



Enforcement Monitoring (FTC) Announced Care Inspection

Name of Service and ID: Anniscliff House (1340)
Date of Inspection: 15 September 2014
Inspector's Name's: Bronagh Duggan and Lynn Long
Inspection ID: IN020536

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY
9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
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1.0 General information

Name of Service:	Anniscliff House (1340)
Address:	141 Moneysharvin Road Maghera BT46 5HZ
Telephone number:	02879642729
E mail address:	bernie@magherafencing.co.uk
Registered Organisation/ Registered Provider:	Anniscliff House Mrs Bernadette McGilligan and Mrs Jacqueline Davies
Registered Manager:	Mrs Bernadette McGilligan
Person in charge of the home at the time of inspection:	Mrs Bernadette Mc Gilligan
Categories of care:	I ,MP ,MP(E), DE, LD (E)
Number of registered places:	17
Number of residents accommodated on Day of Inspection:	15
Scale of charges (per week):	£450 per week
Date and type of previous inspection:	6 August 2014 Secondary Unannounced Care Inspection
Date and time of inspection:	15 September 2014 10:00am – 12.30pm
Name of Inspectors:	Bronagh Duggan and Lynn Long

2.0 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 residential care homes. A minimum of two inspections per year are required.

This is a report of an Enforcement Monitoring Inspection to assess the progress made by the home in moving to compliance with three failure to comply notices which were issued to the home on 18 August 2014.

3.0 Purpose of the inspection

The purpose of this inspection was to ensure that the service is compliant with relevant regulations and minimum standards and other good practice indicators and to consider whether the service provided to service users was in accordance with their assessed needs and preferences. This was achieved through a process of analysis and evaluation of available evidence.

RQIA not only seeks to ensure that compliance with regulations and standards is met but also aims to use inspection to support providers in improving the quality of services. For this reason, inspection involves in-depth examination of an identified number of aspects of service provision.

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

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Residential Care Homes Regulations (Northern Ireland) 2005
- The Department of Health, Social Services and Public Safety's (DHSSPS) Residential Care Homes Minimum Standards (2011)

Other published standards which guide best practice may also be referenced during the inspection process.

4.0 Methods/Process

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

- Discussion with the registered provider / registered manager
- Examination of records
- Review of recruitment records
- Review of staff training records
- Discussion with staff
- Evaluation of findings and feedback

5.0 Inspection focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to establish the level of compliance achieved. Following a secondary unannounced care inspection carried out on 6 August 2014 enforcement action was brought against Anniscliff House in relation to the homes failure to comply with The Residential Care Homes Regulations (Northern Ireland) 2005 in relation to three areas. The areas of concern related to procedural failings in relation to recruitment processes, the notification of accidents and incidents in the home and safeguarding procedures in the home.

The focus of this inspection was to assess the progress made by the home in moving to compliance with the following three notices of failure to comply with regulations from The Residential Care Homes Regulations (Northern Ireland) 2005:

- FTC 1 - FTC/RCH/1340/2014-2015/01 Regulation 21
- FTC 2 - FTC/RCH/1340/2014-2015/02 Regulation 30
- FTC 3 - FTC/RCH/1340/2014-2015/03 Regulation 14 (4)

The Failure to Comply notices were issued by RQIA on 18 August 2014. The timescale for compliance was 15 September 2014, the day of the inspection.

The inspector has rated the home's Compliance Level against each criterion and also against the standard. The table below sets out the definitions that RQIA has used to categorise the home's performance:

Guidance - Compliance statements		
Compliance statement	Definition	Resulting Action in Inspection Report
0 - Not applicable		A reason must be clearly stated in the assessment contained within the inspection report
1 - Unlikely to become compliant		A reason must be clearly stated in the assessment contained within the inspection report
2 - Not compliant	Compliance could not be demonstrated by the date of the inspection.	In most situations this will result in a requirement or recommendation being made within the inspection report
3 - Moving towards compliance	Compliance could not be demonstrated by the date of the inspection. However, the service could demonstrate a convincing plan for full compliance by the end of the Inspection year.	In most situations this will result in a requirement or recommendation being made within the inspection report
4 - Substantially Compliant	Arrangements for compliance were demonstrated during the inspection. However, appropriate systems for regular monitoring, review and revision are not yet in place.	In most situations this will result in a recommendation, or in some circumstances a requirement, being made within the inspection report
5 - Compliant	Arrangements for compliance were demonstrated during the inspection. There are appropriate systems in place for regular monitoring, review and any necessary revisions to be undertaken.	In most situations this will result in an area of good practice being identified and comment being made within the inspection report.

