



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	IN017970
<b>Establishment ID No:</b>	12199
<b>Name of Establishment:</b>	Bohill Bungalows
<b>Date of Inspection:</b>	28 January 2015
<b>Inspector's Name:</b>	Mr Gavin Doherty

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	Bohill Bungalows
<b>Address:</b>	69 Cloyfin Road Coleraine BT52 2NY
<b>Telephone Number:</b>	02870 325180
<b>Registered Organisation/Provider:</b>	Priory (Watton) Ltd
<b>Registered Manager:</b>	Mrs Marlene Featherstone
<b>Person in Charge of the Home at the time of Inspection:</b>	Mrs Marlene Featherstone
<b>Other person(s) consulted during inspection:</b>	N/A
<b>Type of establishment:</b>	Nursing Home
<b>Number of Registered Places:</b>	24 NH-LD, NH-LD(E)
<b>Date and time of inspection:</b>	28 January 2015 from 1:00pm – 3:00pm
<b>Date of previous inspection:</b>	4 November 2013 (First Registration)
<b>Name of Inspector:</b>	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. Patients' 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 Mrs Marlene Featherstone, Registered Manager.

## **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**

Bohill Bungalows are situated on the Cloyfin Road, a rural location outside the town of Coleraine on the road to Bushmills. The bungalows are situated adjacent to Bohill Nursing Home. The premises is owned and operated by Priory (Watton) Ltd. Accommodation for patients is provided in four self-contained, single storey, detached bungalows;

- Rathlin House
- Dunluce House
- Causeway House
- Strand House

Each bungalow has six well-appointed en-suite bedrooms along with a bathroom, sitting room, dining room and other communal spaces. Each bungalow is also self-sufficient having full kitchen, laundry, sluice room and cleaners store. Communal lounges and a dining area are provided in each of the bungalows.

## **8.0 SUMMARY**

Following the Estates Inspection of Bohill Bungalows on 28 January 2015, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

This resulted in two requirements and two recommendations. These are outlined in the quality improvement plan appended to this report.

The Estates Inspector would like to acknowledge the assistance and hospitality of Mrs Marlene Featherstone, and the home's staff throughout the inspection process.

## 9.0 INSPECTOR'S FINDINGS

### 9.1 Recommendations and requirements from previous inspection

- 9.1.1 This was the first estates inspection of these premises since their first registration. There were therefore no previous requirements or recommendations.

### 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 each bungalow, and each bungalow appeared clean and very well kept. Redecoration of each unit appeared to be carried out as and when required. This commitment to providing a quality environment 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 within each bungalow in accordance with this standard. The patient hoists and installed overhead tracking receive suitable regular 'Thorough Examination'. Portable appliance testing was undertaken on 28 July 2014; no failures were identified and the fixed electrical installation remains in a 'satisfactory' condition'. The top score of '5' was awarded by the local council during the most recent inspection by their Environmental Health Department. However, two 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 available for inspection within the home. This was undertaken on 25 September 2013 and appears to have been fully implemented and is maintained within the home. However, seldom used outlets within the home are currently only flushed on a weekly basis. Current best practice guidance would state that such flushing should be undertaken twice weekly. 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 each bungalow 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)

**9.4 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 bungalows are, in the main, generally in line with this standard. A fire risk assessment was undertaken by a suitably accredited Fire Risk assessor on 14 February 2014. Records inspected during the inspection demonstrated good attention to fire safety matters. Each bungalow's fire alarm and detection system was inspected on 15 December 2014 and the emergency lighting installation was inspected on 19 January 2015. 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. The most recent fire drills were undertaken on 9 January 2015. However, two 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 36: Fire safety**'.

- 9.4.2 Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and the guidance contained therein.

(Item 7 in the attached Quality improvement plan)

(Item 3 in the attached Quality improvement plan)

- 9.4.3 The Home's fire alarm and detection system appears from the records examined, to be serviced at six monthly intervals. Current best practice guidance within the fire alarm and detection industry would recommend, quarterly servicing and maintenance of the system.

(Item 4 in the attached Quality improvement plan)

## **10.0 QUALITY IMPROVEMENT PLAN**

The details of the Quality Improvement plan appended to this report were discussed with Mrs Marlene Featherstone 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

#### Bohill Bungalows

**28 January 2015**

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.		✓		Gavin Doherty	7 April 2015
C.	Clarification or follow up required on some items.					



**NOTES:**

The details of the quality improvement plan were discussed with Mrs Marlene Featherstone 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](mailto: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:**

<b>NAME OF REGISTERED MANAGER COMPLETING QIP</b>	Marlene Featherstone
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	Caroline Denny

Announced Estates Inspection to Bohill Bungalows Nursing Home on 28 January 2015

**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 all seldom used outlets throughout the home are flushed through twice weekly in accordance with current best practice guidance. (9.3.2 in the report)	Immediate and ongoing	As advised during Inspection flushing of seldom used outlets is being carried out twice per week and an evidence trail is in place.
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	As advised during Inspection the servicing of thermostatic mixing valves has been reviewed and records maintained to evidence this.

Announced Estates Inspection to Bohill Bungalows Nursing Home on 28 January 2015

**Assurance, Challenge and Improvement in Health and Social Care**

**Standard 36 - Fire Safety**

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

Item	Regulation Reference	Recommendation	Timescale	Details Of Action Taken By Registered Person (S)
3	Standard 29.4	Ensure that when the fire risk assessment is next reviewed, the person carrying out the review holds professional body registration or third party certification for fire risk assessment and is registered accordingly with the relevant body. Reference should be made to correspondence issued by RQIA to all registered homes on 13 January 2013 and the guidance contained therein. (9.4.2 in the report)	Upon review of the fire risk assessment	Details of this recommendation has been escalated to Divisional Office.
4	Standard 29.4	Consideration should be given to increasing the frequency for the inspection and servicing of the fire alarm and detection system to quarterly in accordance with current best practice guidance. (9.4.3 in the report)	Ongoing	Details of this recommendation has been escalated to Divisional Office.

Announced Estates Inspection to Bohill Bungalows Nursing Home on 28 January 2015

**Assurance, Challenge and Improvement in Health and Social Care**