



The Regulation and  
Quality Improvement  
Authority

## **Unannounced Secondary Care Inspection**

**Name of Establishment:** Templemoyle Private Nursing Home  
**Establishment ID No:** 1194  
**Date of Inspection:** 27 August 2014  
**Inspector's Name:** Bridget Dougan  
**Inspection No:** IN020014

**The Regulation And Quality Improvement Authority**  
Hilltop, Tyrone & Fermanagh Hospital, Omagh BT79 0NS  
Tel: 028 8224 5828 Fax: 028 8225 2544

<b>Name of Home:</b>	Templemoyle Private Nursing Home
<b>Address:</b>	41a Whitehill Road Eglinton BT47 3JT
<b>Telephone Number:</b>	028 7181 1461
<b>E mail Address:</b>	templemoylenursinghome@hotmail.com
<b>Registered Organisation/ Registered Provider:</b>	Mrs Elizabeth Lisk
<b>Registered Manager:</b>	Mrs Jeya Pratheeksha (Acting Manager)
<b>Person in Charge of the Home at the time of Inspection:</b>	Mrs Jeya Pratheeksha
<b>Categories of Care:</b>	Nursing - I and PH
<b>Number of Registered Places:</b>	30
<b>Number of Patients and Residents Accommodated on Day of Inspection:</b>	29
<b>Scale of Charges (per week):</b>	£581.00
<b>Date and type of previous inspection:</b>	15 May 2014 Secondary Unannounced Inspection
<b>Date and time of inspection:</b>	27 August 2014: 12.00 hours – 13.30 hours
<b>Name of Lead Inspector:</b>	Bridget Dougan

## 1.0 Introduction

The Regulation and Quality Improvement Authority (RQIA) is empowered under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect nursing homes. A minimum of two inspections per year are required.

This is a report of an inspection to assess the quality of services being provided. The report details the extent to which the standards measured during inspection are being met.

### 1.1 Purpose of the Inspection

The purpose of this inspection was to consider whether the service provided to patients was in accordance with their assessed needs and preferences and was in compliance with legislative requirements, minimum standards and other good practice indicators. This was achieved through a process of analysis and evaluation of available evidence.

The Regulation and Quality Improvement Authority aims to use inspection to support providers in improving the quality of services, rather than only seeking compliance with regulations and standards. For this reason, annual inspection involves in-depth examination of a limited number of aspects of service provision, rather than a less detailed inspection of all aspects of the service.

The aims of the inspection were to examine the policies, practices and monitoring arrangements for the provision of nursing homes, and to determine the Provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Nursing Homes Regulations (Northern Ireland) 2005
- The Department of Health, Social Services and Public Safety's (DHSSPS) Nursing Homes Minimum Standards (2008)
- Other published standards which guide best practice may also be referenced during the Inspection process

### 1.2 METHODS/PROCESS

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

- Discussion with the acting manager
- Discussion with staff
- Discussion with patients individually and with others in groups
- Examination of records pertaining to inspection focus
- Review of a sample of reports of unannounced visits undertaken under Regulation 29
- Observation during inspection of the premises
- Evaluation and feedback

### **1.3 INSPECTION FOCUS**

The inspection sought to establish the level of progress with the issues raised during and since the previous inspection:

### **2.0 Profile of Service**

Templemoyle Private Nursing Home provides care for up to 30 patients. Accommodation includes single and double bedroom accommodation over three floors. There are sitting and dining rooms on each floor.

The home is registered in the general nursing and physical disability categories of care. The home is not registered to provide day care.

The home is situated in its own landscaped grounds at 41a Whitehill Road, Eglinton, Co Londonderry.

There are adequate car parking facilities at the front of the home.

### **3.0 Summary**

This summary provides an overview of the service during a secondary unannounced inspection to Templemoyle Private Nursing Home. The inspection was undertaken by Bridget Dougan, lead inspector and Phil Cunningham, senior estates inspector on 27 August 2014 from 12.00 hours to 13.30 hours.

The main focus of the inspection was to examine the level of progress with the issues raised during the previous inspection.

The inspectors were welcomed to the home by the Acting Manager, Mrs Jeya Pratheeksha, who was available throughout the inspection and for verbal feedback and discussion at the conclusion of the inspection.

During the course of the inspection, the inspectors met with patients, examined a selection of records and carried out a general inspection of the nursing home environment as part of the inspection process.

Two requirements and five recommendations made as a result of the previous inspection were reviewed. The inspectors were able to evidence that one requirement and five recommendations had been addressed and compliance had been achieved. One requirement with regard to infection prevention and control was substantially compliant and will therefore be stated for the second time.

The inspectors spoke to the majority of patients. Patients informed the inspectors that they were happy living in the home. Those patients who were unable to verbally express their views appeared well groomed and appropriately dressed and appeared relaxed and comfortable in their surroundings.

Inspection of accident/incident records confirmed that these records were reviewed on a monthly basis to establish trends.

## **Conclusion**

One requirement made at the previous inspection has been assessed as substantially compliant and has therefore been stated for the second time.

The inspectors wish to thank the acting manager, patients and staff for their helpful discussions, assistance and hospitality throughout the inspection.

