



**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	16782
Establishment ID No:	1201
Name of Establishment:	Hillview Lodge
Date of Inspection:	30 April 2014
Inspector's Name:	Raymond Sayers

1.0 GENERAL INFORMATION

Name of Home:	Hillview Lodge
Address:	23 Old Mountfield Road Omagh BT79 7EL
Telephone Number:	02882251125
Registered Organisation/Provider:	Mrs Bernadette Kiernan O'Donnell
Registered Manager:	Mrs Julie Ann Elizabeth Taylor
Person in Charge of the Home at the time of Inspection:	Mrs Julie Ann Elizabeth Taylor
Other person(s) consulted during inspection:	Mr Ciaran Donaghy (Maintenance Supervisor) & Ms Gemma Cassidy
Type of establishment:	Nursing Home
Number of Registered Places:	20; NH-I, NH-DE, NH-LD
Date and time of inspection:	30 April 2014 from 11.30 – 13.30hrs
Date of previous estates inspection:	12 December 2010
Name of Inspector:	Raymond Sayers

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 Mr Ciaran Donaghy and Mrs Gemma Cassidy;
- 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 Mr Ciaran Donaghy and Mrs Gemma Cassidy.

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

The two storey home comprises of 18 single bedrooms and one double bedroom which is currently being used as a single room. The home also comprises of a main kitchen, a quiet room, laundry, bathrooms, shower and toilet facilities, sitting rooms on each floor, general office and staff rooms.

8.0 SUMMARY

Following the Estates Inspection of Hillview Lodge on 30 April 2014 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 36 - Fire Safety.

This resulted in three recommendations, outlined in the quality improvement plan appended to this report.

The building fabric was generally in a good standard of repair, the maintenance of building services was implemented in accordance with good practice and redecoration works were progressing at the time of inspection.

The Estates Inspector would like to acknowledge the assistance of Mr Ciaran Donaghy and Mrs Gemma Cassidy for their assistance during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection
Issues raised in the report of the previous estates inspection on 12 December 2010 have been addressed.

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 evidence of maintenance activity and procedures; however the building and engineering services require some attention in order to comply with this standard. Items requiring corrective action by the registered person are detailed in report items 9.2.2 & 9.2.3 and in the attached Quality Improvement Plan section titled '**Standard 32 - Premises and grounds**'.

9.2.2 Bedroom 25 carpet floor covering was stained and in poor condition.
(Reference: Quality Improvement Plan Item 1)

9.2.3 Bedroom 3 en-suite wall decoration had sustained some minor impact damage.
(Reference: Quality Improvement Plan Item 2)

9.3 Standard 35 - Safe and healthy working practices - *The home is maintained in a safe manner*

9.3.1 Safe and healthy working practices are evident in the home, compliant with this standard; no issues have been identified for attention by the registered person.

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 are completed in the home and a fire risk assessment review was completed on 29 November 2013; maintenance engineer service records were available for examination. Issues requiring corrective action by the registered person are detailed in report item 9.4.3 and in the section of the attached quality improvement plan titled '**Standard 36: Fire safety**'.

9.4.2 The fire risk assessment was completed by an IFE accredited fire risk assessor, Mr John Gurney; the risk was evaluated as tolerable.

9.4.3 The fire risk assessment report recommended the provision of a smoker's room facility on the ground floor.
(Reference: Quality Improvement Plan Item 3)

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Mr Ciaran Donaghy and Mrs Gemma Cassidy during 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 sign off sheet for estates inspectors

Name of Home	Hillview Lodge
Date of Inspection	30/04/2014
Estates Inspector	R.Sayers

QIP Position Based on Comments from Registered Persons			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.	X	X		R.Sayers	27/06/2014
C.	Clarification or follow up required on some items.					

Estates Inspection – QIP sign off sheet

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NOTES:

The details of the quality improvement plan were discussed with Mr Ciaran Donaghy and Mrs Gemma Cassidy during the inspection process.

The timescales commence from the date of inspection.

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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	Julie Taylor
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Therese McGarvey

Announced Estates Inspection to Hillview Lodge Nursing Home on 30 April 2014

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Standard 32 - Premises and grounds

The following requirements and recommendations should be noted for action in relation to Standard 32 - Premises and grounds

Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
1	Standard 32.1	Replace bedroom 25 floor carpet. (Reference: Report section 9.2.2)	16 weeks	Carpet shampooed and deep cleaned. Home owners made aware of recommendation.
2	Standard 32.1	Complete a condition survey of all interior accommodation and implement planned redecoration works. (Reference: Report section 9.2.3)	16 weeks	Interior inspection of accommodation and decoration looked at on Monthly Regulation 29 visits. Home owners informed of outcomes.

Standard 36 - Fire Safety

The following requirements and recommendations should be noted for action in relation to Standard 36 - Fire Safety

Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
3	Standard 36.1	Implement the recommended improvement works listed in the fire risk assessment works action plan. (Reference: Report section 9.4.3)	16 Weeks	Home owners made aware of recommendation for provision of a smoking facility - no plans at present.

Announced Estates Inspection to Hillview Lodge Nursing Home on 30 April 2014

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