6.0 Profile of service

Anniscliff House is situated a few miles outside Maghera. The home is located within the Northern Health and Social Care Trust's geographical area. It is in a rural setting and is surrounded by mature, well maintained gardens.

The home provides accommodation for 17 persons. There are five single bedrooms on the ground floor, two single and five double bedrooms on the first floor. Facilities in the home also include a communal lounge and dining area and sitting rooms (one of which is also used as a visitors' room). There are bathing and sanitary facilities, a kitchen and offices. The home maintains a strong spiritual ethos.

The home is registered to provide care for a maximum of 17 persons under the following categories of care:

Residential care

I	Old age not falling into any other category
DE	Dementia
MP	Mental disorder excluding learning disability or dementia
MP(E)	Mental disorder excluding learning disability or dementia – over 65 years
LD(E)	Learning Disability – over 65 years

7.0 Summary of inspection

This enforcement monitoring inspection of Anniscliff House was undertaken by Bronagh Duggan and Lynn Long on 15 September 2014 between the hours of 10:00am – 12:30pm. Mrs Bernadette Mc Gilligan registered provider/ manager and Mrs Rosemary O' Kane home owner were available during the inspection and for verbal feedback at the conclusion of the inspection.

This summary provides an overview of RQIA's assessment of the home's progress in moving to compliance with the three notices of failure to comply with regulations of The Residential Care Homes Regulations (Northern Ireland) 2005, which were issued on 18 August 2014.

During the course of the inspection, the inspectors examined a selection of recruitment and training records, notification information, reviewed policies and procedures in the home and spoke with the registered provider /manager, and care staff in the home.

The three failure to comply notices were issued following the findings of an unannounced inspection carried out on 6 August 2014. The inspection on 6 August 2014 resulted in three requirements and one recommendation being reiterated from the previous inspection on 18 June 2014, with one additional recommendation also being made. The focus of this inspection was assessing the homes level of compliance in relation to the three failure to comply notices which were issued on 18 August 2014. The requirements and recommendations previously stated were not reviewed on this occasion but have been carried forward for review at a future inspection. Information pertaining to these is included in the Quality Improvement Plan relating to this report.

Inspection findings

The inspectors reviewed each action required to be completed to comply with regulation as detailed in the failure to comply with regulation notices issued on 18 August 2014. The following records were examined:

- The three most recently recruited staff members files
- Staff training records / minutes of staff meetings
- Records of notifications provided to RQIA cross referenced with notifications received
- The new policy and procedure developed for handling notifications and the pre-employment recording system was also reviewed

Details regarding the inspection findings for these areas are available in the main body of the report.

Conclusion

The outcome of the inspection was discussed with the Head of Programme for Residential Care Homes and the senior inspector for the residential team on 16 September 2014. The failure to comply notices expired on 15 September 2014, and this inspection found that there was sufficient evidence available to demonstrate compliance with the three failure to comply notices.

The inspectors would like to thank Mrs Mc Gilligan registered manager / provider, Mrs O' Kane the home owner , and care staff for their assistance and co-operation throughout the inspection process.

8.0 Inspection Findings

Failure to Comply Notice 1 - FTC/RCH/1340/2014-2015/01 Regulation 21

“Regulation 21 of The Residential Care Homes Regulations (Northern Ireland) 2005

21.-(1) The registered person shall not employ a person to work at the residential care home unless-

- (a) the person is fit to work at the home;
 - (b) subject to paragraph (5), he has obtained in respect of the person the information and documents specified in paragraphs 1 to 7 of Schedule 2;
 - (c) he is satisfied on reasonable grounds as to the authenticity of the references referred to in paragraph 3 of Schedule 2 in respect of that person.
- (2) Paragraph 1 applies to a person who is employed by a person (“the employer”) other than the registered person.
- (3) Paragraph 1 applies to a position in which a person may in the course of his duties have regular contact with residents at the home.
- (4) The registered person shall not allow a person to whom paragraph (2) applies to work at the home in a position to which paragraph (3) applies, unless-
- (a) the person is fit to work in the home;
 - (b) the employer has obtained in respect of that person the information and documents specified in –
 - (i) paragraphs 1 to 7 of Schedule 2; and has confirmed in writing to the registered person that he has done so; and
 - (c) the employer is satisfied on reasonable grounds as to the authenticity of the references referred to in paragraph 3 of Schedule 2 in respect of that person, and has confirmed in writing to the registered person that he is so satisfied.
- (5) For the purpose of paragraphs (1) and (4), a person is not fit to work at a home unless-
- (a) he is of integrity and good character;
 - (b) he has qualifications or training suitable to the work that he is to perform, and the skills and experience necessary for such work;
 - (c) he is physically and mentally fit for the purposes of the work he is to perform at the home.
 - (c) full and satisfactory information is available in relation to him in respect of the following matters –

(i) each of the matters specified in paragraphs 1 to 7 of Schedule 2.”

