

Unannounced Enforcement Care Inspection Report 11 July 2017



Alpine House

Type of Service: Residential Care Home
Address: 20 Ballyholme Road, Bangor, BT20 5JN
Tel No: 028 9145 4904
Inspectors: Jo Browne and Gavin Doherty

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 residential care home with 22 beds that provides care for older people.

3.0 Service details

Organisation/Registered Provider: Alpine House/Mr Sathrouhun Bogun	Registered Manager: Joanne Glendinning
Person in charge at the time of inspection: Joanne Glendinning	Date manager registered: 3 April 2009
Categories of care: Residential Care (RC) I - Old age not falling within any other category	Number of registered places: 22

4.0 Inspection summary

An unannounced inspection took place on 11 July 2017 from 10.00 to 11.30. Gavin Doherty, estates inspector, was also present and will report his findings in a separate estates report.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

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 regulations were in relation to the environment, cleanliness of the home and wedging fire doors. The date of compliance with the notices was 11 July 2017.

The following FTC Notices were issued by RQIA on 14 June 2017:

FTC refs: FTC/RCH/1569/2017-18/01
 FTC/RCH/1569/2017-18/02
 FTC/RCH/1569/2017-18/03

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

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

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	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

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records: previous care inspection report, Quality Improvement Plan (QIP) and three Failure to Comply Notices.

During the inspection the inspector met with eight residents and two staff. No visiting professionals and no residents' visitors/representatives were present.

Areas for improvement identified at the last care inspection were not reviewed as part of this inspection unless they formed part of the FTC Notices; these are carried forward to the next 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 the most recent inspection dated 1 June 2017

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

6.2 Review of areas for improvement from the last care inspection dated 1 June 2017

This inspection focused solely on the actions contained within the Failure to Comply Notices issued on 14 June 2017. Areas for improvement from the last care inspection on 01 June 2017 were not reviewed as part of the inspection and are carried forward to the next care inspection. The QIP in 7.2 reflects the carried forward areas for improvement.

6.3 Inspection findings

FTC Ref: FTC/RCH/1569/2017-18/01

Notice of failure to comply with regulation 27 of The Residential Care Homes Regulations (Northern Ireland) 2005

Fitness of premises

Regulation 27.-

(2) The registered person shall, having regard to the number and needs of the residents, ensure that -

(b) the premises to be used as the home are of sound construction and kept in a good state of repair externally and internally;

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

- All areas identified during inspection must be satisfactorily addressed
- Damaged furniture/items must be repaired or replaced and lights in all residents' bedrooms must be functional and fit for purpose
- A robust maintenance regime must be established and implemented to ensure that the home is well maintained on an ongoing basis

Review of the environment and discussion with the registered manager confirmed that the all areas identified within the FTC Notice had been addressed with the exception of the following:

- Two wardrobes were found not secured to the wall
- There was no hot water supply to the hand washing sink in the upstairs toilet
- Mirrors had not been fitted in all bedrooms above the sinks
- The chairs in the communal lounges had been repaired but not replaced

Photographic evidence was forwarded to RQIA via email on 13 July 2017 confirming that the wardrobes had been secured and the mirrors installed. The registered provider also confirmed via email on 13 July 2017 that he had made arrangements for a water heater to be fitted to the hand washing sink in the upstairs toilet and that new chairs had been ordered for the communal lounges.

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

FTC Ref: FTC/RCH/1569/2017-18/02

Notice of failure to comply with regulation 27 of The Residential Care Homes Regulations (Northern Ireland) 2005

Fitness of premises

Regulation 27.-

(2) The registered person shall, having regard to the number and needs of the residents, ensure that –

(d) all parts of the home are kept clean and reasonably decorated;

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

- A deep clean of the areas identified during the inspection must be undertaken
- A robust cleaning arrangement must be put in place to ensure that the home is maintained to a satisfactory standard of cleanliness and hygiene on an ongoing basis

Inspection of the premises and discussion with the registered manager confirmed that a deep clean had been undertaken and arrangements were in place to ensure that the home is maintained to satisfactory standard of cleanliness and hygiene on an ongoing basis.

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

FTC Ref: FTC/RCH/1569/2017-18/03

Notice of failure to comply with regulation 27 of The Residential Care Homes Regulations (Northern Ireland) 2005

Fitness of premises

Regulation 27.-

(4) The registered person shall –

(b) take adequate precautions against the risk of fire, including the provision of suitable fire equipment;

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

- Fire doors must not be wedged open at any time; this action must take place with immediate effect
- Safe alternative arrangements must be put in place to ensure adequate ventilation in the laundry room and the office

All fire doors were observed to be closed and the registered manager confirmed that staff are aware that wedges must not be used at any time. Arrangements had been made to install a

hold open device to the fire door of the laundry room immediately following the July holiday period.

Advice was given by Gavin Doherty, estates inspector, regarding ventilation and extraction of heat from the laundry room.

