

Announced Premises Inspection Report 11 October 2016



Drumlough House

Type of Service: Residential Care Home
Address: 3-19 Moira Road, Lisburn, BT28 1RB
Tel No: 028 9260 1228
Inspector: Gavin Doherty

www.rgia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

1.0 Summary

An announced premises inspection of Drumlough House took place on 11 October 2016 from 10:30 to 12:30.

The inspection sought to assess progress with any issues raised during and since the last premises inspection and to determine if the residential care home was delivering safe, effective and compassionate care and if the service was well led.

Is care safe?

On the day of the inspection the premises supported the delivery of safe care. However two issues were identified for attention by the registered provider. Refer to section 4.3

Is care effective?

On the day of the inspection the premises supported the delivery of effective care.

Is care compassionate?

On the day of the inspection the premises supported the delivery of compassionate care. However one issue was identified for attention by the registered provider. Refer to section 4.5

Is the service well led?

On the day of the inspection the management of the premises was considered to be well led.

This inspection was underpinned by The Residential Care Homes Regulations (Northern Ireland) 2005 and the Residential Care Homes Minimum Standards 2011.

1.1 Inspection outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	3

Details of the Quality Improvement Plan (QIP) within this report were discussed with Mrs Michele Barton, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

1.2 Actions/enforcement taken following the most recent premises inspection

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

2.0 Service Details

Registered organisation/registered provider: South Eastern HSC Trust/Mr Hugh Henry McCaughey	Registered manager: Mrs Michele Barton
Person in charge of the home at the time of inspection: Mrs Michele Barton	Date manager registered: 01 April 2005
Categories of care: RC-TI, RC-DE, RC-I, RC-A, RC-LD, RC-LD(E), RC-MP, RC-MP(E), RC-PH, RC-PH(E), RC-SI	Number of registered places: 39

3.0 Methods/processes

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

During the inspection the inspector met with Mrs Michele Barton, Registered Manager and Mr Johnny Close, Estates Officer with South Eastern HSC Trust.

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, and fire risk assessment.

4.0 The Inspection

4.1 Review of requirements and recommendations from the most recent inspection dated 09/06/16

The most recent inspection of the residential care home was an unannounced care inspection. The completed QIP was returned and approved by the specialist inspector. This QIP will be validated by the specialist inspector at their next inspection

4.2 Review of requirements and recommendations from the last premises inspection dated 03/02/14

Last estates inspection statutory requirements		Validation of compliance
Requirement 1 Ref: Regulation 27 (2)(q) 14 (2)(a)(c) Stated: First time	The Gas Safe certification for the kitchen and laundry equipment was unavailable for inspection. Confirmation should be provided that this equipment has been inspected and tested within the last 12 months and was found to be in a 'satisfactory' condition.	Met
	Action taken as confirmed during the inspection: This was confirmed following the last inspection in February 2014.	
Requirement 2 Ref: Regulation 27 (2)(q) 14 (2)(a)(c) Stated: First time	Confirmation of the current satisfactory validation checks for washer disinfectors installed in the home should be provided to RQIA.	Met
	Action taken as confirmed during the inspection: This was confirmed following the last inspection in February 2014.	
Requirement 3 Ref: Regulation 27 (4)(a) Stated: First time	A review of the homes' fire risk assessment was undertaken on the 30 January 2014. It is essential that any requirements or recommendations highlighted in this review are implemented by the manager of the home within the stipulated timescales.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that the requirements and recommendations had been completed at the time of inspection.	
Requirement 4 Ref: Regulation 27 (4)(d)(iv) Stated: First time	Confirmation should be provided to RQIA that the recently reported faults with the emergency lighting installation have been addressed and that this installation is in a 'satisfactory' condition.	Met
	Action taken as confirmed during the inspection: This was confirmed following the last inspection in February 2014.	

Last estates inspection recommendations		Validation of compliance
Recommendation 1 Ref: Standard 27.8 Stated: First time	Consideration should be given to increasing the lighting levels within the bedrooms throughout the home in accordance with current best practice guidance. Such guidance would include 'Light and Lighting Design for people with dementia' published by the Dementia Services Development Centre, Stirling University.	Met
	Action taken as confirmed during the inspection: New light fittings had been fitted.	

4.3 Is care safe?

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this premises inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. Documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this premises inspection.

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.

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 service users, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment for the home which was recently reviewed on 19 September 2016. It is good to note that the recommendations flowing from this risk assessment are currently being addressed by the manager within the stipulated timescales.

This supports the delivery of safe care.

Two issues were however identified for attention during this premises inspection. These are detailed in the 'areas for improvement' section below.

