

**THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY (RQIA)**

**FAILURE TO COMPLY NOTICE**

<b>Name of Registered Establishment:</b>  Ringdufferin Nursing Home (RQIA ID: 11967)	<b>Name of Registered Persons:</b>  Ms Brenda Frances McKay, Responsible Individual (Acting)
<b>Address of Registered Establishment:</b>  36 Ringdufferrin Road, Killyleagh, BT30 9PH	
<b>Issue Date:</b> 25 June 2019	<b>FTC Ref:</b> FTC000056
<b>Regulation not complied with:</b>  <p><i><b>The Nursing Homes Regulations (Northern Ireland 2005)</b></i></p> <p><i><b>Health and Welfare of Patients</b></i></p> <p><i><b>Regulation 13.—</b></i>                  (4) <i>Subject to paragraph (5) the registered person shall make suitable arrangements for the ordering, storage, stock control, recording, handling, safe keeping, safe administration and disposal of medicines used in or for the purposes of the nursing home to ensure that –</i>                      (b) <i>medicine which is prescribed is administered as prescribed to the patient for whom it is prescribed, and to no other patient;</i></p>	
<b>Specific failings to comply with regulations:</b>  The unannounced medicines management inspection undertaken on 6 June 2019 raised concerns regarding the governance arrangements and medicines management within the home. A number of the improvements evidenced at last medicines management inspection had not been sustained. The audits on medicines undertaken by management were not effective in identifying shortfalls in the management of medicines on admission/re-admission and distressed reactions, and as a consequence, identified patients had not received some of their medicines as prescribed.  For three patients who had recently been admitted/re-admitted to the home written confirmation of their medication regimens was not available at the inspection. These patients had not received all of their prescribed medicines either without explanation or because they were unavailable in the home. This has the potential to affect the health and well-being of these patients. There was no evidence that this had been escalated to the registered manager or the prescriber. RQIA had not been notified.  One care plan for the management of distressed reactions had not been updated since 25 May 2019. For three patients, the reason for and outcome of administration of medicines which are prescribed to be administered 'when required' for the management of distressed reactions, had not been recorded. It could not be determined if distressed reactions were being managed appropriately.	

The governance arrangements within the home are not robust. The findings of this inspection had been identified at previous medicines management inspections and raised during an intention meeting with the provider on 5 October 2018. Although there was evidence at the next inspection that improvements were implemented they had not been embedded into practice and sustained. Audits on a number of medicines could not be completed as the date of opening had not been recorded. It could not be determined if these medicines had been administered as prescribed which has the potential to affect the health and well-being of these patients.

**Action required to comply with regulations:**

The registered persons must ensure that:

- robust arrangements are in place for the management of medicines on admission/re-admission to the home. Written confirmation of current medication regimens should be received on admission/re-admission. A copy of this confirmation should be available in the home for cross-referencing to ensure accuracy.
- systems are in place to ensure that patients have a continuous supply of their prescribed medicines.
- systems are in place to ensure that RQIA is notified when prescribed medicines are not available for administration or have not been administered as prescribed.
- robust arrangements are in place for the management of distressed reactions and that these are fully implemented. Care plans should be up to date. The reason for and outcome of each administration should be recorded. Any regular use should be referred to the prescriber for review.
- robust auditing systems are developed and implemented which identify deficits in the availability and administration of prescribed medicines and evidences the corrective action taken.

**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: 18 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 Nursing Homes Regulations (Northern Ireland) 2005***

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<b>Address of Registered Establishment:</b> 36 Ringdufferin Road, Killyleagh, BT30 9PH	
<b>Issue Date:</b> 25 June 2019	<b>FTC Ref:</b> FTC000057
<b>Regulation not complied with:</b>  <b><i>The Nursing Homes Regulations (Northern Ireland) 2005</i></b>  <b><i>Health and welfare of patients</i></b>  <b><i>Regulation 13.-(1) The registered person shall ensure that the nursing home is conducted so as –</i></b> <b><i>(a) to promote and make proper provision for the nursing, and health and welfare of patients;</i></b> <b><i>(b) to make proper provision for the nursing and where appropriate, treatment and supervision of patients.</i></b>	
<b>Specific failings to comply with regulations:</b>  The unannounced inspection of 13 June 2019 raised significant concerns in regards to the health and welfare of patients.  We found that patients' personal care needs were not being met. Records were not available to evidence the effective delivery of personal care.  Observation of the delivery of the lunch time meal and discussion with staff, patients and relatives identified concerns with the meal time experience of patients. We found that the arrangements for the serving of the meal, staffing arrangements and the environment required improvement to ensure that patients' needs were met.  The programme of activities was observed to be displayed in an unsuitable format in order for patients and their relatives to know what is scheduled. Observation and discussion with staff evidenced that due to work patterns, patients did not have sufficient meaningful engagement or interaction with staff.  Significant concerns were identified regarding record keeping. Review of records evidenced that care planning was not reflective of patients' needs and the multidisciplinary team recommendations. Deficits were identified with regards to wound management and modified diets.	