No.	Regulation Ref.	Requirement	Action Taken - As Confirmed During This Inspection	Inspector's Validation Of Compliance
1	27 (2) (d)	The registered person shall, having regard to the number and needs of the patients, ensure that all parts of the home are kept clean and reasonably decorated.	Discussion with the acting manager and a general inspection of the internal environment of the home evidenced that this requirement had been fully met.	<b>Compliant</b>
2	13 (7)	The registered person shall make suitable arrangements to minimise the risk of infection and toxic conditions and the spread of infection between patients and staff.	The majority of infection prevention and control issues identified at the previous inspection had been addressed. Monthly audits were completed and action plans with timescales had been developed. The inspectors observed an offensive odour in one patient's bedroom. The bedroom carpet requires to be deep cleaned/replaced.	<b>Substantially compliant</b>

No.	Minimum Standard Reference	Recommendations	Action Taken - As Confirmed During This Inspection	Inspector's Validation Of Compliance
1	25.12	<p>It is recommended that the following details be recorded in reports of unannounced visits undertaken in accordance with Regulation 29:</p> <ul style="list-style-type: none"> <li>• Details in regard to the outcome of audits.</li> </ul>	The inspector reviewed a sample of Regulation 29 reports and can confirm that this recommendation has been met.	<b>Compliant</b>
2	32.1	The registered person should submit to RQIA details of the refurbishment programme with timescales.	Details of the refurbishment programme with timescales were submitted to RQIA.	<b>Compliant</b>
3	25.11	The registered person should ensure that action plans with timescales are completed and action is taken when necessary to address any areas for improvements identified following audits.	Discussion with the acting manager and review of audit records evidenced that this recommendation has been met.	<b>Compliant</b>
4	25.2	The acting manager should countersign cleaning rotas to ensure the nursing home delivers services effectively on a day to day basis in accordance with legislative requirements and standards.	The inspector reviewed the cleaning rotas and can confirm that this recommendation has been met.	<b>Compliant</b>

5	17.10	The registered person and acting manager should ensure all expressions of dissatisfaction are recorded as complaints. The investigation and action taken should also be recorded and used to improve the quality of services within the home.	Discussion with the acting manager and inspection of complaints records evidenced that this recommendation had been addressed. Two complaints had been recorded since the previous inspection and were being managed according to regional guidelines.	<b>Compliant</b>
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## **6.0 Additional Areas Examined**

### **6.1 Accident/incident records**

Inspection of accident/incident records confirmed that these records were reviewed on a monthly basis to establish trends.

### **6.2 Patients views**

The inspector spoke to the majority of patients. Patients informed the inspector that they were happy living in the home. Those patients who were unable to verbally express their views appeared well groomed and appropriately dressed and appeared relaxed and comfortable in their surroundings.

## **Quality Improvement Plan**

The details of the Quality Improvement Plan appended to this report were discussed with Mrs Jeya Pratheeksha (Acting Manager) as part of the inspection process.

The timescales for completion commence from the date of inspection.

The registered provider/manager is required to record comments on the Quality Improvement Plan.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

Enquiries relating to this report should be addressed to:

**Bridget Dougan  
The Regulation and Quality Improvement Authority  
Hilltop  
Tyrone & Fermanagh Hospital  
Omagh  
BT79 0NS**



**Quality Improvement Plan**

**Unannounced Secondary Inspection**

**Templemoyle Private Nursing Home**

**27 August 2014**

The areas where the service needs to improve, as identified during this inspection visit, are detailed in the inspection report and Quality Improvement Plan.

The specific actions set out in the Quality Improvement Plan were discussed with Mrs Jeya Pratheeksha (Acting Manager) during the inspection visit.

Any matters that require completion within 28 days of the inspection visit have also been set out in separate correspondence to the registered persons.

**Registered providers/managers should note that failure to comply with regulations may lead to further enforcement and/or prosecution action as set out in The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003.**

It is the responsibility of the registered provider/manager to ensure that all requirements and recommendations contained within the Quality Improvement Plan are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

**Statutory Requirements**

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on the HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, and the Nursing Homes Regulations (NI) 2005

No.	Regulation Reference	Requirement	Number of Times Stated	Details Of Action Taken By Registered Person(S)	Timescale
1	13 (7)	<p>The registered person shall make suitable arrangements to minimise the risk of infection and toxic conditions and the spread of infection between patients and staff.</p> <p>Ensure the carpet in the identified patients bedroom is deep cleaned/replaced.</p> <p><b>Reference: Follow up on previous issues</b></p>	Two	Carpets in identified room have been deep cleaned. This room has also due to have carpet changed.	Three months from the date of this inspection

**Recommendations**

These recommendations are based on The Nursing Homes Minimum Standards (2008), research or recognised sources. They promote current good practice and if adopted by the Registered Person may enhance service, quality and delivery.

No.	Minimum Standard Reference	Recommendations	Number Of Times Stated	Details Of Action Taken By Registered Person(S)	Timescale
		No recommendations were made as a result of this inspection.			

**Please complete the following table to demonstrate that this Quality Improvement Plan has been completed by the registered manager and approved by the responsible person / identified responsible person:**

<b>Name of Registered Manager Completing Qip</b>	Jeya Pratheeksha
<b>Name of Responsible Person / Identified Responsible Person Approving Qip</b>	Elizabeth Lisk

<b>QIP Position Based on Comments from Registered Persons</b>	<b>Yes</b>	<b>Inspector</b>	<b>Date</b>
Response assessed by inspector as acceptable	yes	B. Dougan	10//11/14
Further information requested from provider			