

# Announced Premises Inspection Report 16 January 2018



## Springlawn Nursing Home

**Type of service: Nursing Home**  
**Address: 44 Old Dromore Road, Omagh, BT78 1RB**  
**Tel No: 02882244550**  
**Inspector: Raymond Sayers**

[www.rqia.org.uk](http://www.rqia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, standards and best practice.

## 1.0 What we look for



## 2.0 Profile of service

This is a nursing home providing care for 40 service users, including four named RC category residents.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Springlawn House Limited	<b>Registered Manager:</b> Sharon Margaret Colhoun
<b>Person in charge at the time of inspection:</b> Sharon Margaret Colhoun	<b>Date manager registered:</b> 01/04/2005
<b>Categories of care:</b> NH-PH, NH-LD(E), NH-I, NH-PH(E), RC-I	<b>Number of registered places:</b> 40

### 4.0 Inspection summary

An announced inspection took place on 16 January 2018 from 10.00 to 13.30.

This inspection was underpinned by The Nursing Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015.

The inspection assessed progress with areas for improvement identified during and since the last premises inspection. The inspection outcome was to determine if the service was well led delivering safe, effective and compassionate care.

Evidence of good practice was found in relation to maintenance control tests/inspections of building services and equipment.

Areas requiring improvement were identified: evidence of verification test certificates were required for the gas storage tank installation, and emergency generator annual competent person maintenance inspection.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	1	2

Details of the Quality Improvement Plan (QIP) were discussed with Ciaran Donaghy, Maintenance Supervisor/Janitor, and Sharon Colhoun, Registered Manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

There was no enforcement action implemented as a result of the findings of this inspection.

## 4.2 Action/enforcement taken following the most recent premises inspection

Other than those items detailed in the QIP no further actions were required to be taken following the most recent inspection on 14 April 2015.

## 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- recent inspection reports and returned QIPs
- recent correspondence with the service
- the establishment related incidents reported to RQIA since the last premises inspection.

The following records were examined during the inspection:

- service records and in-house log books relating to the maintenance and upkeep of the building and engineering services,
- legionellae risk assessment,
- fire risk assessment.

Areas for improvements identified at the last premises inspection were reviewed and the assessment of compliance recorded as met, partially met, or not met.

The inspection findings were provided to the registered manager at the conclusion of the inspection.

## 6.0 The inspection

### 6.1 Review of areas for improvement from the most recent inspection dated 12 January 2018 ref IN030158

The most recent inspection of the service was an unannounced finance inspection.

This QIP will be validated by the finance inspector when returned by the provider, and at the next finance inspection.

## 6.2 Review of areas for improvement from the last premises inspection dated 14 April 2015

Areas for improvement from the last premises inspection		
Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005.		Validation of compliance
<b>Requirement 1</b>  <b>Ref:</b> Regulation 27.(2)(d) <b>Stated:</b> First time	Undertake a decoration survey of the internal and external painted surfaces; plan and implement a prioritised redecoration programme to maintain good decorative finishes on all surfaces.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Redecoration works implemented.	
<b>Requirement 2</b>  <b>Ref:</b> Regulations 14.(2)(a),(b) & (c) <b>Stated:</b> First time	Submit copies of laundry equipment gas safe register engineer inspection verification certificates.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspection certificates submitted	
<b>Requirement 3</b>  <b>Ref:</b> Regulations 14.(2)(a),(b) & (c) <b>Stated:</b> First time	Submit copies of medical equipment annual service/inspection certificates.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> Inspection certificates submitted.	
<b>Requirement 5</b>  <b>Ref:</b> Regulations 14.(2)(a),(b) & (c) <b>Stated:</b> First time	Submit copies of LOLER Regulation certificates dated 31 March 2015 for all hoists and slings.	<b>Met</b>
	<b>Action taken as confirmed during the inspection:</b> LOLER certificate submitted	

**6.3 Inspection findings**

**6.4 Is care safe?**  
**Avoiding and preventing harm to patients and clients from the care, treatment and support that is intended to help them.**

A range of documents related to the maintenance and inspection of the establishment were presented for review during this premises inspection. This documentation included inspection and test reports for various elements of the engineering services, and associated risk assessments.

Documentation relating to the safe operation of the establishments installations and engineering services was also presented for review during this premises inspection.

A range of fire protection measures are in place for the establishment, this includes: a fire detection and alarm system, emergency lighting installation, first aid fire-fighting equipment, structural fire separation and protection to the means of escape. The standard used by the registered person to determine the overall level of fire safety within the establishment takes account of the interaction between the physical fire precautions, the fire hazards, the number of service users, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment which was carried out by a risk assessor holding professional body registration for fire risk assessors.

These measures support the delivery of safe care.