**Action required to comply with regulations:**

The registered persons must ensure that:

- Patients receive a high standard of personal care.
- Accurate records are maintained to evidence the delivery of personal care.
- The arrangements for the mealtime service are reviewed to ensure that patients' needs are met.
- The provision of activities is reviewed to ensure that patients' needs are met.
- Patients with wounds and/or pressure ulceration have up to date care plans in place to direct staff in the provision of care.
- Patients who require a modified diet have up to date care plans to direct staff in the provision of care.

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Signed.....*Thomas Nixon*.....**Director of Assurance**

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<b>Address of Registered Establishment:</b> 36 Ringdufferin Road, Killyleagh, BT30 9PH	
<b>Issue Date:</b> 25 June 2019	<b>FTC Ref:</b> FTC000058
<b>Regulation not complied with:</b> <p><i><b>The Nursing Homes Regulations (Northern Ireland) 2005</b></i></p> <p><i><b>Registered person: general requirements</b></i></p> <p><i><b>Regulation 10. —</b></i>  <i><b>(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.</b></i></p>	
<b>Specific failings to comply with regulations:</b> <p>The unannounced inspection of 13 June 2019 raised significant concerns in regards to the lack of effective oversight, monitoring and quality assurance arrangements in the home, which failed to identify the deficits found at this inspection.</p> <p>A review of the duty rota could not evidence the hours the registered manager spent working in the capacity of a registered nurse or as the registered manager. Discussion and observation evidenced that the registered manager worked shifts as a registered nurse. This may have contributed to a number of deficits in the overall quality assurance, governance and delivery of care.</p> <p>Notifiable events under Regulation 30 evidenced that two incidents regarding patients with possible head injuries had not been reported to RQIA since the last inspection. We raised concerns at previous care inspections regarding the control of substances hazardous to health (COSHH). This improvement had not been met and presented a potential health and safety risk to patients.</p> <p>Concerns regarding infection prevention and control measures and practices (IPC) in relation to the environment and inappropriate storage of equipment were previously identified and continued not to be met at this inspection. It was noted that a selection of creams and ointments were inappropriately stored in bathrooms and on trolleys and had the potential to be shared. An outbreak of infectious disease in March 2019</p>	



resulted in recommendations being made by the Public Health Agency and a number of these had not been met.

The door of an identified bedroom was observed to be wedged open presenting a risk to patients in the event of a fire. An area for improvement identified in this regard at the previous care inspection had not been met.

RQIA raised a number of these matters during previous inspections of Ringdufferin Nursing Home.

**Action required to comply with regulations:**

The registered persons must ensure that:

- the registered manager or her representative delivers services effectively on a day-to-day basis in accordance with legislative requirements.
- the duty rota clearly and accurately reflects the hours the registered manager works in the capacity of a registered nurse or as the registered manager.
- RQIA is notified of all incidents/accidents occurring in the home in accordance with Regulation 30 of The Nursing Homes Regulations (Northern Ireland) 2005.
- a safe environment is maintained to comply with legislation regarding the control of substances hazardous to health (COSHH).
- the registered manager establishes, implements and sustains robust quality monitoring and governance systems in relation to managing the environment that minimises the risk of infection for staff, residents and visitors regarding infection prevention and control practices (IPC).
- precautions are in place to minimise the risk of fire to protect residents, staff and visitors in the event of fire.
- 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 manager and the senior management team to ensure that the required improvements are made.
- a copy of the monthly monitoring reports is submitted on a monthly basis to RQIA until further notice. This should be with RQIA no later than three days after the last day of the month.

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Signed.....*John Nixon*.....Director of Assurance

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<b>Issue Date:</b> 25 June 2019	<b>FTC Ref:</b> FTC000059
<b>Regulation not complied with:</b>  <b><i>The Nursing Homes Regulations (Northern Ireland) 2005</i></b>  <b><i>Staffing</i></b>  <b><i>Regulation 20.-(1) The registered person shall having regard to the size of the nursing home, the statement of purpose and the number and needs of the patients –</i></b>  <b><i>(a) ensure that at all times suitably qualified, competent and experienced persons are working at the nursing home in such numbers as are appropriate for the health and welfare of patients;</i></b>	
<b>Specific failings to comply with regulations:</b>  At an unannounced care inspection on 13 June 2019 deficits were identified regarding the skill mix and the provision of staff within the home which was impacting on the effective delivery of care to patients. We found insufficient staff on duty to meet the needs of the patients in relation to personal care, meal time experience, the daily routine and record keeping. Staff, patients and relatives spoken with raised concerns about staffing levels and stated that there were not enough staff on duty.	
<b>Action required to comply with regulations:</b>  The registered persons must ensure that: <ul style="list-style-type: none"><li>• At all times suitably qualified, competent and experienced persons are working at the home in such numbers as are appropriate for the health and welfare of patients.</li><li>• The skill mix of staff is reviewed to ensure that a minimum skill mix of at least 35% registered nurses and 65% care assistants is maintained over any 24 hour period.</li><li>• There are systems in place to respond to unplanned staff absence.</li><li>• A record is kept of the home's calculation to determine staffing requirements.</li></ul>	



- Assessment of patient's dependency levels informs the staffing requirements.

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