

Announced Variation to Registration Care Inspection Report 5 March 2018



Nazareth House Care Village

Type of Service: Nursing Home Address: 516 Ravenhill Road, Belfast, BT6 0BW Tel No: 028 0690600 Inspector: Heather Sleator

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 for up to 48 persons.

3.0 Service details

Registered Provider: Poor Sisters of Nazareth Responsible Individual: Jenny Hall	Registered Manager: Patricia McMullan
Person in charge at the time of inspection: Patricia McMullan	Date manager registered: 30 September 2008
Categories of care: Nursing Home (NH) 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	Number of registered places: 48

4.0 Inspection summary

An announced variation to registration inspection of Nazareth House Care Village took place on 5 March 2018 from 10.00.to16.00.

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 from Nazareth House Care Village for the registration of 12 additional nursing beds and to assess the establishment's readiness to admit patients.

Information has been gathered throughout the registration and inspection process. Scrutiny of this information means that the registration is granted from a care perspective. A separate report will be issued in respect of an estates inspection undertaken on the same day.

There were examples of good practice evidenced in relation to the general environment which was completed to a high standard, the governance and management arrangements; staff development and training; and the planned phased admissions to the home.

No areas for improvement were identified during the 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 Jenny Hall, General Manager and Patricia McMullan, Registered Manager, 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 12 October 2017

The most recent inspection of the home was an unannounced medicines management inspection undertaken on 12 October 2017. Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 12 October 2017.

5.0 How we inspect

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

- variation submitted to RQIA to increase occupancy from 48 to 60 beds
- the proposed statement of purpose
- the proposed patients' guide
- a selection of policies and procedures
- 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 previous care inspection report
- the returned QIP from the previous care inspection

Specific methods/processes used in this inspection include the following:

- an examination of the general environment of the home and its readiness to admit patients
- a review of the statement of purpose
- a review of the patient's guide
- a review of recruitment files for new staff and an overview of the numbers of staff recruited to date
- a review of staff training and induction records
- a review of the staff duty rota and planned skill mix
- a discussion regarding the admission plans for patients

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

Areas for improvement identified at the last care inspection were reviewed and assessment of compliance recorded as met.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 12 October 2017

The most recent inspection of the home was an unannounced medicines management inspection.

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

6.2 Review of areas for improvement from the last care inspection dated 22 August 2017

Areas for improvement from the last care inspection				
Action required to ensure compliance with The Care Standards for Nursing Homes (2015)		Validation of compliance		
Area for improvement 1 Ref: Standard 4.1 Stated: First time	The registered person shall ensure that patient care records evidence that care plans, reflective of current assessed need, are available at all times. Action taken as confirmed during the inspection: Discussion with the registered manager confirmed that registered nurses had been made aware of the need to ensure care records reflect patient need at all times, this included patients who are readmitted for a period of respite care.	Met		

6.3 Inspection findings

Environment

The responsible individual and the registered manager accompanied the inspectors to assess the new facilities.

Nazareth House Care Village will provide accommodation for 60 patients in Streets 3 and 4 and Streets 5 and 6. The home is situated in a quiet open area and offers bright and spacious accommodation on one level. All areas of the home are wheelchair accessible.

The variation proposed six additional nursing beds in Streets 3 and 4 and six in Streets 5 and 6. Patient bedrooms and additional communal lounge areas were presented to a high specification and were tastefully decorated. All bedrooms were equipped with a range of built in furniture and ensuite facilities. Communal bathrooms and toilet facilities are also available in each unit.

Each of the streets has an existing dining area which is well furnished with tables and chairs suitable to the individual needs of the patients. There is sufficient space in the existing dining rooms to accommodate an additional six patients. This was confirmed by the estates inspector. Each unit had a sluice and treatment room which were equipped with appropriate equipment.

There is a nurses' station in each unit where there is adequate storage space available to ensure that the patients' care records are stored securely. The registered manager's office is situated near the front entrance to the home.

The home has a busy and varied activities programme in place. There are arrangements in place to meet patients' religious and spiritual needs, there is a daily service in the home which patients can attend in the home's chapel. There is also a café, a shop, library facilities (including audio tapes), a reminiscence room and a holistic therapy room. There is a monthly newsletter produced to help keep patients and representatives informed of upcoming events and information.

Adequate car parking facilities are provided.

Statement of Purpose & Service User's Guide

Prior to the inspection the statement of purpose and the service user guides were submitted to RQIA and a review of both documents found them to be satisfactory and reflect the additional facilities.

Policies and Procedures

A policy and procedure manual was available and centrally indexed the policies and procedures for all operational areas of the home. A sample of policies and procedures reviewed evidenced that they included the date when issued, reviewed or revised. A system is in place to ensure that policies and procedures are reviewed three yearly minimum and more frequently if required.

Recruitment processes and staff induction

A review of recruitment records for five staff members selected at random was undertaken. All records were maintained in keeping with legislative requirements. Systems and processes were in place to ensure the staff received a comprehensive induction and records were appropriately maintained.

Staff training records

A review of information evidenced that a training schedule was in place. Review of the training matrix/schedule for 2017/18 indicated that training was planned to ensure that mandatory training requirements were met. Staff training was delivered by a training organisation that come into the home. The registered manager monitors staff compliance with mandatory training requirements. When staff complete training, their attendance is inputted onto a computerised system.

Training compliance is monitored on a monthly basis by the Human Resource (HR) Officer of Nazareth Care who provides a list of outstanding training for individual staff members to the registered manager. The registered manager then arranges training in the required areas. The registered manager had a system to alert the nurse in charge of each unit for staff who had not completed their training. Staff are given a timeframe to complete any outstanding training and if not done so the staff member responds directly to the registered manager. Records for training completed were maintained in accordance with the Care Standards for Nursing Homes, DHSSP's 2015.

Admission planning

A discussion with the registered manager and other management representatives advised that the arrangements for the admission of patients to the home were being co-ordinated with input from the Health and Social Care Trusts. Admissions to the units are planned to proceed on a phased basis ensuring that adequate time is given to allow staff to get to know the patients and become familiar with their new surroundings. The general manager stated that there would be no admissions to the home until the newly appointed staff were inducted and working as per the duty rota.

Staffing

A review of the template for recording the staff duty rota confirmed that it was in keeping with legislation and Care Standards for Nursing Homes, 2015. A discussion with the registered manager outlined the proposed staffing structure and that these would be reviewed in accordance with the health and welfare needs of the patients to be accommodated. The staffing arrangements will be reviewed and monitored at subsequent care inspections.

Areas of good practice

There were examples of good practice evidenced in relation to the general environment, the governance and management arrangements; staff development and training; and the phasing of planned admissions to 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 Nazareth House Care Village 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.





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