

Announced Variation to Registration Care Inspection Report 20 December 2017



County Care Home

Type of Service: Nursing Home
Address: 42 Tempo Road, Enniskillen, BT74 6HR
Tel No: 028 6632 3845
Inspector: Sharon Loane

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

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 service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a registered nursing home which is registered to provide nursing care and residential care for up to 58 persons.

3.0 Service details

Registered Provider: EBAY Limited Responsible Individual: Mr Patrick Anthony McAvoy	Registered Manager: See box below
Person in charge at the time of inspection: Mr Adam Kane	Date manager registered: Mr Adam Kane, acting – no application received
Categories of care: Nursing Homes (NH) I – Old age not falling within any other category. DE – Dementia. PH – Physical disability other than sensory impairment. Residential Care (RC) I – Old age not falling within any other category.	Number of registered places: 58 Comprising: A maximum of 21 patients in category NH-DE. The home is also approved to provide care on a day basis to 5 persons. There shall be a maximum of 5 named residents receiving residential care in category RC-I and 1 named resident receiving residential care in category RC-PH.

4.0 Inspection summary

An announced variation to registration inspection of the County took place on 20 December 2017 from 15:00 to 16:00 hours.

The inspection sought to assess an application submitted to RQIA in relation to proposed structural changes to the premises within the general nursing unit and the nursing dementia unit. This inspection focussed specifically on the structural changes within the nursing dementia unit. The additional structural changes within the general nursing unit will be reviewed at a separate inspection.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003; The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005; The Nursing Homes Regulations (Northern Ireland) 2005; and the Care Standards for Nursing Homes 2015.

There were examples of good practice evidenced in relation to the general environment which was completed to a high standard.

No areas for improvement were identified during the inspection.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients' experience.

Information has been gathered throughout the registration and inspection process. Scrutiny of this information means that the registration is granted from a care perspective.

The term 'patients' is used to describe those living in the County which provides both nursing and residential care.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients' experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	*2

This inspection resulted in no new areas for improvement being identified. Two areas for improvement under the care standards identified at a previous inspection have been carried forward for review at the next care inspection. Findings of the inspection were discussed with Adam Kane, Manager, as part of the inspection process and can be found in the main body of the report.

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

4.2 Action/enforcement taken following the most recent inspection dated

The most recent inspection of the home was an unannounced medicines management inspection undertaken on 24 July 2017.

No further actions were required to be taken following this inspection.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- variation submitted to RQIA
- the statement of purpose
- the patients' guide

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

- an examination of the general environment of the home
- a review of the statement of purpose
- a review of the service user guide

Areas for improvement identified at the last care inspection were not reviewed as part of this inspection and are carried forward to the next care inspection.

The findings of the inspection were provided to the manager at the conclusion of the inspection.

6.0 The inspection

6.1 Review of areas for improvement from the most recent inspection dated 28 June 2017

The most recent inspection of the home was an unannounced care inspection. The completed QIP was returned and approved by the care inspector.

This QIP will be validated by the care inspector at the next care inspection.

6.2 Review of areas for improvement from the last care inspection dated 28 June 2017

Areas for improvement from the last care inspection		
Action required to ensure compliance with The Care Standards for Nursing Homes (2015)		Validation of compliance
Area for improvement 1 Ref: 39 Criteria 4 Stated: Second time	The registered person should provide training for staff in relation to their roles and responsibilities in the following identified areas: <ul style="list-style-type: none"> • the management of wounds and pressure care • the management of nutrition and weight loss • the management of restraint and restrictive practices • the nursing process including record keeping All of the training provided should reference the documentation to be completed as outlined in relevant best practice guidance.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: This area for improvement was not examined at this inspection and has been carried forward for review at the next care inspection.	

Area for improvement 2 Ref: Standard 23 Stated: First time	The registered person shall ensure that repositioning records are maintained in accordance with best practice guidelines to assure the delivery of care in this area of practice.	Carried forward to the next care inspection
	Action taken as confirmed during the inspection: This area for improvement was not examined at this inspection and has been carried forward for review at the next care inspection.	

This inspection focused solely on the variation to registration application made by the registered provider to RQIA. The areas for improvement from the last care inspection on 28 June 2017 were not reviewed as part of the inspection and are carried forward to the next care inspection.

6.3 Inspection findings

Environment

The responsible individual and the manager guided the inspectors around the nursing dementia unit.

Due to the structural changes, the County will provide accommodation for 52 patients provided over two units. The home is situated in a quiet open area and offers bright and spacious accommodation across two floors. All areas of the home are wheelchair accessible.

As previously reported this inspection focussed on the Nursing Dementia unit. A review of one bedroom which had been modified was equipped with a range of built in furniture and ensuite facilities. A new communal lounge area which included a nurse's station was presented to a high specification and was tastefully decorated.

A new dining area had been created and the management team advised that there were plans in place to re-decorate same. The new dining area provided adequate space to accommodate all patients living within this unit and was located in close access to the main kitchen.

As previously discussed a nurses' station was located in the main lounge area however a nurse's office was also available where there is storage space available to ensure that the patients' care records are stored securely. The manager's office is situated on the first floor of the home.

Adequate car parking facilities are provided.

Statement of Purpose & Service User's Guide

The statement of purpose and the service user guides were available within the home.

Areas of good practice

The structural changes made to the Nursing Dementia unit have enhanced the environment and the experience for someone living with a dementia diagnosis.

Areas for improvement

No new areas for improvement were identified during the inspection.

	Regulations	Standards
Total number of areas for improvement	0	0

6.4 Conclusion

The application to vary the proposed structural changes to the premises of the County was approved from a care perspective following this inspection.

7.0 Quality improvement plan

There were no new areas for improvement identified during this inspection. The attached QIP contains the areas for improvement carried forward from the last care inspection on 28 June 2017. This inspection focused solely on the variation submitted.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Nursing Home Regulations (Northern Ireland) 2005 and The Care Standards for Nursing Homes (2015).

7.2 Actions to be taken by the service

The registered provider has confirmed that actions have been completed to address the areas for improvement identified during the last care inspection and has returned the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan

Action required to ensure compliance with The Care Standards for Nursing Homes (2015)

<p>Area for improvement 1</p> <p>Ref: 39 Criteria 4</p> <p>Stated: Second time</p>	<p>The registered person should provide training for staff in relation to their roles and responsibilities in the following identified areas:</p> <ul style="list-style-type: none"> • the management of wounds and pressure care • the management of nutrition and weight loss • the management of restraint and restrictive practices • the nursing process including record keeping <p>All of the training provided should reference the documentation to be completed as outlined in relevant best practice guidance.</p>
	<p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>
<p>Area for improvement 2</p> <p>Ref: Standard 23</p> <p>Stated: First time</p>	<p>The registered person shall ensure that repositioning records are maintained in accordance with best practice guidelines to assure the delivery of care in this area of practice.</p>
	<p>Action required to ensure compliance with this regulation was not reviewed as part of this inspection and this will be carried forward to the next care inspection.</p>



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