Areas for improvement

1. The report for the 'thorough examination' of the premises passenger lift required under 'The Lifting Operations Lifting Equipment Regulations (LOLER)', was not available in the home at the time of the inspection. Confirmation should be provided that this examination has been completed within the last 6 months and that any required remedial works have been undertaken.
(Refer to Recommendation 1 in the attached Quality Improvement Plan).

2. The 'Gas Safe' inspection certificates pertaining to the Kitchen and Laundry gas appliances were not available in the home at the time of the inspection. Confirmation should be provided that these inspections have been undertaken within the last 12 months and that any required remedial works have been undertaken.
(Refer to Recommendation 2 in the attached Quality Improvement Plan).

Number of requirements	0	Number of recommendations:	2
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4.4 Is care effective?

There are arrangements in place for routine premises management and upkeep as well as timely breakdown/repair maintenance. Service users are involved where appropriate in decisions around the upkeep of the premises.

This supports the delivery of effective care.

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations:	0
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4.5 Is care compassionate?

The areas of the premises reviewed during this premises inspection were well presented, comfortable, clean, free from malodours and adequately lit.

Service users are consulted about decisions around décor and the private accommodation where appropriate.

This supports the delivery of compassionate care.

One issue was however identified for attention during this premises inspection. This is detailed in the 'areas for improvement' section below.

Areas for improvement

1. The level of decoration throughout the premises was 'tired' and many of the vinyl floor finishes were significantly marked and in poor condition. The external spaces available to residents were also in a very poor condition. A program to address these issues in a timely manner should be prepared and forwarded to RQIA for information and comment.
(Refer to Recommendation 3 in the attached Quality Improvement Plan).

Number of requirements	0	Number of recommendations:	1
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4.6 Is the service well led?

Premises related policies and documentation are retained in a manner which is accessible to relevant people.

Arrangements are in place for managing premises related incidents/notifiable events and Medical Device and Equipment Alerts.

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

No areas for improvement were identified during the inspection.

Number of requirements	0	Number of recommendations:	0
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5.0 Quality improvement plan

Any issues identified during this inspection are detailed in the QIP. Details of this QIP were discussed with **Mrs Michele Barton, Registered Manager** as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/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 provider 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 the residential care home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises, RQIA would apply standards current at the time of that application.

5.1 Statutory requirements

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

5.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and The Residential Care Homes Minimum Standards 2011. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

5.3 Actions taken by the Registered Provider

The QIP should be completed and detail the actions taken to meet the legislative requirements stated. The registered provider should confirm that these actions have been completed and return completed QIP to Estates.Mailbox@rqia.org.uk by the inspector.

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 registered provider from their responsibility for maintaining compliance with the regulations and standards. It is expected that the requirements and recommendations outlined in this report will provide the registered provider with the necessary information to assist them to fulfil their responsibilities and enhance practice within the service.

Quality Improvement Plan	
Recommendations	
Recommendation 1 Ref: Standard 27.8 Stated: First time To be completed by: 6 December 2016	<p>The registered provider should provide confirmation that the 'thorough examination' of the premises passenger lift required under 'The Lifting Operations Lifting Equipment Regulations (LOLER)' examination has been completed within the last six months and that any required remedial works have been undertaken.</p> <p>Response by registered provider detailing the actions taken: Estates dept. will forward confirmation of 'thorough examination' of passenger lift has been completed.</p>
Recommendation 2 Ref: Standard 27.8 Stated: First time To be completed by: 6 December 2016	<p>The registered provider should provide confirmation that the 'Gas Safe' inspections pertaining to the Kitchen and Laundry gas appliances have been undertaken within the last 12 months and that any required remedial works have been undertaken.</p> <p>Response by registered provider detailing the actions taken: Estates dept. will forward confirmation that the 'Gas Safe' inspections have been undertaken.</p>
Recommendation 3 Ref: Standard 27.1 Stated: First time To be completed by: 3 January 2017	<p>The level of decoration throughout the premises was 'tired' and many of the vinyl floor finishes were significantly marked and in poor condition. The external spaces available to residents were also in a very poor condition. A program to address these issues in a timely manner should be prepared and forwarded to RQIA for information and comment.</p> <p>Response by registered provider detailing the actions taken: A programme of redecoration work is to commence in January 2017. A number of bedrooms are to be redecorated and flooring to be replaced. New furniture has been purchased for communal areas.</p>

Please ensure this document is completed in full and returned to Estates.Mailbox@rqia.org.uk from the authorised email address



The Regulation and Quality Improvement Authority

9th Floor

Riverside Tower

5 Lanyon Place

BELFAST

BT1 3BT

Tel 028 9051 7500

Fax 028 9051 7501

Email info@rqia.org.uk

Web www.rqia.org.uk

 [@RQIANews](https://twitter.com/RQIANews)