



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	17918
<b>Establishment ID No:</b>	1060
<b>Name of Establishment:</b>	Belmont Care Home
<b>Date of Inspection:</b>	17 June 2014
<b>Inspector's Name:</b>	Gavin Doherty

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	Belmont Care Home
<b>Address:</b>	Parklands Close 81 Tillysburn Park Belfast BT4 2PD
<b>Telephone Number:</b>	028 9076 3408
<b>Registered Organisation/Provider:</b>	Mr. James McCall Four Seasons Health Care Ltd.
<b>Registered Manager:</b>	Mrs Victoria Lane
<b>Person in Charge of the Home at the time of Inspection:</b>	Mrs Victoria Lane
<b>Other person(s) consulted during inspection:</b>	Mr Stephen McCormick, Estates Manager
<b>Type of establishment:</b>	Nursing Home
<b>Number of Registered Places:</b>	48 Beds  NH-I, NH-PH, NH-PH(E), NH-TI
<b>Date and time of inspection:</b>	17 June 2014 from 1030-1230
<b>Date of previous estates inspection:</b>	11 April 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 Mrs Victoria Lane and Mr Stevie McCormick
- 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 Mrs Victoria Lane, Home Manager and Mr Stevie McCormick, Estates.

## **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**

Belmont Nursing Home is registered to care for patients who are over 65 years requiring general nursing care associated with old age, patients under and over 65 years with a physical disability, and for patients who are terminally ill. When beds are available respite care is also provided. The facility a two story building is located in a residential area of the Hollywood Road in Belfast. The bedroom accommodation is comprised of thirty-one single rooms and seven double bedrooms. There are sitting and dining rooms on both floors. A kitchen, laundry, toilet / washing facilities, staff accommodation and offices are available. Satisfactory grounds are provided. Car parking spaces are available in the grounds to the front of the home.

## **8.0 SUMMARY**

Following the Estates Inspection of Belmont Care Home on 17 June 2014, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

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

This resulted in four requirements and one recommendation. These are outlined in the following sections and the Quality Improvement Plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Mrs Victoria Lane, Mr Stevie McCormick 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 the issues raised in the report of the previous estates inspection on 11 April 2011 had been 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 very good records are maintained and were available for inspection within the home. However, two requirements and one recommendation have been made in relation to this standard. These are detailed below and in the section of the attached quality improvement plan titled '**Standard 32 – Premises and grounds**'.
- 9.2.2 At the time of the inspection there was a mechanical/electrical issue with a number of the ground floor extract fans. This issue has been reported to 'MITIE' who have a 'Facilities Management' contract with Four Seasons, and it is anticipated that this issue will be rectified soon.  
(Item 1 in the attached Quality improvement plan)
- 9.2.3 The external grounds were noted as being in poor condition at the time of the inspection. The grass had been cut and it appeared that the borders and paths had been treated with weed killer. However, the weeds had not been removed from these areas and there was little in the way of planting of shrubs or flowers that would encourage patients to venture outdoors. It is essential therefore, that all paths and patio areas are kept clear of debris/weeds, are level and that a slip resistant surface is maintained at all times. Consideration should be given to improving the planting in the current beds and borders surrounding the home. (Item 2 in the attached Quality improvement plan)
- 9.2.4 The home currently meets the minimum standards in relation to the provision of a suitable number of bathrooms. However, several of the bathrooms are inaccessible to patients who may require the use of a patient hoist. Careful consideration should be given to improving the functionality of these existing bathrooms, to enable their continued use without risk to the health, safety and welfare of patients and staff. (Item 3 in the attached Quality improvement plan)

