



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	17904
<b>Establishment ID No:</b>	1059
<b>Name of Establishment:</b>	Beechvale
<b>Date of Inspection:</b>	15 April 2014
<b>Inspector's Name:</b>	Gavin Doherty

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	Beechvale
<b>Address:</b>	35 Beechvale Road Killinchy BT23 6PH
<b>Telephone Number:</b>	028 9754 1166
<b>Registered Organisation/Provider:</b>	Mr Ian McDowell Mrs Lynne McDowell
<b>Registered Manager:</b>	Mrs. Ann Crooks
<b>Person in Charge of the Home at the time of Inspection:</b>	Mrs. Ann Crooks
<b>Other person(s) consulted during inspection:</b>	Mr Ian McDowell
<b>Type of establishment:</b>	Nursing Home
<b>Number of Registered Places:</b>	29 (NH-I, NH-PH, NH- PH(E), NH-TI)
<b>Date and time of inspection:</b>	15 April 2014 from 1030-1330
<b>Date of previous inspection:</b>	14 June 2011
<b>Name of Inspector:</b>	Gavin Doherty

## **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 Nursing Homes.

This is a report of an announced inspection to assess the quality of the premises and grounds in which the service is being provided including the upkeep of the building and engineering services and equipment. The report details the extent to which the standards measured during the inspection were met.

## **3.0 PURPOSE OF THE INSPECTION**

The purpose of this inspection was to consider whether the premises and grounds were safe, well maintained and remain suitable for their stated purpose in compliance with legislative requirements and current minimum standards. This was achieved through a process of 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.

The aims of the inspection were to examine the estates related policies, practices and monitoring arrangements for the provision of Nursing Homes, and to determine the provider's compliance with the:

- HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- Nursing Homes Regulations (Northern Ireland) 2005
- Nursing Homes Minimum Standards (DHSSPS, 2008)

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 Mr Ian McDowell, the home's proprietor
- Examination of records
- Inspection of the home internally and externally. Patients' private bedrooms were only inspected when unoccupied and permission was granted.
- Evaluation and feedback

Any other information received by RQIA about this Regulated Establishment has also been considered by the Inspector in preparing for this inspection.

## **5.0 CONSULTATION PROCESS**

During the course of the inspection, the Inspector spoke to Mr Ian McDowell, the proprietor of Beechvale Nursing Home.

## **6.0 INSPECTION FOCUS**

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Nursing Homes Minimum Standards and to assess progress with the issues raised during and since the previous inspection:

### **Standards inspected:**

- Standard 32 - Premises and grounds
- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

## **7.0 PROFILE OF SERVICE**

Beechvale Private Nursing Home accommodates 29 patients. It provides accommodation over two floors. There is lift access to all patient areas. The nursing home is in Killinchy near Balloo and just six miles from Comber, Co Down. It is located in a very peaceful and quiet location with over four acres of beautifully cultivated gardens, a waterfall and rose gazebo. There are local shops, bank and post office nearby along with several churches of various denominations.

The certificate of registration issued by the Regulation and Quality Improvement Authority (RQIA) was appropriately displayed in the main reception area of the Home.

## **8.0 SUMMARY**

Following the Estates Inspection of Beechvale on 15 April 2014, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

This resulted in two requirements and three recommendations. These are outlined in the following section, and the Quality Improvement Plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Mr Ian McDowell and the Home's staff throughout the inspection process.

## 9.0 INSPECTOR'S FINDINGS

### 9.1 Recommendations and requirements from previous inspection

- 9.1.1 It was good to note that any issues raised in the report of the previous estates inspection on 14 June 2011 had been fully addressed.

### 9.2 **Standard 32 - Premises and grounds** - *The premises and grounds are safe, well maintained and remain suitable for their stated purpose*

- 9.2.1 There was good evidence of maintenance activities within the home and the home appeared clean and well kept. Maintenance procedures for the building and engineering services were in place and good records are maintained and were available for inspection within the home. There is an on-going program of refurbishment within the home. New floor finishes have been fitted in a number of bedrooms and a number of bedrooms have been refurbished to a high standard. These on-going improvement works are to be commended. There are therefore no requirements or recommendations made against this standard as a result of this inspection.

