

# Unannounced Enforcement Compliance Inspection Report 13 February 2017



## Ashbrooke Care Home

**Type of Service: Nursing Home**

**Address: 2a Ashbourne Manor, Old Tempo Road,  
Enniskillen, BT74 4BB**

**Tel no: 02866325500**

**Inspectors: Aveen Donnelly & James Laverty**

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Assurance, Challenge and Improvement in Health and Social Care

## 1.0 Summary

An unannounced inspection of Ashbrooke Care Home took place on 13 February 2017 from 09.20 to 12.15 hours.

The purpose of this inspection was to assess the level of compliance achieved by the home regarding a failure to comply notice FTC Ref: FTC/NH/1853/2016-17/01 issued on 10 November 2016. The areas for improvement and compliance with regulation were in relation to the quality of nursing care.

At the compliance inspection on 11 January 2017 evidence was not available to validate full compliance with the failure to comply notice. However, there was evidence of some improvement and RQIA agreed to extend the compliance date until 11 February 2017 - FTC Ref: FTC/NH/1853/2016-17/01(E).

At the compliance inspection carried out on the first working day following the compliance date, evidence was available to validate full compliance with the failure to comply notice.

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.

Throughout the report the term 'patients' is used to describe those living in Ashbrooke which provides both nursing and residential care.

## 1.1 Inspection outcome

The previous quality improvement plan (QIP) was not validated during this inspection due to the enforcement compliance focus, and will be carried forward for validation at a future care inspection.

The findings of this inspection were discussed with John Rafferty, Responsible Individual for Runwood Homes Ltd, and Ciara Cochrane, Home Manager, as part of the inspection process.

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

## 1.2 Actions/enforcement taken following the most recent inspection

The most recent inspection of the home was an unannounced enforcement compliance inspection undertaken on 11 January 2017.

The purpose of this inspection was to assess the level of compliance achieved by the home regarding the failure to comply notice issued on 10 November 2016 - FTC Ref: FTC/NH/1853/2016-17/01

Evidence at the time of inspection was not available to validate full compliance with the above failure to comply notice. However, there was evidence of some improvement and progress made to address the required actions within the notice.

Following the inspection, RQIA agreed to extend the compliance date up to the legislative timeframe of 90 days to allow Ashbrooke Care Home the full time to address the breaches of regulation outlined in FTC Ref: FTC/NH/1853/2016-17/01. Compliance with the notice was extended until 11 February 2017.

RQIA have also reviewed any evidence available in respect of serious adverse incidents (SAI's), potential adult safeguarding issues, whistle blowing and any other communication received since the previous care inspection.

## 2.0 Service details

<b>Registered organisation/registered person:</b> Runwood Homes Ltd Mr John Rafferty, Responsible Individual	<b>Registered manager:</b> Not yet registered
<b>Person in charge of the home at the time of inspection:</b> Ciara Cochrane, Home Manager	<b>Date manager registered:</b> Ciara Cochrane - application not yet submitted
<b>Categories of care:</b> NH-I, RC-DE, NH-DE  A maximum number of 32 patients in category NH-DE and a maximum of 8 patients in category NH-I. A maximum of 24 residents in category RC-DE.	<b>Number of registered places:</b> 64

## 3.0 Methods/processes

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

Prior to inspection we analysed the following information:

- the requirements as indicated in the failure to comply notice FTC Ref: FTC/NH/1853/2016-17/01(E)
- the registration status of the home
- notifiable events submitted since the previous care inspection
- written and verbal communication received since the previous care inspection
- the previous enforcement inspection report
- pre inspection assessment audit.

The following information was examined during the inspection:

- discussion with the responsible individual and home manager
- patient care records
- supplementary care records, including repositioning charts
- staff training records
- audits in relation to care records and repositioning records

In addition one patient's representative and the ambassador for Ashbrooke Care Home, who is a patient representative, were also consulted.

## 4.0 The inspection

### 4.1 Review of requirements and recommendations from the most recent inspection dated 11 January 2017

The most recent inspection of the home was an unannounced enforcement compliance inspection. The completed QIP was not due to be returned at the time of this inspection. The QIP was therefore not validated during this inspection due to the enforcement compliance focus. The requirements and recommendations have been carried forward for validation at a future care inspection.

## 4.2 Inspection findings

### 4.2.1 FTC Ref: FTC/NH/1853/2016-17/01(E)

#### **Notice of Failure to Comply with Regulation 12 (1) (a) and (b) of The Nursing Homes Regulations (Northern Ireland) 2005**

**The registered person shall provide treatment, and other services to patients in accordance with the statement of purpose, and shall ensure that the treatment and other services provided to each patient –**

- (a) meets his individual needs**
- (b) reflects current best practice**

In relation to this notice the following seven actions were required to be evidenced in order that compliance with this regulation can be achieved.

- The registered person must ensure that care plans are maintained to reflect patients' assessment of need and risk assessments. The care records must be regularly reviewed, with the outcomes for patients' needs, evaluated and recorded in the daily progress notes.
- The registered person must ensure that patients' weights are monitored, in accordance with their care plan and level of risk. Subsequent action taken in response to any identified deficits should be clearly recorded in the patient's care records.

- The registered person must ensure that appropriate actions are taken when a patient requires wound care or has been identified at high risk of pressure damage.
- The registered person must ensure that patients are repositioned in accordance with care plans and that repositioning records are accurately maintained.
- The registered person must ensure that accidents and incidents are managed in accordance with best practice guidelines, and appropriate actions are taken to minimise risks to patient's health and welfare.
- The registered person must ensure that staff are provided with training relevant to their role and responsibilities in relation to; the management of wounds, prevention of pressure damage, nutrition and accident and incidents with specific focus on the management of head injuries.
- The registered person must ensure sufficiently robust audit and governance systems are in place to quality assure the delivery of nursing care. On this occasion, this refers to the areas of concerns identified above.

**Three of the actions outlined in the notice above achieved compliance at the last enforcement compliance inspection. The four outstanding actions were reviewed as part of this inspection.**

A review of patient care records evidenced that a range of validated risk assessments were completed and reviewed in response to the changing needs of patients. The review of the care records also evidenced that the care plans were very person-centred and reflected the patients' current care needs.

The review of the supplementary care records regarding the prevention of pressure damage evidenced that repositioning charts were being consistently maintained in accordance with the patients' care plans. The repositioning records included a report on the condition of the patients' skin at each positional change and there was evidence within the care records that the repositioning regimes were checked by the home manager and reviewed in response to individual patients' needs.

A review of training records evidenced that training for staff regarding; the management of wounds; prevention of pressure damage, and nutrition had been provided. The findings of this inspection evidenced that improvements had been made in relation to the shortfalls identified during the previous inspection.

Discussion with management and a review of information evidenced that auditing systems had been developed and implemented as outlined in the failure to comply notice. There was evidence that the patients' repositioning records were audited by the home manager on a regular basis. Similarly, the review of the care record audits, confirmed that every patient's care record had been audited. Advice was given in relation to the further development of the care record audit tool, to ensure that appropriate actions would be taken in a timely manner to address any shortfalls identified.

## **Conclusion**

Evidence at the time of inspection demonstrated full compliance within the areas identified in the failure to comply notice FTC Ref: FTC/NH/1853/2016-17/01(E).

## 5.0 Quality improvement plan

There were no issues identified during this inspection, and a QIP is neither required, nor included, as part of this inspection report.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.



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