



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501

ANNOUNCED ESTATES INSPECTION

Inspection No: IN021020
Establishment ID No: 1178
Name of Establishment: Edgewater Nursing Home
Date of Inspection: 13 January 2015
Inspector's Name: P Cunningham

1.0 GENERAL INFORMATION

Name of Home:	Edgewater Nursing Home
Address:	70 Victoria Road Newbuildings Londonderry BT47 2RL
Telephone number:	02871342090
Registered organisation/provider:	Paul Steele Michael Curran
Registered manager:	John Green
Person in charge of the home at the time of Inspection:	John Green
Other persons consulted during the Inspection:	N/A
Type of establishment:	Nursing Home
Number of registered places:	28
Date and time of inspection:	13 January 2015 from 10:00am - 2.00pm
Date of previous estates inspection:	9 October 2012
Name of inspector:	P Cunningham

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 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 following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The 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 the person in charge
- 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 John Green.

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

Edgewater is a two-storey, purpose built Nursing Home situated on the outskirts of the village of Newbuildings. The home accommodates 28 people requiring a range of nursing care. There is adequate car parking space although outdoor space for use by patients is limited.

8.0 SUMMARY

Following the Estates Inspection of Edgewater on 13 January 2015, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

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

This resulted in six requirements. These are outlined in the Quality Improvement Plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of John Green during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

A number of issues raised in the report of the previous estates inspection on **9 October 2012**. These are detailed below.

Item	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
9.1.1	Regulation 27 (2)(c)	<p>Item 1 on previous QIP</p> <p>Carry out appropriate remedial works to the home's sanitary accommodation extract ventilation systems. These should be checked at regular intervals thereafter. See 9.2.3 in report</p>	<p>Completed.</p> <p>Note, further works were underway at the time of this inspection to replace the fan motors on these ventilation units as well as the ventilation in the first floor smoking room.</p>	See 9.3.2 below
9.1.2	Regulation 14 (2)(c)	<p>Item 2 on previous QIP</p> <p>Undertake a comprehensive legionellae risk assessment in the home by a competent person. This should include an action plan to address all shortcomings as well as the provision of suitable training and instruction to the home's staff on their respective duties.</p> <p>It is further recommended that the record log sheets for ongoing control measures and checks are reviewed for ease of use by the home's handyman.</p>	<p>Completed</p> <p>Note, a legionellae/infection control specialist has been appointed to carry out the assessment as well as ongoing monitoring procedures and a number of remedial measures were implemented as a result of the specialist's assessment. This includes replacement cold water storage tanks and provision of filters to the water supply system – some of which is still ongoing. It was confirmed during this inspection that the registered provider has approved further works to remove 'dead legs' pipework from the installation.</p>	See 9.3.3 below

9.1.3	Regulation 14 (2)(c)	Item 3 on previous QIP Provide thermostatic mixing valves to all hot water outlets which are normally accessible to patients and not already provided with controls.	Completed	N/A
9.1.4	Regulation 14 (2)(c)	Item 4 on previous QIP Provide means of securing stored oxygen cylinders against falling.	Completed	N/A
9.1.5	Regulation 27 (2)(c)	Item 5 on previous QIP Implement routine and validation checks to the home's washer disinfector in line with current good practice. Retain record of same.	Completed (by the legionellae/infection control specialist)	N/A

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 The home appeared in relatively good decorative order and free from odours. Significant decorative upgrading has been carried out since the previous inspection including replacement floor coverings and re-painting, etc. Documentation in relation to the upkeep of the building was available for inspection.

9.2.2 The floor coverings to the ground floor sanitary accommodation are in need of replacement.

See item 1 on 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, although some issues (including those mentioned in section 9.1 above) have been identified for attention by the user. These are detailed in the section of the attached quality improvement plan titled '**Standard 35 - Safe and healthy working practices**'.

