward for review at a future inspection.



## 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 27 (4) (b)</p> <p><b>Stated:</b> Third and final time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall take adequate precautions against the risk of fire.</p> <p>This is with specific reference to the gaps identified to fire resistant doors.</p> <p>Ref: 6.1</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>	
<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Regulation 20 (1) (c) (iii)</p> <p><b>Stated:</b> Third and final time</p> <p><b>To be completed by:</b> 31 December 2019</p>	<p>The registered person shall ensure that persons employed to work at the nursing home receive training relevant to their role.</p> <p>With specific reference to:</p> <ul style="list-style-type: none"> <li>• the management of wounds</li> <li>• first aid</li> <li>• dementia awareness</li> <li>• behaviours which are challenging</li> <li>• training in the use of Person Centred Software</li> </ul> <p>Ref: 6.1</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>	
<p><b>Area for improvement 3</b></p> <p><b>Ref:</b> Regulation 27 (2) (b)</p> <p><b>Stated:</b> Third and final time</p> <p><b>To be completed by:</b> 31 August 2019</p>	<p>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.</p> <p>Ref: 6.1</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>	



<p><b>Area for improvement 4</b></p> <p><b>Ref:</b> Regulation 13 (1) (a) (b)</p> <p><b>Stated:</b> Third and final time</p> <p><b>To be completed by:</b> With Immediate effect</p>	<p>The registered person shall promote and make proper provision for the nursing, health and welfare of patients as follows:</p> <ul style="list-style-type: none"> <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> </ul> <p>Ref: 6.1</p>
<p><b>Area for improvement 5</b></p> <p>Regulation 14 (2) (a) (b) and (c)</p> <p><b>Stated:</b> Third and final time</p> <p><b>To be completed by:</b> Immediate effect</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> <p>The registered person shall ensure that cleaning chemicals are suitably labelled and stored in accordance with COSHH regulations.</p> <p>Ref: 6.1</p>
<p><b>Area for improvement 6</b></p> <p><b>Ref:</b> Regulation 18 (2) (c)</p> <p><b>Stated:</b> Second Time</p> <p><b>To be completed by:</b> 7 July 2019</p>	<p>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.</p> <p>Ref: 6.1</p>
<p><b>Area for improvement 7</b></p> <p><b>Ref:</b> Regulation 27 (2) (t)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> With immediate effect</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> <p>The registered person shall, having regard to the number and needs of the patients, ensure that a risk assessment to manage health and safety is carried out and updated when necessary.</p> <p>With specific reference to:</p> <ul style="list-style-type: none"> <li>• use of electric heaters within patient areas</li> </ul> <p>Ref: 6.1</p>
<p><b>Area for improvement 7</b></p> <p><b>Ref:</b> Regulation 27 (2) (t)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> With immediate effect</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>

<p><b>Area for improvement 8</b></p> <p><b>Ref:</b> Regulation 27 (4) (b)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> With Immediate effect</p>	<p>The registered person shall take adequate precautions against the risk of fire.</p> <p>With specific reference to ensuring that fire doors are not wedged open.</p> <p>Ref: 6.1</p> <hr/> <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>
<p><b>Area for improvement 9</b></p> <p><b>Ref:</b> Regulation 14 (4)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that there is a robust system 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 in an effective manner at all times.</p> <p>Ref: 6.1</p> <hr/> <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>
<p><b>Area for improvement 10</b></p> <p><b>Ref:</b> Regulation 13 (4)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>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 use of oxygen in an emergency is available.</p> <p>Ref: 6.1</p> <hr/> <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>
<p><b>Area for improvement 11</b></p> <p><b>Ref:</b> Regulation 12 (4) (a)(b)(c)(d) &amp; (e)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that the effective measures are in place to ensure that the dietary needs of patients requiring a modified diet are safely and effectively met at all times.</p> <p>Ref: 6.1</p> <hr/> <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>

<p><b>Area for improvement 12</b></p> <p>Ref: Regulation 13 (8) (a)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>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.</p> <p>Ref: 6.1</p> <hr/> <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>
<p><b>Area for improvement 13</b></p> <p>Ref: Regulation 15 (2) (a) and (b)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that the needs of patients who present with behaviours which may challenge staff are assessed appropriately and their needs kept under review.</p> <p>Ref: 6.1</p> <hr/> <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>
<p><b>Area for improvement 14</b></p> <p>Ref: Regulation 12 (1) (a) and (b)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person must ensure that the personal hygiene needs of patients are met in an effective and timely manner. The delivery of this care must be documented appropriately particularly in relation to hair, nail and eye care.</p> <p>Ref: 6.1</p> <hr/> <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>
<p><b>Area for improvement 15</b></p> <p>Ref: Regulation 12 (2); 27 (2) (c)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that equipment is properly maintained and suitable for use by patients.</p> <p>Ref: 6.1</p> <hr/> <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>
<p><b>Area for improvement 16</b></p> <p>Ref: Regulation 17</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>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 nursing home.</p> <p>Ref: 6.1</p> <hr/> <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>

<p><b>Area for improvement 17</b></p> <p>Ref: Regulation 24</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that complaints are recorded and managed appropriately.</p> <p>Ref: 6.1</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>
<p><b>Area for improvement 18</b></p> <p>Ref: Regulation 21(1) (b)(c)</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>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.</p> <p>Ref: 6.1</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>
<p><b>Area for improvement 19</b></p> <p>Ref: Regulation 20 (3)</p> <p><b>Stated:</b> Third and final time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that the competency and capability assessments are completed and regularly updated, for 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 manager. Records should be retained and available for inspection.</p> <p>Ref: 6.1</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>
<p><b>Area for improvement 20</b></p> <p>Ref: Regulation 13 (7)</p> <p><b>Stated:</b> Third and final time</p> <p><b>To be completed by:</b> With Immediate effect</p>	<p>The registered person shall ensure that the infection prevention and control issues identified during this inspection are managed to minimise the risk of spread of infection.</p> <p>Ref: 6.1</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>

