



The Regulation and
Quality Improvement
Authority

Cornfield Care Centre
RQIA ID: 020082
Green Lane and Castle Lane Suites
51A Seacoast Road
Limavady
BT49 9DW

Inspector: P Cunningham
Inspection ID: IN021499

Tel: 02877765082
Email: info@cornfieldcarecentre.co.uk

**Announced Estates Inspection
of
Cornfield Care Centre
on
16 November 2015**

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates inspection took place on 16 November 2015 from 10.00 to 13.00. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Care Standards for Nursing Homes 2015.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

| | Requirements | Recommendations |
|---|--------------|-----------------|
| Total number of requirements and recommendations made at this inspection | 0 | 4 |

The details of the QIP within this report were discussed with Heather Moore, Home Manager as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

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| Registered Organisation/Registered Person: Marcus Jervis Nutt | Registered Manager: Heather Moore |
| Person in Charge of the Home at the Time of Inspection: Heather Moore | Date Manager Registered: 26 September 2015 |
| Categories of Care: NH-I, NH-DE, NH-PH, NH-PH(E), NH-TI | Number of Registered Places: 52 |
| Number of Patients Accommodated on Day of Inspection: 51 | Weekly Tariff at Time of Inspection: £638 |

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards have been met:

Standard 44: Premises

Standard 47: Safe and Healthy working Practices

Standard 48: Fire Safety

4. Methods/Process

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

Prior to inspection the following records were analysed: duty log, statutory notifications over the past 12 months.

During the inspection the inspector met with Heather Moore, Home Manager. The home's Maintenance Man, Mr Trevor Thompson was also in attendance.

The following records were examined during the inspection: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering services, legionellae risk assessment, fire risk assessment.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced medicines management inspection dated 23 February 2015. The medicines inspector signed the returned Quality Improvement Plan as acceptable on 11 May 2015.

5.2 Review of Requirements and Recommendations from the pre-registration Estates Inspection on 22 August 2014

The previous RQIA estates inspection of the home was an announced pre-registration estates inspection dated 22 August 2014. The home was registered following that inspection and there were no recommendations or requirements made as a result.

5.3 Standard 44: Premises

Is Care Safe? (Quality of Life)

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this Estates inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. This supports the delivery of safe care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services is provided in the premises. This supports the delivery of effective care.

Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. This supports the delivery of compassionate care.

Areas for Improvement

1. Records presented indicated that the temperature of stored hot water was below recommended levels for effective legionellae control purposes. The manager and the registered person stated that the heating and plumbing contractor was to attend following the inspection and adjust the control settings to rectify this. The manager confirmed to RQIA on the day following the inspection by e-mail that this had now been rectified.
2. The manager stated that the home's two communal baths were not frequently used by patients. These should be added to the routine flushing regime which should be carried out twice weekly and the maintenance man confirmed that these would be included on the regime accordingly. See recommendation 1 on the attached Quality Improvement Plan.
3. The report of the servicing to the thermostatic mixing valves lacks detail around the range of service actions undertaken. The registered person confirmed that the range of service checks recommended by the manufacturer were carried out by the service contractor. See recommendation 2 on the attached Quality Improvement Plan.

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| Number of Requirements | 0 | Number Recommendations: | 2 |
|-------------------------------|----------|--------------------------------|----------|

5.4 Standard 47: Safe and Healthy Working Practices

Is Care Safe? (Quality of Life)

A range of documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this Estates inspection. This supports the delivery of safe care.

Is Care Effective? (Quality of Management)

The nature and needs of the patients are considered as part of the risk assessment processes and this is reflected in the management of the home. This supports the delivery of effective care.

Is Care Compassionate? (Quality of Care)

There are health and safety procedures and control measures in place which support the delivery of compassionate care.

Areas for Improvement

Not applicable.