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

Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Number of areas for improvement	0	0

6.4 Conclusion

Evidence was available to validate compliance with the three Failure to Comply Notices either at the time of the inspection or was submitted by email to RQIA on 14 July 2017.

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 1 June 2017. This inspection focused solely on the actions contained within the three Failure to Comply Notices issued on 14 June 2017.

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 residential care 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 Residential Care Homes Regulations (Northern Ireland) 2005 and the DHSSPS Residential Care Homes Minimum Standards, August 2011.

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 on 1 June 2017 and has returned completed QIP to care.team@rqia.org.uk 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 The Residential Care Homes Regulations (Northern Ireland) 2005	
Area for improvement 1 Ref: Regulation 27 (2) (b) Stated: Second time To be completed by: 11 July 2017	<p>The registered person shall ensure the following areas identified as requiring improvement are made good: the window and handles in the dining room need replaced, one identified vanity unit needs replaced, the pathway into the home needs repaired.</p> <p>This area for improvement formed part of a Failure to Comply Notice issued on 14 June 2017.</p>
Area for improvement 2 Ref: Regulation 19 (3) b Stated: First time To be completed by: 1 July 2017	<p>The registered person shall ensure that the records referred to in paragraphs (1) and (2) are at all times available for inspection in the home by any person authorised by the Regulation and Improvement Authority to enter and inspect the home.</p> <p>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.</p>
Area for improvement 3 Ref: Regulation 20 (1) (a) Stated: First time To be completed by: 1 July 2017	<p>The registered person shall ensure that alternative staffing arrangements are put in place when staff are not available for duty.</p> <p>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.</p>
Area for improvement 4 Ref: Regulation 19 (2) Schedule 4, 6 Stated: First time To be completed by: 1 July 2017	<p>The registered person shall ensure that the hours worked by the registered manager are recorded on the staff duty rota, that the designations of staff are noted and that the person in charge of the home is specified.</p> <p>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.</p>

Action required to ensure compliance with The Residential Care Homes Regulations (Northern Ireland) 2005	
Area for improvement 5 Ref: Regulation 27 (2) (b) Stated: First time To be completed by: 11 July 2017	<p>The registered person shall ensure that all areas identified during inspection must be satisfactorily addressed. Damaged furniture/items must be repaired or replaced and lights in all residents' bedrooms must be functional and fit for purpose. A robust maintenance regime must be established and implemented to ensure that the home is well maintained on an ongoing basis.</p> <p>This area for improvement formed part of a Failure to Comply Notice issued on 14 June 2017.</p>
Area for improvement 6 Ref: Regulation 27 (2) (d) Stated: First time To be completed by: 11 July 2017	<p>The registered person shall ensure that a deep clean of the areas identified during the inspection is undertaken. A robust cleaning arrangement must be put in place to ensure that the home is maintained to a satisfactory standard of cleanliness and hygiene on an ongoing basis.</p> <p>This area for improvement formed part of a Failure to Comply Notice issued on 14 June 2017.</p>
Area for improvement 7 Ref: Regulation 27 (4) (b) Stated: First time To be completed by: 11 July 2017	<p>The registered person shall ensure that fire doors must not be wedged open at any time; this will be with immediate effect. Safe alternative arrangements must be put in place to ensure adequate ventilation in the laundry room and the office.</p> <p>This area for improvement formed part of a Failure to Comply Notice issued on 14 June 2017.</p>
Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011	
Area for improvement 1 Ref: Standard 20.9 Stated: First time To be completed by: 1 August 2017	<p>The registered person shall ensure that the Residents Guide is reviewed to adequately describe any restrictions used within the home.</p> <p>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.</p>

Action required to ensure compliance with the DHSSPS Residential Care Homes Minimum Standards, August 2011	
Area for improvement 2 Ref: Standard 28.5 Stated: First time To be completed by: 1 July 2017	<p>The registered person shall ensure that all recommendations stated in the home's fire risk assessment are dated and signed when completed.</p> <p>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.</p>
Area for improvement 3 Ref: Standard 9.1 Stated: First time To be completed by: 1 August 2017	<p>The registered person shall ensure that the contact details of residents' dentists, opticians and other professionals involved in care are consistently recorded.</p> <p>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.</p>
Area for improvement 4 Ref: Standard 6.6 Stated: First time To be completed by: 1 July 2017	<p>The registered person shall ensure that the diabetic needs of residents are noted in all relevant areas of the care records.</p> <p>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.</p>
Area for improvement 5 Ref: Standard 1.2 Stated: First time To be completed by: 1 August 2017	<p>The registered person shall ensure that residents' meeting are held regularly.</p> <p>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.</p>
Area for improvement 6 Ref: Standard 1.3 Stated: First time To be completed by: 1 August 2017	<p>The registered person shall ensure that residents' views and wishes are obtained and taken into account in regard to crockery options used in the home, menu choices and the provision of drinks.</p> <p>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.</p>



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