

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)

FAILURE TO COMPLY NOTICE

Name of Registered Establishment: Drumary House (RQIA ID: 1152)	Name of Registered Person: Ms Nicki Stadames
Address of Registered Establishment: 44 Knockmore Road, Derrygonnelly, BT93 6GA	
Issue Date: 20 July 2020	FTC Ref: FTC000104
Regulation not complied with: <i>The Residential Care Homes Regulations (Northern Ireland) 2005</i> <i>Registered person: general requirements</i> <i>Regulation 10.—</i> <i>(1) The registered provider and the registered manager shall, having regard to the size of the residential care home, the statement of purpose, and the number and needs of the residents, carry on or manage the home (as the case may be) with sufficient care, competence and skill.</i>	
Specific failings to comply with regulations: During the care inspection of 9 July 2020, concerns were identified regarding the governance and management oversight of the home. There was a lack of robust systems to regularly review the quality of care and other services provided by the home. This included, but is not limited to, the oversight and management of the home's environment, restrictive practices, infection prevention and control measures, recording and reporting of accidents and incidents, management of complaints, care records, risk management, governance audits and maintenance of duty rotas. There was a lack of reference to Northern Ireland specific guidance and legislation within the home's policies and procedures, for example, the Mental Capacity Act 2016 and COVID-19 guidance. Records were not sufficiently robust to assure us that staff were appropriately registered with the Northern Ireland Social Care Council (NISCC). RQIA was concerned about the ability of the home to meet the needs of two residents whose dependency levels had increased. Given this increase in dependency, RQIA was not assured that the night duty staffing was sufficient to meet their needs. As a result of these findings a review of two identified residents' placement was requested. Given the deficits in governance systems, RQIA lacks assurance that safe and effective care is being delivered to residents.	

Action required to comply with regulations:

The registered person must ensure that:

- there are effective systems in place to monitor staff compliance with good infection prevention and control practices
- systems are in place to monitor the use of restrictive practices to ensure these are kept current and under review
- systems are in place to ensure that accident and incidents are recorded, reported and actioned appropriately
- accidents and incidents are audited on a monthly basis to identify any trends and patterns
- complaints are recorded and audited on a monthly basis to ensure they are appropriately managed and facilitate learning and improvement
- a system is in place to audit care records to ensure that these are reflective of residents' needs
- a system is in place to identify potential hazards to residents' safety and any deficits identified are promptly addressed
- a robust system is in place to ensure that staff are registered with NISCC
- there is clear evidence where deficits are identified through the audit process, an action plan is put in place to ensure the necessary improvements are made
- staff duty rotas contain the full names of staff, their job role and hours worked
- staff are deployed in sufficient numbers to meet the assessed needs of the residents with specific reference made to night duty
- all staff working in the home can demonstrate their knowledge of the Mental Capacity Act (NI) 2016 and Deprivation of Liberty Safeguards (DoLS) to reflect the regional guidance for Northern Ireland commensurate with their role and function in the home
- the home's policies, procedures and guidance are reviewed to reflect the Northern Ireland context
- the registration of staff with NISCC is reviewed and managed in accordance with regulation to ensure the safety of residents
- quality monitoring reports are completed in accordance with Regulation 29 of the Residential Care Homes Regulations (Northern Ireland) 2005 and forwarded to RQIA by the fourth day of each month

The Registered Person may make written representations to the Chief Executive of RQIA regarding the issue of a failure to comply notice, within one month of the date of serving this notice.

Date by which compliance must be achieved: 3 September 2020

Signed..........JAWAUCDEN Director of Assurance

This notice is served under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Residential Care Homes Regulations (Northern Ireland) 2005

It should be noted that failure to comply with some regulations is considered to be an offence and RQIA has the power under regulations to prosecute for specified offences.

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FAILURE TO COMPLY NOTICE

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Address of Registered Establishment: 44 Knockmore Road, Derrygonnelly, BT93 6GA	
Issue Date: 20 July 2020	FTC Ref: FTC000105
Regulation not complied with: <i>The Residential Care Homes Regulations (Northern Ireland) 2005</i> <i>Health and welfare of residents</i> <i>Regulation 13.—</i> <i>(1) The registered person shall ensure that the residential home is conducted so as –</i> <i>(a) to promote and make proper provision for the health and welfare of residents;</i> <i>(b) to make proper provision for the care and where appropriate, treatment and supervision of residents.</i>	
Specific failings to comply with regulations: During an unannounced inspection on 9 July 2020, concerns were identified regarding the management of weight loss for two individual residents which required onward referral to the Western Health and Social Care Trust (WHSCT). Deficits were also identified with record keeping to direct residents' care in relation to: <ul style="list-style-type: none">• restrictive practice• moving and handling documentation• post falls record keeping• review of care records/risk assessments following admission of a resident• modified diets/International Dysphagia Diet Standardisation Initiative (IDDSI) terminology• catheter care Further concerns were identified in relation to the management of risks to residents' health and welfare namely: <ul style="list-style-type: none">• the safe storage of potentially harmful chemicals• exposed pipework• wardrobes not secured to the walls• infection prevention and control (IPC)• fire safety specific to ensuring fire exit doors are kept clear	


Action required to comply with regulations:

The registered person must ensure that:

- a robust system is in place to monitor residents' weights with clear evidence of actions taken where weight loss has been identified
- care records are reviewed upon admission of a resident to ensure that these are up to date and reflective of the resident's current needs
- where restrictive practices are in place, care records are reflective of the resident's assessed needs, are kept under review and there is clear evidence of consultation with the multi-disciplinary team
- care records in relation to residents' moving and handling needs are reflective of their assessed needs and are kept under review
- care records in relation to nutrition and modified diets are reflective of the residents' assessed needs, are kept under review and are reflective of the advice of the multi-disciplinary team
- staff are able to demonstrate their knowledge in relation to best practice in the modification of food and fluids
- falls are managed in accordance with best practice and regional guidelines
- care records in relation to the management of residents' urinary catheters are maintained to evidence the care delivered
- the assessed needs of residents are kept under regular review and referrals are made to relevant professionals in a timely manner
- all staff working in the home can demonstrate their knowledge of infection prevention and control measures commensurate with their role and function in the home
- the home's environment is managed to reduce risks to patients' health and wellbeing for example, storage of hazardous chemicals, exposed pipework and securing of wardrobes to the walls
- fire exit doors are kept clear at all times

The Registered Person may make written representations to the Chief Executive of RQIA regarding the issue of a failure to comply notice, within one month of the date of serving this notice.

Date by which compliance must be achieved: 3 September 2020

Signed.......... Julie Ann Walker P.P. Director of Assurance

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