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| Number of Requirements | 0 | Number Recommendations: | 0 |
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5.5 Standard 48: Fire Safety

Is Care Safe? (Quality of Life)

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape. This supports the delivery of safe care.

Is Care Effective? (Quality of Management)

The standard used by the registered person to determine the overall level of fire safety within the premises takes account of the interaction between the physical fire precautions, the fire hazards, the number of patients, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment. This supports the delivery of effective care.

A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Compassionate? (Quality of Care)

The standard used by the registered persons to determine the extent of fire safety protection measures that are appropriate for the premises recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

Areas for Improvement

1. The fire risk assessment rates the risk in the home as 'tolerable'. The action plan of the assessment report lists a number of items which the manager should address and sign off. See recommendation 3 on the attached Quality Improvement Plan.
2. It is unclear whether the fire risk assessor holds recognised third party accreditation or professional registration for fire risk assessment. See recommendation 4 on the attached Quality Improvement Plan.
3. A number of swing-free fire closing devices in the Castle Lane unit of the home were defective and are currently in the process of replacement. The manager confirmed to RQIA on the day following the inspection by e-mail that works to the closers had been completed.

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| Number of Requirements | 0 | Number Recommendations: | 2 |
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5.6 Additional Areas Examined

None.

6. Quality Improvement Plan (QIP)

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Heather Moore, Manager as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP 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.

6.1 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, Nursing Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Care Standards for Nursing Homes 2015. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Persons

The QIP should be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to estates.mailbox@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan

Recommendations

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| <p>Recommendation 1</p> <p>Ref: Standard 44.8</p> <p>Stated: First time</p> <p>To be Completed by: 11 December 2015</p> | <p>Forward confirmation to RQIA that the baths are included in the twice weekly flushing regime for seldom used outlets.</p> <p>Response by Registered Manager Detailing the Actions Taken: As stated on the day of inspection , the baths were included in the twice weekly flushing regime for seldom used outlets.</p> |
| <p>Recommendation 2</p> <p>Ref: Standard 44.8</p> <p>Stated: First time</p> <p>To be Completed by: At time of next service</p> | <p>Ensure that when the thermostatic mixing valves are next serviced, the service report includes details of the service tasks carried out.</p> <p>Response by Registered Manager Detailing the Actions Taken: The registered provider has been informed that when the thermostatic mixing valves are next serviced, the service report shall include details of the service tasks carried out.</p> |
| <p>Recommendation 3</p> <p>Ref: Standard 48.1</p> <p>Stated: First time</p> <p>To be Completed by: 11 December 2015</p> | <p>Carry out appropriate actions to address and sign off the action plan of the fire risk assessment.</p> <p>Response by Registered Manager Detailing the Actions Taken: The fire risk assessment has been action and signed appropriately.</p> |
| <p>Recommendation 4</p> <p>Ref: Standard 48.1</p> <p>Stated: First time</p> <p>To be Completed by: At time of next review of fire risk assessment</p> | <p>At the time of next review of the fire risk assessment, ensure that the person carrying out the review holds recognised third party accreditation or professional registration. Reference should be made to the correspondence from RQIA relating to this. See http://rqia.org.uk/cms_resources/letter%20re%20accreditation%20for%20FRAs_March2015.pdf http://rqia.org.uk/cms_resources/Guide to Choosing a Competent Fire Risk Assessor.pdf</p> <p>Response by Registered Manager Detailing the Actions Taken: The risk assessor has been informed that he should hold the third party accreditation or professional registration. He is currently in the process of achieving accreditation with the institution of fire engineers expected to complete process in 2016</p> |

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|--|---------------|-----------------------|----------|
| Registered Manager Completing QIP | Heather Moore | Date Completed | 08/12/15 |
| Registered Person Approving QIP | Jervis Nutt | Date Approved | 08/12/15 |
| RQIA Inspector Assessing Response | P Cunningham | Date Approved | 8/12/15 |

Please ensure the QIP is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address