<p><b>Area for improvement 21</b></p> <p>Ref: Regulation 14 (3)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that patients are assisted with their moving and handling needs by staff in a safe and effective manner at all times.</p> <p>Ref: 6.1</p> <hr/> <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>
<p><b>Area for improvement 22</b></p> <p>Ref: Regulation 16 (1); (2) (b)(c) &amp; (d)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>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:</p> <ul style="list-style-type: none"> <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> </ul> <p>Ref: 6.1</p> <hr/> <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>
<p><b>Area for improvement 23</b></p> <p>Ref: Regulation 10 (1)</p> <p><b>Stated:</b> Second time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that 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. This includes but is not limited to the management of staff sickness/absences, overview of training, induction, staff competencies, staff supervision/appraisal and audit systems.</p> <p>Ref: 6.1</p> <hr/> <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>

<b>Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015</b>	
<b>Area for improvement 1</b> <b>Ref:</b> Standard 30 <b>Stated:</b> Second time <b>To be completed by:</b> 20 September 2019	The registered person shall review and revise the management of insulin. Insulin pens should be individually labelled and marked with the date of opening. In-use insulin pens should be stored at room temperature.  Ref: 6.1
	<b>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.</b>
<b>Area for improvement 2</b> <b>Ref:</b> Standard 28 <b>Stated:</b> Second time <b>To be completed by:</b> With immediate effect	The registered person shall ensure that records of staff medicines management training and competency assessments are available for inspection.  Ref: 6.1
	<b>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.</b>
<b>Area for improvement 3</b> <b>Ref:</b> Standard 12 <b>Stated:</b> Second time <b>To be completed by:</b> With immediate effect	The registered person shall ensure that the dining experience of patients is promoted and maintained in keeping with best practice standards at all times.  Ref: 6.1
	<b>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.</b>
<b>Area for improvement 4</b> <b>Ref:</b> Standard 18 <b>Stated:</b> First time <b>To be completed by:</b> 16 October 2019	The registered person shall ensure that the level, nature and type of any restraint is proportionate to the risk it is attempting to address and that relevant documentation is maintained including evidence of consultation with the patient (where appropriate), their next of kin and care manager.  This is with specific reference to the locking of bedroom doors within the identified unit of the home.  Ref: 6.1
	<b>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.</b>



<p><b>Area for improvement 5</b></p> <p>Ref: Standard 4</p> <p>Stated: First time</p> <p>To be completed by: With immediate effect</p>	<p>The registered person shall ensure that all patients have a named nurse who has responsibility for discussing, planning and agreeing the nursing interventions necessary to meet patients' assessed needs.</p> <p>Ref: 6.1</p> <p><b>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.</b></p>
<p><b>Area for improvement 6</b></p> <p>Ref: Standard 43</p> <p>Stated: First time</p> <p>To be completed by: With immediate effect</p>	<p>The registered person shall ensure that patients have effective access to the nurse call system at all times, as appropriate.</p> <p>Ref: 6.1</p> <p><b>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.</b></p>
<p><b>Area for improvement 7</b></p> <p>Ref: Standard 29</p> <p>Stated: First time</p> <p>To be completed by: With immediate effect</p>	<p>The registered person shall ensure that the confidentiality of patients' care records is effectively maintained at all times.</p> <p>Ref: 6.1</p> <p><b>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.</b></p>
<p><b>Area for improvement 8</b></p> <p>Ref: Standard 35</p> <p>Stated: First time</p> <p>To be completed by: With immediate effect</p>	<p>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.</p> <p>Ref: 6.1</p> <p><b>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.</b></p>
<p><b>Area for improvement 9</b></p> <p>Ref: Standard 18</p> <p>Stated: First time</p> <p>To be completed by: With immediate effect</p>	<p>The registered person shall ensure that effective arrangements are in place to ensure that person centred activities are provided to patients in the absence of activities staff being on duty.</p> <p>Ref: 6.1</p> <p><b>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.</b></p>



<p><b>Area for improvement 10</b></p> <p>Ref: Standard 39</p> <p><b>Stated:</b> Third and final time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that newly appointed staff and agency staff complete a structured orientation and induction and records are retained.</p> <p>Ref: 6.1</p> <hr/> <p><b>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.</b></p>
<p><b>Area for improvement 11</b></p> <p>Ref: Standard 39</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that patients' continence and personal hygiene needs are consistently met in keeping with their assessed needs / care plans.</p> <p>Ref: 6.1</p> <hr/> <p><b>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.</b></p>
<p><b>Area for improvement 12</b></p> <p>Ref: Standard 4</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> With immediate effect</p>	<p>The registered person shall ensure that detailed and person centred care plans are in place which outlines patients' preferences in regard to rising / retiring times.</p> <p>Ref: 6.1</p> <hr/> <p><b>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.</b></p>
<p><b>Area for improvement 13</b></p> <p>Ref: Standard 44</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 10 March 2020</p>	<p>The registered person shall ensure that staff facilities are available and remain suitable for their stated purpose.</p> <p>Ref: 6.1</p> <hr/> <p><b>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.</b></p>

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



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)

 [@RQIANews](https://twitter.com/RQIANews)