**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 patient lifting equipment is being serviced and is subject to suitable thorough examination. The home's heating installation and electrical systems (fixed installation and portable appliances) are also subject to regular service, inspection and testing. However, one requirement has been made in relation to this standard. This is detailed below and in the section of the attached quality improvement plan titled '**Standard 35 - Safe and healthy working practices**'.
- 9.3.2      At the time of the inspection the current 'Gas Safe' inspection for the Kitchen and Laundry equipment was overdue, having last been completed on 31 May 2013. 'MITIE' have been instructed to ensure that this inspection is carried out, and it is anticipated that they will be completed imminently.  
(Item 4 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 demonstrated good attention to fire safety matters and the fire risk assessment was suitably reviewed on the 2 June 2014. Fire drills are carried out on a monthly basis at varying times to ensure that all staff are able to participate. The fire alarm and detection system, emergency lighting installation and fire-fighting equipment are suitably serviced and inspected by approved contractors. In-house checks are also carried out to the required standards and very good in-house records are maintained and were available for inspection. One requirement has been made as a result of this inspection and in relation to this standard. This is detailed below and in the section of the attached quality improvement plan titled '**Standard 36 - Fire safety**'.
- 9.4.2      Ensure that the significant findings contained within the current Fire risk assessment completed on 2 June 2014, are fully implemented within the stipulated timescales, and are signed-off when completed.  
(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 Mrs Victoria Lane and Mr Stevie McCormick 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 sign off sheet for estates inspectors

<b>Name of Home</b>	Belmont Care Home
<b>Date of Inspection</b>	17 June 2014
<b>Name of Inspector</b>	Gavin Doherty

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.			✓	Gavin Doherty	20/8/2014

Estates Inspection – QIP sign off sheet

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**NOTES:**

The details of the quality improvement plan were discussed with Mrs Victoria Lane and Mr Stevie McCormick 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>	Mrs Tory Lane
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	Jim McCall 

Carol Cousins

Announced Estates Inspection to Belmont Care Home Private Nursing Home on 17 June 2014

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**Standard 32 – Premises and grounds.**

The following requirements and recommendations should be noted for action in relation to Standard 32 – Premises and grounds

Item	Regulation Reference	Requirement	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulation 27 (2)(q)	Ensure that the mechanical/electrical issue preventing the use of the ground floor extract fans is repaired. (Refer to 9.2.2 in the Report)	8 Weeks	Issue addressed by Kennedy Engineering. P/O 113874 raised on 09/05/14 to replace defective fans.
2	Regulation 27 (2)(b)(o)	Ensure that all paths and patio areas are kept clear of debris/weeds, are level and that a slip resistant surface is maintained at all times. Consideration should be given to improving the planting in the current beds and borders surrounding the home. (Refer to 9.2.3 in the Report)	8 Weeks	The Maintenance Man has cleared all paths and patios of debris/weeds. Remedial works have been carried out to ensure they are level and slip resistant. We are currently obtaining quotes for the improvement of the planting in the current beds and borders surrounding the Home.
Item	Standard Reference	Recommendation	Timescale	Details Of Action Taken By Registered Person (S)
3	Standard 32.3 & 35.1	Carry out a survey of the functional suitability of each existing bathroom within the home and prepare a time bound program of works which would enable the continued use of these facilities without risk to the health, safety and welfare of patients and staff. (Refer to 9.2.4 in the Report)	12 Weeks	All bathrooms are to be surveyed, with an action plan to be put in place for future refurbishment.

Announced Estates Inspection to Belmont Care Home Private Nursing Home on 17 June 2014

**Assurance, Challenge and Improvement in Health and Social Care**

**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	Requirement	Timescale	Details Of Action Taken By Registered Person (S)
4	Regulation 14 (2)(c) 27 (2)(q)	Ensure that the overdue annual inspection for the Kitchen and Laundry gas powered equipment is undertaken by a suitably registered 'Gas Safe' engineer without further delay. (Refer to 9.3.2 in the Report)	4 Weeks	Kitchen gas equipment was serviced on 26/06/14 by CES. Laundry gas equipment to be serviced on 05/08/14 by Premier Laundry.

**Standard 36 – Fire Safety.**

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

Item	Regulation Reference	Requirement	Timescale	Details Of Action Taken By Registered Person (S)
5	Regulation 27 (4)(a)	Ensure that the significant findings contained within the current Fire risk assessment completed on the 2 June 2014, are fully implemented and signed-off when completed. (Refer to 9.4.2 in the Report)	As stipulated in Fire Risk Assessment	All required actions have been signed off to date.

Announced Estates Inspection to Belmont Care Home Private Nursing Home on 17 June 2014

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