

Unannounced Variation Application Premises Inspection Report 27 June 2018



**Bannview House
ID 11103**

**Variation Reference
VA010915**

**Type of service: Nursing Home
Address: 23 Bannview Rd, Banbridge, BT32 3RL
Tel No: 028 40660110
Inspector: Raymond Sayers**

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 service from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a 80 bed nursing home currently accommodating 58 nursing category and 22 residential care category service users.

3.0 Service details

Organisation/Registered Provider: Amore (Warrenpoint) Limited/ Nicola Cooper	Registered Manager: Cherith Rogers
Person in charge at the time of inspection: Gillian McAleavey (Deputy Manager)	Number of registered places: 80

4.0 Inspection summary

An unannounced inspection took place on 27 June 2018 from 11:45 to 13:00

This inspection was underpinned by:

- The Nursing Homes Regulations (Northern Ireland) 2005
- Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015

The purpose of the inspection was to assess the premises and evaluate the variation application VA010915.

The variation application proposal was to establish a 22 bed residential care home (Lisnaree House) within the existing building, and separate from the existing nursing home registration.

The following areas were examined during the inspection:

- Existing residential care category accommodation to be transferred to new residential care home registration.
- Fire safety risk assessment & associated control measures records.
- Legionella risk assessment & associated control measures records.
- Building service maintenance certificates.

The findings of this report will provide the provider with the necessary information to assist them to fulfil their responsibilities.

5.0 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	1

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Gillian McAleavey, Deputy Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

Subject to verification that the fire risk assessment action plan has been implemented then the variation application will comply with DHSS&PS estate registration requirements.

The findings of the inspection were provided to the person in charge at the conclusion of the inspection.

6.0 The inspection

1. **Fire Safety:** The fire risk assessment (FRA) document was not available for examination at the time of the inspection; the FRA was submitted by e-mail on 28 June 2018, the FRA report was dated 16 August 2017 & therefore conducted within the previous 12 months period. The FRA was reviewed, and a number of action plan recommendations were listed for action by the registered manager/person. There was no evidence or supporting statement from the registered manager/person to verify that any of the the action plan recommendations had been implemented.

Areas for improvement

- Verify that the fire risk assessment action plan recommendations have been implemented.

	Regulations	Standards
Total number of areas for improvement	0	1

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Gillian McAleavey, Deputy Manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 Nursing 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.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with:

- Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015
- The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have

been completed and return the completed QIP via Web Portal for assessment by the inspector.

Quality Improvement Plan	
Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015	
Area for improvement 1 Ref: Standard 48.1 Stated: First time To be completed by: 08 August 2018	<p>The registered person shall confirm that the fire risk assessment action plan recommended improvement works are implemented</p> <p>Ref: 6.1</p> <hr/> <p>Response by registered person detailing the actions taken: the majority of the fire risk assessment improvement works have been implemented at site level- the few outstanding improvement works are awaiting sub contractor input</p>

Please ensure this document is completed in full and returned via Web Portal



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

Tel 028 9536 1111
Email info@rqia.org.uk
Web www.rqia.org.uk
Twitter @RQIANews