Findings:

The inspectors reviewed each action required to be completed to comply with regulation as detailed in the failure to comply with regulation notice. The following are the inspectors' findings:

- The identified employee, without an Access NI enhanced disclosure relating to their employment at Anniscliff House, must not be working at Anniscliff House until the relevant information has been received and verified by the registered person.

The identified employee has since left employment at Anniscliff House through their own choice. The registered manager gave inspectors the assurance that all future employees shall have an Access NI enhanced disclosure check carried out prior to commencing employment at Anniscliff House. Three files of recently recruited staff members reviewed during the inspection evidenced that staff had an Access NI certificate number recorded as part of Anniscliff House recruitment process.

- The registered person must implement robust arrangements to ensure that full and satisfactory information is obtained about potential employees prior to commencement of employment at the home as outlined in The Residential Care Homes Regulations (Northern Ireland) 2005.

The registered manager has implemented a new procedure which includes a recording system which outlines the specific information required from potential employees prior to commencement of employment at Anniscliff House. During inspection the files of the three most recently recruited employees were reviewed these were found to include all the relevant information as stipulated in The Residential Care Homes Regulations (Northern Ireland) 2005.

The home is evidenced to have fully complied with the requirements of this Failure to Comply Notice.

Failure to Comply Notice 2 - FTC/RCH/1340/2014-2015/02

“Regulation 30 of The Residential Care Homes Regulations (Northern Ireland) 2005

30. – (1)The registered person shall give notice to the Regulation and Improvement Authority without delay of the occurrence of -

- (a) the death of any resident, including the circumstances of his death;
- (b) the outbreak in the home of any infectious disease which in the opinion of any medical practitioner attending persons in the home is sufficiently serious to be notified;
- (c) any serious injury to a resident in the home;
- (d) any event in the home which adversely affects the care, health, welfare or safety of any resident;

- (e) any theft or burglary in the home;
- (f) any accident in the home;
- (g) any allegation of misconduct by the registered person or any person who works at the home.”

Findings:

The inspectors reviewed each action required to be completed to comply with regulation as detailed in the failure to comply with regulation notice. The following are the inspectors' findings:

- The registered person must notify RQIA retrospectively of the identified accidents and incidents which have not previously been notified and have occurred from January 2014.

Records available in the home were reviewed and cross referenced with information provided by the home to RQIA. Inspectors were satisfied that the identified accidents and incidents which had occurred since January 2014 have been retrospectively reported to RQIA.

- The registered person must ensure that RQIA are notified of deaths, illnesses and other events as outlined in Regulation 30, in writing within three working days.

Discussion with the registered manager and a review of notifications provided to RQIA following inspection on 6 August 2014 evidenced that RQIA have been notified of deaths, illnesses and other events as outlined in Regulation 30 in writing within the specified time period.

- The registered person must ensure that all staff, with the responsibility of notifying RQIA of deaths, illnesses and other events, have the knowledge and skills to enable them to complete and forward notifications to RQIA as outlined in Regulation 30 of The Residential Care Homes Regulations (Northern Ireland) 2005.

Discussion with senior care staff during the inspection and a review of staff meeting minutes showed that all senior carers with the responsibility of handling notifications had attended training and demonstrated knowledge in relation to notifying RQIA of deaths, illnesses and other events. A policy and procedure has been drawn up for use in the home in relation to the completion of notifications staff are requested to confirm their understanding of same.

The home is evidenced to have fully complied with the requirements of this Failure to Comply Notice.

Failure to Comply Notice 3 - FTC/RCH/1340/2014-2015/03

Regulation 14.(4) of The Residential Care Homes Regulations (Northern Ireland) 2005

“ 14. (4) The registered person shall make arrangements, by training persons employed or by other measures, to prevent residents being harmed or suffering abuse or being placed at risk of harm or abuse.”

