

# Announced Variation to Registration Care Inspection Report 23 August 2017



# **Faith House**

Type of Service: Nursing Home Address: 25 Orpen Park, Belfast, BT10 0BN Tel no: 028 9061 2318 Inspector: James Laverty

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 registered nursing home which is registered to provide nursing care and residential care for up to 65 persons.

#### 3.0 Service details

Organisation/Registered Provider: Board of Trustees - Faith House Responsible Individual(s): Mervyn Wishart	Registered Manager: Jane Moore.
Person in charge at the time of inspection: Jane Moore	Date manager registered: 09 January 2015
Categories of care: Nursing Home (NH) I – Old age not falling within any other category. PH – Physical disability other than sensory impairment. TI – Terminally ill. Residential Care (RC) I – Old age not falling within any other category.	Number of registered places: 67 comprising: 36 – NH-I, NH-PH and NH 31 – RC-I.

### 4.0 Inspection summary

An announced variation to registration inspection of Faith House took place on 23 August 2017 from 10.00 to 12.30 hours.

The inspection was carried out along with an estates inspector and a separate report will be issued in respect of the estates inspection.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003; The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005; The Nursing Homes Regulations (Northern Ireland) 2005; and the DHSSPS Care Standards for Nursing Homes 2015.

The inspection sought to assess an application submitted to RQIA for a variation to the registration of Faith House reflecting the addition of an 11 bedded extension to the nursing home. The extension will be for the sole provision of nursing care and this variation has resulted in an overall increase of available nursing beds within the home from 65 to 67 beds.

The variation to registration for Faith House was granted from a care perspective following this inspection.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients' 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. Findings of the inspection were discussed with Jane Moore, registered manager and Mr Mervyn Wishart, Responsible Person, as part of the inspection process and can be found in the main body of the report.

#### 4.2 Action/enforcement taken following the most recent inspection dated 18 May 2017

The most recent inspection of the home was an unannounced care inspection undertaken on 18 May 2017. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of this inspection.

# 5.0 How we inspect

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

- the application to vary the registration of the home
- notifiable events since the previous care inspection
- written and verbal communication received since the previous care inspection which includes information in respect of serious adverse incidents(SAI's), potential adult safeguarding issues and whistleblowing
- the returned QIP from the previous care inspection
- the previous care inspection report
- the statement of purpose
- the patient guide
- RQIA registration certificate

The findings of the inspection were provided to the registered manager at the conclusion of the inspection.

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.

### 6.0 The inspection

## 6.1 Review of areas for improvement from the most recent inspection dated 18 May 2017

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

The completed QIP was returned and approved by the care inspector.

#### 6.2 Review of areas for improvement from the last care inspection dated 18 May 2017

Areas for improvement from the last care inspection				
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005		Validation of compliance		
Area for improvement 1 Ref: Regulation 13(1)(a)	The registered persons must ensure that there is proper provision for the health and welfare of patients.			
<b>Stated:</b> First time time	The nurse in charge of the home must ensure that all patients are assessed by a registered nurse following an accident and that any treatment required is delivered.			
	In the event of a suspected head injury central nervous system (CNS) observations must be completed.	Carried forward to the next care inspection		
	Action taken as confirmed during the inspection:			
	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 Ref: Regulation 10 (1) Stated: First time	The responsible person and registered manager must identify any gaps in their knowledge of the application of relevant legislation, and take appropriate action to rectify. They must demonstrate a clear understanding of the process to vary the registration of the home, including timescales and action required. <b>Action taken as confirmed during the</b> <b>inspection</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.	Carried forward to the next care inspection
Action required to ensure Nursing Homes (2015)	e compliance with The Care Standards for	Validation of compliance
Area for improvement 1 Ref: Standard 43.2 Stated: First time	The registered persons should ensure that the seating in the identified lounge is reviewed to ensure it is suitable to meet the needs of the patients. Any chair identified as compromising safe moving and handling practices should be replaced. Action taken as confirmed during the inspection: 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.	Carried forward to the next care inspection
Area for improvement 2 Ref: Standard 4 Stated: First time	The registered persons should ensure that care plans are in place to direct wound care. Action taken as confirmed during the inspection: 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.	Carried forward to the next care inspection

This inspection focused solely on the variation to registration application made by the registered provider to RQIA. The areas for improvement from the last care inspection on 18 May 2017 were not reviewed as part of the inspection and are carried forward to the next care inspection.