### 9.3 **Standard 35 - Safe and healthy working practices** - *The home is maintained in a safe manner*

- 9.3.1 By in large, safe and healthy working practices appear evident in the home in accordance with this standard. Records indicate that the lifting equipment is being suitably serviced and is subject to suitable and regular thorough examination. The home's heating installation and electrical systems (fixed installation and portable appliances) are also subject to regular service, inspection and testing. A legionella risk assessment has been undertaken and the control measures flowing from this assessment have been implemented. Dead leg pipework was removed from the water systems on 11 April 2014. Records for the monitoring of temperatures to the hot and cold water system were available for inspection and the system was subject to a chemical treatment in September 2013. A new generator was installed at the home in September 2013 and this is suitably maintained. However, several recommendations have been made in relation to this standard as a result of this inspection. These are detailed below, and in the section of the attached quality improvement plan titled '**Standard 35 – Safe and healthy working practices**'.
- 9.3.2 Ensure that the thermostatic mixing valves installed throughout the home are serviced and maintained in accordance with the manufacturer's requirements. Priority in the first instance should be given to those valves installed at showers and baths. (Item 1 in the attached Quality improvement plan)

- 9.3.3 The recent installation of a new emergency standby electricity generator is to be commended. This valuable asset will ensure that the home is able to continue to function should the mains electricity supply fail. However, it is essential that a suitable regime is put in place for the regular inspection and testing of this provision. Advice should be obtained from the manufacturer regarding the format and frequency of these tests.  
(Item 2 in the attached Quality improvement plan)

**9.4      *Standard 36 - Fire safety - Fire safety precautions are in place that reduce the risk of fire and protect patients, staff and visitors in the event of fire.***

- 9.4.1 Fire Safety procedures in the home are generally in line with this standard. Records inspected demonstrate good attention to fire safety matters and the fire risk assessment was suitably reviewed on 8 April 2014. Fire drills are carried out periodically for both day and night staff, with the latest one recorded on 3 December 2013. The fire alarm and detection system, the emergency lighting installation and the portable fire-fighting equipment are suitably serviced and inspected by approved contractors in accordance with current best practice guidance. However, three requirements have been made in relation to this standard as a result of this inspection. These are detailed below and in the section of the attached quality improvement plan titled **‘Standard 32 – Premises and grounds’**.
- 9.4.2 Ensure that the In-house checks for the fire alarm and detection system, the emergency lighting installation and the portable fire-fighting equipment are carried out in accordance with current best practice guidance.
- Fire Alarm & Detection System (BS5839): Weekly
  - Emergency Lighting Installation (BS5266): Monthly
  - Fire Fighting Equipment (BS5306): Monthly
- (Item 3 in the attached Quality improvement plan)
- 9.4.3 Ensure that all bedroom doors throughout the home provide 30 minute fire resistance and are fitted with self-closing devices, in accordance with the latest guidance issued by the Northern Ireland Fire and Rescue Service. Full details may be found at:

[http://www.rqia.org.uk/cms\\_resources/door%20closers%20April%202013.pdf](http://www.rqia.org.uk/cms_resources/door%20closers%20April%202013.pdf)

Details of any proposals including the assessment confirming the proposed self-closing device will not impact adversely on the mobility, safety or quality of life of the room occupant should be forwarded to RQIA.  
(Item 4 in the attached Quality improvement plan)

- 9.4.4 Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and the guidance contained therein:

[http://www.rqia.org.uk/what\\_we\\_do/registration\\_inspection\\_and\\_reviews/service\\_provider\\_guidance/fire\\_safety\\_information.cfm](http://www.rqia.org.uk/what_we_do/registration_inspection_and_reviews/service_provider_guidance/fire_safety_information.cfm)

(Item 5 in the attached Quality improvement plan)

## **10.0 QUALITY IMPROVEMENT PLAN**

The details of the Quality Improvement Plan appended to this report were discussed with Ms. Jane Thomas and Mr. Oliver Monaghan as part of the inspection process.

