



The Regulation and
Quality Improvement
Authority

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**Announced Estates Inspection
of
Brooklands**

15 May 2015

The Regulation and Quality Improvement Authority
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1. Summary of Inspection

An announced estates inspection took place on 15 May 2015 from 10.00 to 14.00. 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	4	1

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

2. Service Details

Registered Organisation/Registered Person: Brooklands Healthcare	Registered Manager: Christine Donnell
Person in Charge of the Home at the Time of Inspection: Christine Donnell	Date Manager Registered: 2006
Categories of Care: NH-PH, NH-I	Number of Registered Places: 45
Number of Patients Accommodated on Day of Inspection: 44	Weekly Tariff at Time of Inspection: £585

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, statutory notifications over the past 12 months.

During the inspection the inspector met the Brooklands Estates Manager, Oliver Monaghan and the Brooklands Derry Maintenance Man, Des O'Kane.

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 medicines management inspection dated 11 November 2014. One requirement was made following the inspection. The completed QIP was returned by the provider and assessed by the pharmacy inspector on 18 December 2014 as acceptable.

5.2 Review of Requirements and Recommendations from *the last* Estates Inspection carried out on 22 September 2012

Previous Inspection Statutory Requirements		Validation of Compliance
<p>Requirement 1</p> <p>Ref: Regulation 27 (2)(c)</p>	<p>Provide confirmation to RQIA that service checks to the home's thermostatic mixing valves include testing of the failsafe facilities.</p> <p>It is further recommended that the servicing of the valves is carried out in line with the manufacturer's recommendations and guidance.</p> <p>Action taken as confirmed during the inspection: Provider confirmed that these checks are in place.</p>	Met
<p>Requirement 2</p> <p>Ref: Regulation 14 (2)(c)</p>	<p>Undertake investigative measures and implement appropriate remedial actions to address the issue detailed in the report of the legionella risk assessment relating to the cold water storage provision in the home.</p> <p>Action taken as confirmed during the inspection: Provider confirmed that works and remedial measures have been completed.</p>	Met
<p>Requirement 3</p> <p>Ref: Regulation 14 (2)(c)</p>	<p>Continue with programme of providing protective covers to home's radiators. This should be prioritized by risk assessment paying particular attention to areas where patients may occupy without staff observation and supervision.</p> <p>Action taken as confirmed during the inspection: Provider confirmed that works to provide covers to radiators had been carried out on risk assessment. The inspector observed that covers were fitted throughout the home.</p>	Met

Requirement 4 Ref: Regulation 27 (2)(c)	On completion of works, forward copy of commissioning certification relating to the conversion of the heating boilers from oil to gas to RQIA.	Met
Action taken as confirmed during the inspection: Documentation provided following previous inspection.		
Requirement 5 Ref: Regulation 27 (2)(c)	Obtain reports of thorough examination of lifting equipment including patient hoists and passenger lift, and forward copies to RQIA	Met
Action taken as confirmed during the inspection: Documentation provided following previous inspection.		
Requirement 6 Ref: Regulation 27 (2)(c)	On completion of works, forward copy of commissioning certification relating to the installation of replacement emergency standby generator to RQIA.	Met
Action taken as confirmed during the inspection: Documentation provided following previous inspection.		
Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 32.8	Retain records of in-house checks to the home's staff call system.	Met
Action taken as confirmed during the inspection: Records inspected during this inspection.		

5.3 Standard 44: Premises and Grounds

Is 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

Servicing of the thermostatic mixing valves was carried out on 12 April, 13 and 14 May 2015. Documentation relating to servicing was not available during the inspection and the estates manager undertook to forward this to RQIA following the inspection. See requirement 1 on the Quality Improvement Plan below.

Servicing of the homes gas fired equipment is due within the next few weeks and the estates manager undertook to forward copies of certificated relating to this to RQIA following the inspection when same are available. See requirement 2 on the Quality Improvement Plan below.

During the walk around, the inspector found that several locking mechanisms to sanitary accommodation were defective and that these could not be unlocked from outside in the event of an emergency. See requirement 3 on the Quality Improvement Plan below.

Floor coverings have been replaced to various areas of the home since the last estates inspection. The carpet to the top floor landing and the wooden flooring in the front small sitting room are due to be replaced in coming weeks. See recommendation 1 on the Quality Improvement Plan below.

Number of Requirements	3	Number Recommendations:	1
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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

No areas were identified for improvement.

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.

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 which was carried out by a specialist company holding accreditation on the BAFE 205 scheme. This supports the delivery of effective care.

One issue was however identified for attention during this Estates inspection. This is 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.

Areas for Improvement

A range of improvement works are in progress following the fire risk assessment on 16 April 2014. The provider should see these through to satisfactory completion. See requirement 4 on the Quality Improvement Plan below.

Number of Requirements	1	Number Recommendations:	0
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5.6 Additional Areas Examined

No additional areas were examined.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Home Manager, Christine Donnell 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 should 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	
<p>Requirement 1</p> <p>Ref: Regulation 27 (2)(c)</p> <p>Stated: First time</p> <p>To be Completed by: 26 June 2015</p>	<p>Forward documentation confirming that the thermostatic mixing valves have been serviced to RQIA.</p> <hr/> <p>Response by Registered Manager Detailing the Actions Taken:</p> <p>Documentation sent to RQIA 10.06.15</p>
<p>Requirement 2</p> <p>Ref: Regulation 27 (2)(c)</p> <p>Stated: First time</p> <p>To be Completed by: 26 June 2015</p>	<p>Forward confirmation of safety checks to the gas installation and equipment to RQIA.</p> <hr/> <p>Response by Registered Manager Detailing the Actions Taken:</p> <p>Documentation sent to RQIA 10.06.15</p>
<p>Requirement 3</p> <p>Ref: Regulation 27 (2)(c)</p> <p>Stated: First time</p> <p>To be Completed by: 26 June 2015</p>	<p>Carry out remedial works to the locking mechanisms on doors to sanitary accommodation where necessary to ensure that they can be unlocked from outside in the event of an emergency.</p> <hr/> <p>Response by Registered Manager Detailing the Actions Taken:</p> <p>Remedial work completed and all doors can be unlocked from outside in the event of an emergency – completed 20.06.15</p>
<p>Requirement 4</p> <p>Ref: Regulation 27 (4)(a)</p> <p>Stated: First time</p> <p>To be Completed by: as advised by the fire risk assessor</p>	<p>Complete the currently ongoing remedial works in respect of the action plan of the fire risk assessment.</p> <hr/> <p>Response by Registered Manager Detailing the Actions Taken</p> <p>Remedial works on-going</p>

Recommendations			
Recommendation 1 Ref: Standard 44.1 Stated: First time To be Completed by: 10 August 2015	Replace floor coverings to the first floor landing area and the small front sitting room on the ground floor.		
	Response by Registered Manager Detailing the Actions Taken: Ground floor sitting room to be completed on Wednesday 24.06.15. First floor landing area will be completed by August 2015.		
Registered Manager Completing QIP	Christine Donnell	Date Completed	22.06.15
Registered Person Approving QIP	Therese Conway	Date Approved	23..06.15
RQIA Inspector Assessing Response	P Cunningham	Date Approved	*5/8/15

**follow up required on several items*