#### 6.3 Inspection findings

#### Environment

The inspectors viewed the premises accompanied by senior management of the home.

The newly built extension has been designed to provide accommodation for 11 patients and forms part of the existing ground floor in which nursing and residential care is currently provided.

The new bedrooms and communal lounge area were presented to a high specification and were tastefully decorated. All bedrooms are equipped with a range of built in furniture, television and en-suite facilities. Telephone outlets are available if required. It was observed that temporary signage was in place for the new bedrooms and some communal areas. This was discussed with the registered manager and it was agreed that permanent signage would be put in place once existing patients were transferred into their new bedrooms.

Communal bathrooms and toilet facilities are also available within the new extension. One communal bathroom also features a new 'tracking hoist' to aid staff with the safe moving and handling of patients. However, it was noted that the slings which are required for the use of such equipment was not yet available. This was highlighted to the registered manager who subsequently confirmed following this inspection that discussions remain ongoing with patients as to their bathing preferences and needs. The importance of having the correct slings for such equipment in order to safeguard the safety and well-being of patients was stressed.

Dining provision will continue to be provided by the home's existing kitchen facilities and patients will retain the choice of dining either within existing communal dining areas or their own bedrooms, as appropriate.

A newly created nurses' station has been located within the new extension and provides a clear view of a new communal lounge area. It was highlighted to the registered manager that there was no lockable storage space within this office area for staff to use. The registered manager stated that the specific manner in which nurses will use this office had yet to be decided and that this was going to be discussed further with staff. It was stressed that all staff must ensure that patient records are stored securely at all times in compliance with the Nursing Homes Regulations (Northern Ireland) 2005.

Wall mounted dispensers containing personal protective equipment (PPE) for staff to use was noted in one area of the new extension. This was discussed with the registered manager and it was agreed that additional dispensers containing PPE would be beneficial for staff. The registered manager has subsequently confirmed following this inspection that a further two PPE dispensers are now available within the new extension.

Access and egress to the new extension was also considered. A new interior courtyard area has been developed as a result of the building work and the registered manager stated that patient use of this area will be encouraged. It was found however that while patients could easily access this inner courtyard area via a designated fire door, there was no way for them to re-enter the building if the door closed behind them. It was also observed that two further fire escape doors within the new extension were not alarmed so as to alert staff to their use. It was further highlighted that a metal railing parallel to the new extension should be extended to ensure patient safety. These matters were discussed with the registered manager, responsible person and the estates inspector. A separate report will be issued in respect of the premises inspection in which these matters will be addressed further.

### Staffing

Discussion with the registered manager confirmed that as the new bedrooms were being assigned to existing patients within the home, no additional staff were required. It was agreed that staffing levels and skill mix should continue to be reviewed in accordance with the health and welfare needs of the patients accommodated within the home. These staffing arrangements will be reviewed and monitored at subsequent care inspections against relevant legislative and best practice standards. The registered manager stated that staff within the home are "excited" about working and providing care within the new facilities.

#### **Governance Arrangements**

It was confirmed that Jane Moore will continue to act as the home's registered manager. The registered manager stated that there are no anticipated changes to the operational structure of the home arising from this variation to registration.

#### Home's Statement of purpose and Patient Guide

It was confirmed that the statement of purpose and the patient guide had been appropriately updated in order to reflect the changes arising from this variation to registration. The need to ensure on an ongoing basis that these documents accurately reflect the both the range of services provided and the delivery of care within the home was highlighted.

#### Admission planning

A discussion with the registered manager and the responsible person confirmed that each of the 11 bedrooms would be assigned to existing nursing patients within the home. In order to ensure that patients and staff were afforded sufficient time to adjust to these changes it was agreed that no more than two patients per day would be transferred into their new bedrooms. Following this inspection, the registered manager has subsequently confirmed that all patients have transferred into their new bedrooms and that feedback from these patients to date has been positive.

#### Areas of good practice

Areas of good practice were observed in relation to the interior environment of the home.

#### Areas for improvement

No areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

#### 6.4 Conclusion

The application to vary the registration of Faith House was granted from a care perspective following this inspection.

#### 7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.

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 <u>www.rqia.org.uk/webportal</u> or contact the web portal team in RQIA on 028 9051 7500.





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