

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: IN017955

Establishment ID No: 11967

Name of Establishment: Ringdufferin Nursing Home

Date of Inspection: 13 January 2015

Inspector's Name: Mr Gavin Doherty

1.0 GENERAL INFORMATION

Name of Home:	Ringdufferin Nursing Home
Address:	36 Ringdufferin Road Killyleagh BT30 9PH
Telephone Number:	028 4482 1333
Registered Organisation/Provider:	M Care Ltd.
Registered Manager:	Ms Kate Lee
Person in Charge of the Home at the time of Inspection:	Ms Kate Lee
Other person(s) consulted during inspection:	Ms Caroline Smyth
Type of establishment:	Nursing Home
Number of Registered Places:	32 NH-I, NH-PH, NH-PH(E), NH-TI 32 RC-DE
Date and time of inspection:	13 January 2015 from 10:30 - 13:00
Date of previous inspection:	19 June 2012
Name of Inspector:	Mr Gavin Doherty

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. Patient's private bedrooms were only inspected when unoccupied and permission was granted.
- Evaluation and feedback

Any other information received by RQIA about this Registered Provider 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 Ms Kate Lee, Registered Manager and Ms Caroline Smyth.

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

Ringdufferin Nursing Home is conveniently located on the Comber – Killyleagh Road, just outside the town of Killyleagh. Situated in an area of outstanding natural beauty on an elevated site, it offers patients/residents the ability to benefit from both the landscape and seascape views overlooking Strangford Lough. The nursing home provides care for up to 64 patients. Strangford Suite on the ground floor supports the care of 32 residential category patients. Dunmore Suite on the first floor supports the care of 32 nursing patients. The bedrooms are tastefully decorated and finished to a very high standard with built in furniture, profile beds and a leather effect armchair. There are dining facilities and lounge areas on the ground and first floor areas. A hairdressing room is located for use by all patients/residents on the ground floor. A large activity room is available on the first floor. There is ample car parking to the front of the home.

8.0 SUMMARY

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

Standard 35 - Safe and healthy working practices

This resulted in three requirements and one recommendation. These are outlined in the quality improvement plan appended to this report.

The Estates Inspector would like to acknowledge the assistance and hospitality of Ms Kate Lee, Ms Caroline Smyth and the home's staff throughout the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

It is good to note that the requirements raised in the report of the previous estates inspection on 19 June 2012 have been fully addressed.

No	Regulation	Requirements	Action taken - as confirmed	Inspector's Comments
	Ref.		during this inspection	
1	Regulation 27(2)(d)	Ensure that the correct cleaning materials, equipment and methods are used to maintain	The supplier of the flooring has been contacted and is	Flooring found to be in good condition.
		the dimpled slip resistant flooring in the bathrooms and toilets in an acceptable condition.	researching recommended cleaning materials	Requirement fulfilled.
2	Regulation 14(2)(a)(c)	Ensure that all thermostatic mixing valves throughout the facility are set as follows: • Showers – 410c max. • Baths – 430c max. • WHB's – 410c max.	All thermostatic mixing valves have been regulated to correct temperatures and records maintained	Requirement fulfilled.
3	Regulation 14(2)(a)(c)	Ensure that the home's passenger lift fully complies with the requirements of the Lifting Operations, Lifting Equipment Regulations 1998, as issued by the Health and Safety Executive. The following guidance documents may prove useful in highlighting the home's requirements under this legislation (www.hse.gov.uk): • INDG339 'Simple guidance for lift owners'.	The Insurance Company have instructed the Engineer to carry out the Inspection of Passenger Lift. Awaiting date.	The most recent thorough examination was undertaken on 01 December 2014. Requirement fulfilled.

- **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 There was good evidence of maintenance activities within the home, and the home appeared clean and very well kept. The home was undergoing a full redecoration program at the time of the inspection. This will include for the replacement of floor finishes in many of the communal areas. This work is to be commended. Maintenance procedures for the building and engineering services are in place and appear to comply with this standard. There were therefore no requirements or recommendations made against this standard during this inspection.
- **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. The patient hoists used within the home receive suitable regular 'Thorough Examination'. Portable appliance testing was undertaken on 31 March 2014 and no failures were identified. All gas appliances were inspected on 11 June 2014 and confirmed to be in a 'satisfactory' condition. The top score of '5' was awarded by the local council during their most recent inspection by their Environmental Health Department. However, several issues have been identified for attention by the registered manager. These are detailed below and in the section of the attached quality improvement plan titled 'Standard 35 Safe and healthy working practices'.
- 9.3.2 A risk assessment with regards to the 'Control of legionella bacteria in the home's hot and cold water systems' was not available for inspection within the home. It is essential that this risk assessment is in place and that the required control measures flowing from it are fully implemented and maintained within the home. Records should also be maintained and be available for inspection within the home. If required, detailed advice on each control measure should be sought from the provider of the risk assessment.