9.3.2 Works were underway at the time of this inspection to replace the fan motors to the ventilation system in the first floor central sanitary accommodation and the first floor smoking room.

See item 2 on the attached Quality Improvement Plan.

9.3.3 Works have been approved to remove dead-leg pipework on the home's plumbing system.

See item 3 on 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, in the main, generally in line with this standard. There are however a number of issues which need to be addressed. These are detailed in the section of the attached quality improvement plan titled '**Standard 36: Fire safety**'.

9.4.2 A number of fire doors in the home are not fitted with smoke seals. This has been identified in the fire risk assessment.

See item 4 on the attached Quality Improvement Plan.

9.4.3 A number of self-closing devices on fire doors have been disconnected and the linkage arms removed.

See item 4 on the attached Quality Improvement Plan.

9.4.4 There is no automatic fire detection in the home's roof space. This has been identified in the fire risk assessment and works to provide this had begun during this inspection.

See item 5 on the attached Quality Improvement Plan.

9.4.5 Fire training for staff has lapsed. This is due to be undertaken in the next few weeks.

See item 6 on the attached Quality Improvement Plan.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with John Green 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 home to improve the quality of life experienced by residents.

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**



The Regulation and
Quality Improvement
Authority

Quality Improvement Plan

Announced Estates Inspection

Edgewater Nursing Home

13 January 2015

QIP Position Based on Comments from Registered Persons (for RQIA use only)			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.	X		X	<i>P Cunningham</i>	5/3/15

NOTES:

The details of the quality improvement plan were discussed with John Green, Registered Manager/Registered Provider 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 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 completed by the registered provider and registered manager and returned to estates@rqia.org.uk.

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:

NAME OF REGISTERED MANAGER COMPLETING QIP	MR JOHN GREEN
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	MR MICHAEL CURRIN

Announced Estates Inspection to Edgewater Nursing Home on 13 January 2015

Assurance, Challenge and Improvement in Health and Social Care

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	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1	27 (2)(b)	Replace the linoleum floor covering in the ground floor central sanitary accommodation. See 9.2.2 in report	8 months	Same will be replaced within 2 months

Announced Estates Inspection to Edgewater Nursing Home on 13 January 2015

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	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
2	27 (2)(q)	Provide confirmation that the ventilation system in the first floor areas are in working order following remedial works. See 9.3.2 in report.	4 weeks	ventilation system has been attended to , not completed but will be within designated time
3	14 (2)(c)	Provide confirmation that the works to remove the 'dead-leg' pipework in the home's plumbing system have been removed or provide date by which this is to be completed. See 9.3.3 in report	4 weeks	to be completed for given time period

Announced Estates Inspection to Edgewater Nursing Home on 13 January 2015

Assurance, Challenge and Improvement in Health and Social Care

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)
4	27.(4)(b)	Develop a time-scaled programme/plan of works for the provision of suitable self-closing devices and smoke seals to fire doors throughout the home in line with correspondence from RQIA/NIFRS in June 2013. Forward a copy of the plan to RQIA. http://www.rqia.org.uk/cms_resources/Audit%20inspections%20of%20Registered%20Residential%20Care%20Premises%20by%20NIFRS.pdf http://www.rqia.org.uk/cms_resources/door%20closers%20April%202013.pdf See 9.4.2 and 9.4.3 in report.	One month	Work has been already assessed and approval for completion given. to be completed in coming 2 weeks.
5	27.(4)(b)	Provide confirmation of completion to works to provide fire detection in the home's roof space or provide date by which this is to be completed. See 9.4.4 in report.	4 weeks	Requested and work scheduled in coming two weeks
6	27.(4)(e)	Ensure that all staff have attended refresher fire safety training. See 9.4.5 in report.	4 weeks	fire lecture held in February 2015. Done.

Announced Estates Inspection to Edgewater Nursing Home on 13 January 2015

Assurance, Challenge and Improvement in Health and Social Care