The timescales commence from the date of inspection.

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Nursing Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the Nursing home to improve the quality of life experienced by patients.

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

## **11.0 Enquiries**

Enquiries relating to this report should be addressed to:

**Regulation and Quality Improvement Authority  
9th Floor  
Riverside Tower  
5 Lanyon Place  
BELFAST BT1 3BT**

## Quality Improvement Plan

- for -

### Announced Estates Inspection

- of -

**Beechvale**

- on -

**15 April 2014**

QIP Position Based on Comments from Registered Persons			QIP Closed		Estates Officer	Date
			Yes	No		
A.	All items confirmed as addressed.					
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.					
C.	Clarification or follow up required on some items.					



## **NOTES:**

The details of the quality improvement plan were discussed with Mr Ian McDowell as part of the inspection process.

The timescales commence from the date of inspection.

Requirements are based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 and The Nursing Homes Regulations (Northern Ireland) 2005 and must be met.

Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the Nursing home to improve the quality of life experienced by patients.

The registered provider is required to record comments on the quality improvement plan.

The quality improvement plan is to be signed below by the registered provider and registered manager and returned to:

**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>	
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	

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**Standard 35 – Safe and healthy working practices.**

The following requirements and recommendations should be noted for action in relation to Standard 35 – Safe and healthy working practices

Item	Regulation Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulation 27 (2)(q) 14 (2)(a)(c)	Ensure that the thermostatic mixing valves installed throughout the home are serviced and maintained in accordance with the manufacturer's requirements. Priority in the first instance should be given to those valves installed at showers and baths. (Refer to 9.3.2 in the Report)	12 Weeks	
2	Regulation 27 (2)(q) 14 (2)(a)(c)	Ensure that a suitable regime is put in place for the regular inspection and testing of the new electrical generator. Advice should be obtained from the manufacturer regarding the format and frequency of these tests. (Refer to 9.3.3 in the Report)	Immediate & On-going.	

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**Standard 36 – Fire safety.**

The following requirements and recommendations should be noted for action in relation to Standard 36 – Fire safety

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3	Regulation 27 (4)(d)	<p>Ensure that the In-house checks for the fire alarm and detection system and the emergency lighting installation are carried out in accordance with current best practice guidance. Records should be maintained and available for inspection within the home.</p> <ul style="list-style-type: none"><li>• Fire Alarm &amp; Detection System (BS5839): Weekly</li><li>• Emergency Lighting Installation (BS5266): Monthly</li></ul> <p>(Refer to 9.4.2 in the Report)</p>	Immediate & On-going	
4	Regulation 27 (4)(b)	<p>Ensure that all bedroom doors throughout the home provide 30 minute fire resistance and are fitted with self-closing devices, in accordance with the latest guidance issued by the Northern Ireland Fire and Rescue Service. Full details may be found at:</p> <p><a href="http://www.rqia.org.uk/cms_resources/door%20closers%20April%202013.pdf">http://www.rqia.org.uk/cms_resources/door%20closers%20April%202013.pdf</a></p> <p>Details of any proposals including the assessment confirming the proposed self-closing device will not impact adversely on the mobility, safety or quality of life of the room occupant should be forwarded to RQIA. (Refer</p>	On-going	

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		to 9.4.3 in the Report)		
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### **Standard 36 – Fire safety.**

**The following requirements and recommendations should be noted for action in relation to Standard 36 – Fire safety**

<b>Item</b>	<b>Regulation Reference</b>	<b>Recommendation</b>	<b>Timescale</b>	<b>Details Of Action Taken By Registered Person (S)</b>
5	Regulation 27 (4)(a)	<p>Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and the guidance contained therein:</p> <p><a href="http://www.rqia.org.uk/what_we_do/registration_inspection_and_reviews/service_provider_guidance/fire_safety_information.cfm">http://www.rqia.org.uk/what_we_do/registration_inspection_and_reviews/service_provider_guidance/fire_safety_information.cfm</a></p> <p>(Refer to 9.4.4 in the Report)</p>	On Review of Fire Risk Assessment	

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