Detailed advice and guidance has been recently published by the Health and Safety Executive in the form of 'HSG274 - Part 2: The control of legionella bacteria in hot and cold water systems', and this can be freely downloaded at the following address: http://www.hse.gov.uk/pubns/priced/hsg274part2.pdf (Item 1 in the attached quality improvement plan)

- 9.3.3 It is essential that the thermostatic mixing valves installed in the home are serviced and maintained in accordance with the manufacturer's instructions or at least annually. Records should be maintained and be available within the home for inspection. (Item 2 in the attached quality improvement plan)
- 9.3.4 Ensure that the local exhaust ventilation system in the main kitchen undergoes suitable thorough examination, cleaning and testing at least once every 14 months, and in accordance with the 'Control of Substances Hazardous to Health Regulations (COSHH) 2002', Regulation 9 'Maintenance, examination and testing of control measures'. (Item 3 in the attached quality improvement plan)

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- 9.3.5 It was noted that the automatic washer disinfector in the first floor sluice room was being used infrequently. It is important that a review of the current sluicing arrangements within the home is therefore undertaken in accordance with current infection control best practice. If the completed review identifies that this washer disinfector is no longer required, then application should be made to RQIA for it to be decommissioned and removed accordingly.
 - (Item 4 in 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. A fire risk assessment was undertaken by a suitably accredited Fire Risk assessor on 10 January 2015. Records inspected during the inspection demonstrated good attention to fire safety matters. The home's fire alarm and detection system was inspected on 25 September 2014 and the emergency lighting installation was inspected on 15 October 2014. The in-house tests and visual inspections are being undertaken and records were available for inspection. Fire safety training was provided for all staff on 27 May 2014 and again on 28 October 2014. Fire drills were undertaken at this time also. Additional training has been organized for 27 and 28 January 2015. There were therefore no requirements or recommendations made against this standard during this inspection.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Ms Kate Lee and Ms Caroline Smyth 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



Quality Improvement Plan

Announced Estates Inspection

Ringdufferin Nursing Home

13 January 2015

	QIP Position Based on Comments from Registered Persons (for RQIA use only)		losed	Estates Officer	Date
		Yes	No		
A.	All items confirmed as addressed.	Yes		Gavin Doherty	20/07/2015
B.	All items either confirmed as addressed or arrangements confirmed to address within stated timescales.				
C.	Clarification or follow up required on some items.				

NOTES:

The details of the quality improvement plan were discussed with Ms Kate Lee, Registered Manager and Ms Caroline Smyth 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

NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP

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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)
1	Regulation 14 (2)(a),(c)	Ensure that a risk assessment for the control of legionella bacteria in the home's hot and cold water systems is undertaken without further delay and that all requirements flowing from this risk assessment are fully implemented within the stipulated timescales and maintained accordingly. (9.3.2 in the report)	Immediate and ongoing	Risk assessment carried out at premises on 27.02.2015
2	Regulation 14 (2)(a),(c)	Ensure that the thermostatic mixing valves installed in the home are serviced and maintained in accordance with the manufacturer's instructions or at least annually. Records should be maintained and be available within the home for inspection. (9.3.3 in the report)	Immediate and ongoing	Since inspection all thermostatic mixing valves have been serviced. Records available for inspection.
3	Regulation 14 (2)(a),(c)	Ensure that the local exhaust ventilation system in the main kitchen undergoes suitable thorough examination, cleaning and testing, at least once every 14 months, and in accordance with the 'Control of Substances Hazardous to Health Regulations (COSHH) 2002', Regulation 9 'Maintenance, examination and testing of control measures'. (9.3.4 in the Report)	Immediate and ongoing	Commercial cleaning of system carried out according to TR19 legislation. Next due date Feb 2016.

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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	Recommendation	Timescale	Details Of Action Taken By Registered Person (S)
4	Standard 35.1	Undertake a review of the current sluicing arrangements within the home in accordance with current infection control best practice. If the completed review identifies that the washer disinfector in the first floor sluice room is no longer required, then application should be made to RQIA for it to be decommissioned and removed accordingly. (9.3.5 in the report)	Immediate and ongoing	Washer disinfector has recently been serviced and is currently being used to disinfect commode basin in use.