

Estates Report for RQIA Inspection IN016942 - Edenvale Care Home (1182) on 5 December 2014

- **The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003**
- **The Nursing Homes Regulations (Northern Ireland) 2005**
- **Nursing Homes Minimum Standards 32, 35 and 36 (DHSSPS, January 2008)**

I would confirm the following matters with regard to above:

An inspection of **Edenvale Care Home**, Edenmore Road, Limavady was carried out by RQIA on 5 December 2014. Mrs Carol Craig, Registered Manager and Mr. Gerry Hegarty, Estates Officer, Four Seasons Health Care (FSHC) were present during this inspection.

RQIA considers that action is required by the Registered Persons in relation to the items 13, 14 and 15 noted below in order to ensure compliance with the above legislation and standards:

Standard 32 – Premises and grounds

Previous Issues (Estates Inspection on 24 November 2011)

1. **Previous QIP item 1.** Various works including decorative works to introduce specific colour schemes and signage have been implemented to enhance the premises for people suffering with dementia.

Current Issues

2. It is good to report that the premises being used for the purposes of Edenvale Care Home were in very good decorative order, clean, odour free and comfortable. No issues were identified for attention in relation to this standard during this inspection.

Standard 35 - Safe and healthy working practices

Previous Issues (Estates Inspection on 24 November 2011)

3. **Previous QIP item 2.** Confirmation was given by the Estates Officer that the action plan of legionellae risk assessment has been largely addressed
4. **Previous QIP item 3.** Confirmation was given by the Estates Officer that the home's thermostatic mixing valves have been serviced.
5. **Previous QIP item 4.** Window restrictors are provided at all appropriate window openings and these are checked regularly to ensure that they are effective.
6. **Previous QIP item 5.** The home's emergency standby generator is operational and documentation was available relating to servicing of same.
7. **Previous QIP item 6.** The medicine storage area on the ground floor has been provided with obscure glazing and window restrictor.

15. Consideration should be given to replacing the sofa in the corridor in the ground floor dementia unit to a smaller one which causes less of an obstruction in the corridor. The manager should liaise with the fire risk assessor accordingly.

Reference:

- **Fitness of premises Regulations 27(4)(b)**
- **Nursing Homes Minimum Standard 36.2**

Action Required by Registered Persons

Items 13, 14 and 15 above identified for action in this report should be addressed in a prioritised and timely manner. These issues will be followed up by RQIA. This may include a further inspection on or before **31 March 2015**.

A detailed response to this inspection report should be made using the attached Quality Improvement Plan and returned to this office via email to estates@rqia.org.uk by **8 January 2015**. If you disagree with the factual accuracy of the report you should make a separate response to the above email address in order that amendments can be considered and made or your comments appended.

On **9 January 2015** this inspection report will be made open to the public (bar any communication regarding factual accuracy). If you have not provided a detailed response by this date, this report will still be made open without your comments.

You will be aware that this report and any response you submit will constitute an open report on this establishment and will be made available to interested parties on request. If a detailed response is not received in writing by the required date given above, I would ask you to regard this copy of the report as final and an open document effective from **9 January 2015**.

Thank you for your co-operation.

I look forward to hearing from you.

Regards



Phil Cunningham
Senior Estates Officer

Quality Improvement Plan

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Response for item 13

Fire Risk assessment has been forwarded to the Estates Surveyor to be deemed tolerable.


Response for item 14

The ventilation system in the kitchen has now been addressed which does not effect the operation of the kitchen door into the corridor.

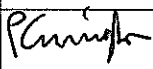
Response for item 15

This has been reviewed and a smaller sofa has been placed here for rest area for residents in Dementia area.

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	Carol Craig
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	 Jim McCall DIRECTOR OF OPERATIONS

12.1.15.

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.	✓	✓		4/2/15
C.	Clarification or follow up required on some items.				