Findings:

The inspectors reviewed the action required to be completed to comply with regulation as detailed in the failure to comply with regulation notice. The following are the inspectors' findings:

- Staff need to complete up to date training to ensure they are aware of the regional safeguarding guidelines as well as follow the homes own policy and procedure in relation to safeguarding.

Discussion with staff on duty and a review of staff training records verified that staff had completed training in relation to regional safeguarding guidelines on 27 August 2014. Staff also showed knowledge of the homes own policy and procedure in relation to safeguarding. The home have purchased additional resources for safeguarding training and have further training arranged for staff members in November 2014 to further enhance staff awareness of safeguarding issues.

- Training in relation to safeguarding issues needs to be provided to staff in the home by an accredited trainer.

Training provided to staff in relation to safeguarding issues was provided by an accredited trainer on 27 August 2014. Staff members completed test papers these were marked by an external verifier. The content of the training provided was available in the home inspectors were satisfied that it included all relevant information.

The home is evidenced to have fully complied with the requirements of this Failure to Comply Notice.

Quality Improvement Plan

The details of the Quality Improvement Plan appended to this report were discussed with Mrs Bernadette Mc Gilligan 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.

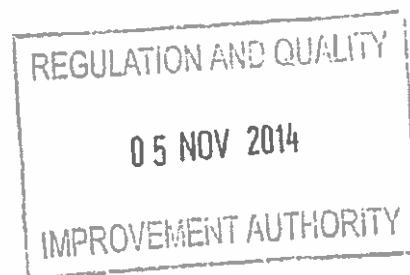
Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of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

Enquiries relating to this report should be addressed to:

Bronagh Duggan
The Regulation and Quality Improvement Authority
9th Floor
Riverside Tower
5 Lanyon Place
Belfast
BT1 3BT



The Regulation and
Quality Improvement
Authority



Quality Improvement Plan

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

The specific actions set out in the Quality Improvement Plan were discussed with Mrs Bernadette Mc Gilligan either during or after 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 Residential Care Homes Regulations (NI) 2005

No.	Regulation Reference	Requirements	Number Of Times Stated	Details Of Action Taken By Registered Person(S)	Timescale
1.	Regulation 15.1 (e)	<p>Carried forward for review at a future inspection</p> <p>The registered manager must ensure the home only accommodates residents within the categories for which the home is registered. Any resident in the home assessed as requiring nursing care must have the suitability of their placement reviewed by the commissioning Trust.</p>	Two	All residents within the home that require nursing care have had their placement reviewed by the Commissioning Trust on the 14 th October '14	From the date of inspection
2.	Regulation 19(2) Schedule 4.13	<p>Carried forward for review at a future inspection</p> <p>The registered manager must ensure that records of food provided to residents are recorded in detail to include any deviations from the set menu and the reasons for these deviations.</p>	Two	This has been actioned since last inspection, manager checks records regularly	From the date of inspection
3.	Regulation 13.4 (a)	<p>Carried forward for review at a future inspection</p> <p>The registered manager must ensure that all medicines in the home are stored appropriately.</p> <p>This specifically relates to the controlled medicines which were not being stored in accordance with the Misuse of Drugs (Safe Custody) (Northern Ireland) Regulations 1973 relating to the storage of any controlled medications.</p>	Two	This has been actioned since 6 th August '14.	From the date of inspection

Recommendations

These recommendations are based on The Residential Care Homes Minimum Standards (2011), 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
1.	27.8	<p>Carried forward for review at a future inspection</p> <p>The closing device on the door in the main sitting / living room needs to be repaired or replaced to address the issue of it slamming.</p>	Two	This has been attended to on the 28 th July '14.	From the date of inspection
2.	25.6	<p>Carried forward for review at a future inspection</p> <p>A record should be retained of staff working over a 24 hour period and the capacity in which they worked.</p> <p>Reference to this includes changes made to duty and staff covering shifts including for short periods should be reflected on the duty rota.</p>	Two	<p>Attended to since inspection to include</p> <p>Senior on duty + reflect role + times of staff shifts</p>	From the date of 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:

NAME OF REGISTERED MANAGER COMPLETING QIP	<i>B. M. Gilligan</i>
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	<i>B. M. Gilligan</i>

QIP Position Based on Comments from Registered Persons	Yes	Inspector	Date
Response assessed by inspector as acceptable	Yes	<i>Bonnie Dwyer</i>	<i>5/12/14</i>
Further information requested from provider			