**Areas of good practice**

Upgrade and modernisation of the gas service storage and supply pipework is currently progressing. A copy of the gas service engineer`s installation an commissioning certificate will be submitted to RQIA for record.

**Areas for improvement**

1. Installation & Commissioning certificates must be submitted for the new the gas storage tank & associated service pipework.

	Regulations	Standards
<b>Total number of areas for improvement</b>	1	0

**6.5 Is care effective?**

**The right care, at the right time in the right place with the best outcome.**

There are arrangements in place for routine premises planned maintenance and inspection, as well as timely breakdown/repair maintenance. Service users are involved where appropriate in decisions around refurbishment of bedroom accommodation.

This supports the delivery of effective care.

**Areas of good practice**

Planned preventative maintenance works are implemented

**Areas for improvement**

1. Sluice room floor, wall & ceiling finishes are showing signs of deterioration, and the door surface was scratched/scored by impact with hoists etc.
2. Bedroom 30 window opening casement had a defective seal and had been sealed using a temporary repair. Ciaran Donaghy Maintenance Supervisor/Janitor stated that this issue was to be resolved.
3. Bath/Shower 34 shower area wall tiles had been damaged by impact with wheelchairs/hoists.
4. Some external wall surfaces are stained and have a mould growth covering.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	2

**6.6 Is care compassionate?**

**Patients and clients are treated with dignity and respect and should be fully involved in decisions affecting their treatment, care and support.**

The accommodation reviewed during this premises inspection was well maintained, comfortable, clean, well ventilated and with adequate lighting levels. Service users are consulted about decisions around decoration in their private bedroom accommodation.

This supports the delivery of compassionate care.

**Areas of good practice**

Patient bedrooms are generally well maintained

**Areas for improvement**

There were no issues requiring improvement identified during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0



**6.7 Is the service well led?**

**Effective leadership, management and governance which creates a culture focused on the needs and experience of service users in order to deliver safe, effective and compassionate care.**

Premises related policies and documents are retained in a manner which is accessible to relevant persons.

Arrangements are in place for managing premises related incidents/notifiable events and Medical Device and Equipment Alerts.

The registered person has dealt appropriately with previous RQIA QIP items and other relevant issues relating to the premises and has been adequately supported and resourced by the registered responsible person.

There are appropriate relationships with maintenance personnel, specialist contractors and other statutory regulators where appropriate.

This supports a well led service.

**Areas of good practice**

Maintenance activities are implemented and supervised by the Maintenance Supervisor/Janitor.

There are no items identified as requiring improvement works implemented, during the inspection.

	Regulations	Standards
<b>Total number of areas for improvement</b>	0	0

**7.0 Quality improvement plan**

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Ciaran Donaghy, Maintenance Supervisor/Janitor and Sharon Colhoun, Registered Manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the nursing home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.



## 7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005 and the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015.

## 7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

<b>Quality Improvement Plan</b>	
<b>Action required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005.</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Regulations 14. 2. (a),(b) & (c) 27.1. (q)  <b>Stated:</b> First time  <b>To be completed by:</b> 01 March 2018	The registered person shall submit copies of valid Gas Safe Register engineer installation and commissioning certificates to provide assurance that the gas storage tank and associated service pipework has been installed in accordance with current gas safety installation regulations.  Ref: 6.4.1  <b>Response by registered person detailing the actions taken:</b> Full completed Gas installation and commissioning Certificate has been emailed to Inspector Mr Sayers on 01/03/18
<b>Action required to ensure compliance with the Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015.</b>	
<b>Area for improvement 1</b>  <b>Ref:</b> Standards 44 & 46  <b>Stated:</b> First time  <b>To be completed by:</b> 16 May 2018	The registered person shall complete a condition survey of all interior & exterior decorated surfaces, a redecoration works schedule should be drafted and remedial works implemented. Specifically the issues listed in 6.5.1 & 6.5.4 should be addressed in the refurbishment works programme.  Ref: 6.5.1 & 6.5.4  <b>Response by registered person detailing the actions taken:</b> Condition survey set up Feb 18 with works scheduled for March 2018 for window repair and works in June for painting interior walls. External walls pressure washed

<p><b>Area for improvement 2</b></p> <p><b>Ref:</b> Standard 44</p> <p><b>Stated:</b> First time</p> <p><b>To be completed by:</b> 13 March 2018</p>	<p>The registered person shall repair the damaged tile wall finishes in bathroom/shower-room 34.</p> <p>Ref: 6.5.3</p> <hr/> <p><b>Response by registered person detailing the actions taken:</b> Wall+ceiling polyfilled and repainted and damaged white tiles replaced</p>
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*\*Please ensure this document is completed in full and returned via Web Portal\**



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