



The Regulation and
Quality Improvement
Authority

Ardlough Care Home
RQIA ID: 1166
2 Ardlough Road
Drumahoe
Londonderry
BT47 5SW

Inspector: P Cunningham
Inspection ID: IN021380

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**Announced Estates Inspection
of
Ardlough Care Home**

22 June 2015

The Regulation and Quality Improvement Authority
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Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates inspection took place on 22 June 2015 from 10.00 to 13:30. 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	3	4

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

2. Service Details

Registered Organisation/Registered Person: Four Seasons Health Care Northern Ireland Ltd	Registered Manager: Martina Mullan
Person in Charge of the Home at the Time of Inspection: Martina Mullan	Date Manager Registered: 13 February 2014
Categories of Care: NH-DE, NH-MP, NH-MP(E)	Number of Registered Places: 44
Number of Patients Accommodated on Day of Inspection: 43	Weekly Tariff at Time of Inspection: £593

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 and Grounds

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: Previous Estates inspection report, previous care report, notifications from previous 12 months.

During the inspection the inspector met with Martina Mullan, Home Manager, Des McGinty, Home Maintenance Man and Gerry Hegarty, Estates Manager, Four Seasons Health Care Limited.

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.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 9 February 2015. The completed QIP which contained no requirements and one recommendation was returned and assessed as acceptable by the care inspector on 5 March 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection on 9 January 2013

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulations 27 (2)(q) 27 (2)(c)	Forward copies of service reports relating to the recent testing and inspection of the home's fixed electrical installation and electrical equipment.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that testing of the fixed wiring installation had been carried out on 2 January 2013 and documentation presented indicated that defects listed as codes 1 and 2 on the report of that testing had been addressed.	
Requirement 2 Ref: Regulation 27 (2)(b)	Replace floor covering in areas where damaged.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that floor coverings throughout the home were in relatively good condition, many having been replaced since the previous inspection.	
Requirement 3 Ref: Regulation 27.(4)(c)	Provide an easy opening device to the fire exit door leading from the laundry to the external yard area. The fire risk assessor should be consulted accordingly.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that this had been provided	
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 32.8	Carry out a review of storage arrangements in the home with a view to rationalizing and provide additional storage facilities as necessary.	Partially Met
	Action taken as confirmed during the inspection: Inspector confirmed that a new external store has been ordered and should be in place in several weeks time. The home was relatively tidy at the time of inspection and currently storage appears to be managed appropriately.	

Recommendation 2 Ref: Standard 32.8	Consider carrying out servicing of the home's heating boiler prior to winter period.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that the boiler was serviced in the summer period.	
Recommendation 3 Ref: Standard 34.8	Consider the provision of separate wash hand basins in sluice rooms, laundry and any other areas where there is an increased likelihood of staff handling soiled and infected materials.	Partially Met
	Action taken as confirmed during the inspection: Inspector confirmed that separate wash hand basins were provided in the laundry and in the first floor sluice room. None have been provided in the ground floor sluice room. Refer to recommendation 1 in the attached Quality Improvement Plan.	

Number of Requirements	0	Number Recommendations:	1
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5.3 Standard 44: Premises and Grounds

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. 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 areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. This supports the delivery of compassionate care. A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Areas for Improvement

1. The home's legionellae risk assessment has been reviewed on 12 March 2015. Refer to requirement 1 in the attached Quality Improvement Plan.
2. One first floor toilet is fitted with a communal urinal and this is now unused. Refer to recommendation 2 in the attached Quality Improvement Plan.
3. The home's guttering was found to be in need of clearing in areas. The manager and the Estates Manager stated that this had been subjected to cleaning by a specialist company in recent weeks. Refer to recommendation 3 in the attached Quality Improvement Plan.
4. A number of cover plates on door handles in the home were missing. Refer to recommendation 4 in the attached Quality Improvement Plan.

Number of Requirements	1	Number Recommendations:	3
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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.

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. 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)

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

Areas for Improvement

1. Records presented indicate that the fire safety awareness displayed during practice fire drills could be improved. Refer to requirement 2 in the attached Quality Improvement Plan. The estates Manager forwarded information the inspector following the inspection (on 24 June 2015) indicating that a practice fire evacuation drill was carried out in the home on 24 June 2015 and that the staff response to the drill was acceptable.
2. The fire risk assessment was reviewed on 23 April 2014. The Estates Manager outlined the remedial works to address the action plan of the assessment and these are almost complete. Remaining items are due for completion in approximately 2 – 3 weeks. Refer to requirement 3 in the attached Quality Improvement Plan.

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

Not applicable.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Martina Mullan, Home 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 Manager/Registered Person

The QIP will 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	
Statutory Requirements	
Requirement 1 Ref: Regulation 14 (2)(c) Stated: First time To be Completed by: 31 July 2015	Confirm that the action plan of the legionellae risk assessment has been appropriately addressed. Response by Registered Manager Detailing the Actions Taken: All works to be carried out in 2015.
Requirement 2 Ref: Regulation 27 (4)(e) 27 (4)(f) Stated: First time To be Completed by: As soon as practically possible	Carry out fire safety awareness training for all staff. This should be accompanied by refresher practice fire evacuation drills to ensure that all staff are fully aware of the actions to be taken in the event of a fire situation or a fire alarm activation within the home. Response by Registered Manager Detailing the Actions Taken: Weekly fire evacuation fire drills are carried out followed by staff evaluation of training using questions and answers. Two trainign sessions have been planned for the end of August to cascade fire safety awarness to staff in the home
Requirement 3 Ref: Regulation 27 (4)(a) Stated: First time To be Completed by: in line with timescales set down by the fire risk assessor	Carry out remedial measures to complete works to address the action plan of the fire risk assessment. The assessment should be reviewed subsequently by the fire risk assessor. Response by Registered Manager Detailing the Actions Taken: Boiler service completed on the 06/07/15. All works now completed.
Recommendations	
Recommendation 1 Ref: Standard 46.11 Stated: Second time To be Completed by: 25 September 2015	It was noted that there was no separate hand washing facilities in the ground floor sluice room. It is recommended that in line with current good practice for prevention and control of infection, the provider should consider provision of suitable separate hand washing facilities in this room. Response by Registered Manager Detailing the Actions Taken: Taken forward for consideration .

Recommendation 2 Ref: Standard 44 Stated: First time To be Completed by: 25 September 2015	Consider refurbishment of the first floor W.C. including removing the communal urinal. Response by Registered Manager Detailing the Actions Taken: Taken forward for consideration		
Recommendation 3 Ref: Standard 44.8 Stated: First time To be Completed by: 17 July 2015	Clear the home's guttering of all debris and weeds. The arrangements for cleaning of the guttering should be reviewed to ensure that same is cleared in a timely manner regularly. Response by Registered Manager Detailing the Actions Taken: Unsatisfactory completion of work discussed with contractor. Remedial works to be addressed.		
Recommendation 4 Ref: Standard 44.8 Stated: First time To be Completed by: 17 July 2015	Replace cover plates to door handles were these are missing. Response by Registered Manager Detailing the Actions Taken: Completed by maintenance man on the day of inspection.		
Registered Manager Completing QIP	Martina Mullan	Date Completed	20/07/2015
Registered Person Approving QIP	Dr Claire Royston	Date Approved	21.07.15
RQIA Inspector Assessing Response	Phil Cunningham	Date Approved	5/8/15

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