

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)

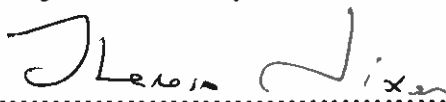
FAILURE TO COMPLY NOTICE

Name of Registered Establishment: Ratheane Private Nursing Home (1431)	Name of Registered Person: Mrs Mary Macklin Mr Brian Macklin
Address of Registered Establishment: 58 Mountsandel Road, Coleraine, BT52 1JF	
Issue Date: 15 May 2019	FTC Ref: FTC000041
Regulation not complied with: The Nursing Homes Regulations (Northern Ireland) 2005 <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 nursing home, the statement of purpose, and the number and needs of the patients, carry on or manage the nursing home (as the case may be) with sufficient care, competence and skill</i>	
Specific failings to comply with regulations: During the unannounced inspection on 27 November 2018, concerns were identified regarding the lack of effective managerial, monitoring and governance arrangements in the home. This included a lack of oversight and non-completion of the environmental audits. There was ineffective auditing processes also in relation to wound management, care records and post falls management. There was a lack of inclusion in the monthly monitoring reports regarding the actions that required to be taken to meet the areas for improvement identified in the quality improvement plan (QIP) following the care inspection on 27 November 2018. RQIA is concerned that the monthly monitoring report did not identify the issues raised by RQIA to drive the necessary improvements.	
Action required to comply with regulations: <ul style="list-style-type: none">• The registered persons must ensure that the registered manager delivers services effectively on a day-to-day basis in accordance with legislative requirements.• The registered persons must ensure sufficiently robust auditing systems are in place to quality assure the delivery of nursing and other services provided. This includes, but is not limited to, patient care records, post falls management, wound care and environmental audits.	

- The registered persons must ensure that the monthly monitoring reports, are completed in accordance with Regulation 29 of the Nursing Homes Regulations (Northern Ireland) 2005, and contain clear, time-bound action plans, detailing all areas of improvement required. The completed Regulation 29 report should be shared with the registered manager and the senior management team to ensure that the required improvements are made.

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: 5 July 2019

Signed..........**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


Name of Registered Establishment: Ratheane Private Nursing Home (1431)	Name of Registered Person: Mr Brian Macklin Mrs Mary Macklin
Address of Registered Establishment: 58 Mountsandel Road, Coleraine, BT52 1JF	
Issue Date: 15 May 2019	FTC Ref: FTC000042
Regulation not complied with: <i>Registered person: general requirements</i> <i>Regulation 13. –</i> <i>(1) The registered person shall ensure that the nursing home is conducted so as -</i> <i>(a) to promote and make proper provision for the nursing, health and welfare of patients;</i> <i>(b) to make proper provision for the nursing and where appropriate, treatment and supervision of patients.</i>	
Specific failings to comply with regulations: At the previous care inspection on 27 November 2018 an area for improvement was identified in relation to pressure relieving mattresses. At this inspection we found that this area for improvement had not been met. Further concerns were identified in relation to the management of wounds and pressure ulcer prevention. Deficits were evidenced in the repositioning records of identified patients and inconsistencies were noted in the frequency of repositioning within care plans. We could not evidence that appropriate actions had been taken following unwitnessed falls. Deficits were noted in record keeping which did not evidence the care delivered, regarding wounds and post falls management. We found deficits in the staffs' knowledge in relation to the modification of fluids which had the potential to place patients at risk. We found ineffective communication between all grades of staff regarding newly admitted patients' needs. There was evidence that deficits within the environment had not been identified or addressed within the home. This included damaged patient equipment and decor. Equipment was inappropriately stored in an identified lounge and was not conducive to a positive patient experience.	

Action required to comply with regulations:

- The registered person must ensure all patients with wounds and/or pressure ulceration have up to date care plans in place to direct staff in the provision of wound care.
- The registered person must ensure that an accurate record is maintained in relation to the number, type and status of wounds in the home.
- Individual patient records must reflect the wound care recommendations of the tissue viability nurse specialist when appropriate.
- The registered person must ensure that all pressure relieving equipment used is appropriately set to meet the needs of each individual patient.
- The registered person must ensure that patients are repositioned in accordance with their care plan.
- The registered person must ensure that staff can evidence that they are knowledgeable in relation to the management of wounds, prevention of pressure ulceration, the management of pressure relieving equipment and record keeping.
- The registered person must ensure that falls are managed in accordance with best practice guidelines and that relevant observations and/or treatment is provided/sought.
- The registered person must ensure that staff are provided with training relevant to their role and responsibilities in relation to modification of fluids.
- The registered person must ensure that systems are introduced to ensure that the environment is suited to patients' needs. The registered person must ensure that staff are provided with sufficient information about newly admitted patients so as to be able to provide safe and effective, care.
- The registered person must ensure that the social interaction of patients is considered on a daily basis and that staff document clearly their interactions with individual patients within their care records.

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: 5 July 2019

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

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