



The Regulation and
Quality Improvement
Authority

Slieve Na Mon
RQIA ID: 1212
Tircur Road
Omagh
BT79 7TY

Inspector: Raymond Sayers
Inspection ID: IN021544

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**Announced Estates Inspection
of
Slieve Na Mon**

30 July 2015

The Regulation and Quality Improvement Authority
Hilltop, Tyrone & Fermanagh Hospital, Omagh, BT79 0NS
Tel: 028 8224 5828 Fax: 028 8225 2544 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates inspection took place on 30 July 2015 from 14.15hours to 17.05hours. On the day of the inspection the premises supported the delivery of safe, effective and compassionate care. This inspection was underpinned by the Care Standards for Nursing Homes 2015.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those items 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	0	0

2. Service Details

Registered Organisation/Registered Person: East Eden Ltd/ Dr Brendan McDonald	Registered Manager: Mrs Joan McLaughlin
Person in Charge of the Home at the Time of Inspection: Mrs Joan McLaughlin	Date Manager Registered: 14 November 2012
Categories of Care: NH-I, RC-MP(E), NH-LD, NH-LD(E), RC-DE, NH-MP, NH-MP(E), NH-DE	Number of Registered Places: 60
Number of Patients Accommodated on Day of Inspection: 55	Weekly Tariff at Time of Inspection: Trust rates

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 and/or themes has/have been met:

Standard 44: Premises**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 and statutory notifications over the past 12 month period.

During the inspection the inspector met with Mrs Joan McLaughlin, Manager.

The following records were examined during the inspection: Copies of service records, building user maintenance log books relating to building and engineering services, legionellae and fire risk assessments.

5. The Inspection**5.1 Review of Requirements and Recommendations from Previous Inspection**

The previous inspection of the home was an unannounced care inspection dated 2 February 2015, Reference IN017253. The completed QIP was returned, and was deemed acceptable by the specialist inspector on 24 March 2015.

5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 27.(4)(a)	Develop a works action plan indicating completion dates for implementing NIHTM84 risk assessment report recommendations and submit a copy of action plan to RQIA Estates Inspector	Met
	Action taken as confirmed during the inspection: Works recommendations implemented.	

Previous Inspection Recommendations		Validation of Compliance
Recommendation 1 Ref: Standard 32.1	Complete a decoration condition survey of all decorated surfaces, consider installing protective surface finishes where deemed liable to sustain impact damage; Decorate damaged surfaces.	Met
	Action taken as confirmed during the inspection: Refurbishment programme implemented.	
Recommendation 2 Ref: Standard 32.1	Repair/replace Unit 4 bedroom 6 damaged floor finish.	Met
	Action taken as confirmed during the inspection: Implemented.	
Recommendation 3 Ref: Standard 35.1	Submit verification that all legionella risk assessment recommendations have been implemented.	Met
	Action taken as confirmed during the inspection: Recommendations implemented.	
Recommendation 4 Ref: Standard 35.1	Implement an annual competent person visual inspection regime for the electrical installation in compliance with BS7671.	Met
	Action taken as confirmed during the inspection: Recommendations implemented.	
Recommendation 5 Ref: Standard 35.1	Install an interlock on the gas supply service to ensure that ventilation and gas supply are linked in compliance with gas safe register engineer recommendations dated 07 December 2011.	Met
	Action taken as confirmed during the inspection: Improvement works implemented.	

Recommendation 6 Ref: Standard 36.1	Consult with the facility fire risk assessor and consider implementing the current Northern Ireland Health Technical Memorandum 84 (NIHTM84) recommendation to install "free-swing" door closer devices on bedroom doors.	Met
	Action taken as confirmed during the inspection: Programme implemented on bedroom doors; minor works remaining.	
Recommendation 7 Ref: Standard 36.2	Install a BS5839 fire detection sensor in the refrigerator room.	Met
	Action taken as confirmed during the inspection: Sensor installed.	

5.3 Standard 44: Premises

Is Care Safe? (Quality of Life)

A range of documents in related to the maintenance of the premises was presented for review during this Estates inspection. This documentation included: inspection/test reports for various elements of the engineering services and associated risk assessments. This supports the delivery of safe care.

[There were no issues identified for attention during this Estates inspection]

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.

[There were no issues identified for attention during this Estates inspection]

Is Care Compassionate? (Quality of Care)

The accommodation reviewed during this Estates inspection was well maintained, clean and free from malodours. This supports the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection]

Areas for Improvement

N/A

Number of Requirements	0	Number Recommendations:	0
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5.4 Standard 47: Safe and Healthy Working Practices

Is Care Safe? (Quality of Life)

A range of documents related 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.

[There were no issues identified for attention during this Estates inspection]

Is Care Effective? (Quality of Management)

The dependency and care 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.

[There were no issues identified for attention during this Estates inspection]

Is Care Compassionate? (Quality of Care)

There are health & safety procedures and control measures in place which support the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection]

Areas for Improvement

BS7671 Periodic Inspection report IPR3 /0061876 for the electrical installation recommended corrective works were confirmed as implemented.

Environmental Health Officer Inspection dated 11 June 2015 listed a number of minor issues requiring corrective action; all estates items implemented.

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, including: 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.

[There were no issues identified for attention during this Estates inspection]

Is Care Effective? (Quality of Management)

The standard used by the registered person to determine the 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. This supports the delivery of effective care.

[There were no issues identified for attention during this Estates inspection]

Is Care Compassionate? (Quality of Care)

The standard used by the registered persons to determine the extent of fire safety protection measures for the premises, recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection]

Areas for Improvement

Unit 1 Smoker room does not contain a fire blanket, although a water extinguisher is present. Manager stated that a fire blanket will be provided.

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

The fire risk assessment review was completed on 5 May 2015 by a risk assessor deemed as accredited for completing fire risk assessments in residential care facilities. Reference RQIA fire safety guidelines. "Competence of persons carrying out Fire Risk Assessments at Regulated Residential Care Establishments-2015"

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.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

Registered Manager	<i>Swicklaugh</i>	Date Completed	7-9-15
Registered Person	<i>[Signature]</i>	Date Approved	7-9-15
RQIA Inspector Assessing Response	<i>L. Seyon</i>	Date Approved	14/9/15

Please provide any additional comments or observations you may wish to make below:

Please complete in full and returned to RQIA from the authorised email address