



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	17902
<b>Establishment ID No:</b>	1254
<b>Name of Establishment:</b>	Parkview Care Home
<b>Date of Inspection:</b>	8 April 2014
<b>Inspector's Name:</b>	Gavin Doherty

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	Parkview Care Home
<b>Address:</b>	Glencairn Road Forthriver Road Belfast BT13 3PU
<b>Telephone Number:</b>	028 9039 1393
<b>Registered Organisation/Provider:</b>	Mr. James McCall Four Seasons Health Care Ltd.
<b>Registered Manager:</b>	Ms Gill Finlay (Acting Manager)
<b>Person in Charge of the Home at the time of Inspection:</b>	Ms Lorraine Kirkpatrick (Regional Manager)
<b>Other person(s) consulted during inspection:</b>	Mr Stephen McCormick, Estates
<b>Type of establishment:</b>	Nursing Home
<b>Number of Registered Places:</b>	71 Beds  NH-I ,NH-PH ,NH-PH(E) ,NH-TI, NH-DE, RC-LD(E)
<b>Date and time of inspection:</b>	8 April 2014 from 1030-1330
<b>Date of previous inspection:</b>	11 April 2011
<b>Name of Inspector:</b>	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 the 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:

- HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- 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 Ms Lorraine Kirkpatrick and Mr Stevie McCormick
- 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 Ms Lorraine Kirkpatrick, Regional Manager for the Home and Mr Stevie McCormick, Estates.

## **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**

Parkview Care Home is a purpose built facility situated on an attractive site within the grounds of Glencairn Park on the outskirts of North Belfast. The garden and associated grounds are well maintained and car parking is provided to the front of the home. It is a two storey building with patient accommodation provided over both floors. There is a range of single and double bedrooms, some with en-suite facilities. Toilet, bathroom and shower facilities are appropriately located within the home. The home has a range of communal lounges and dining rooms. Access to the first floor of the home is via a passenger lift or stairs.

## **8.0 SUMMARY**

Following the Estates Inspection of Parkview Care Home on 8 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 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

This resulted in seven requirements and one recommendation. These are outlined in the following sections and the Quality Improvement Plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Ms Lorraine Kirkpatrick, Mr Stevie McCormick 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 It was good to note that the issues raised in the report of the previous estates inspection on 11 April 2011 had 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 good evidence of maintenance activities within the home and the home appeared clean and well kept. At the time of the inspection painting and decorating of the communal areas was on-going and there were plans in place for the refurbishment of the home's bathrooms. Once completed, the staff areas are also to be refurbished. Maintenance procedures for the building and engineering services were in place and good records are maintained and were available for inspection within the home. However, several requirements and one recommendation have been made in relation to this standard. These are detailed below and in the section of the attached quality improvement plan titled '**Standard 32 – Premises and grounds**'.
- 9.2.2 Several vanity units in the Strathearn Suite were observed to be in poor condition with water damage evident. A survey of the vanity units in this section of the home should be undertaken and an appropriate time bounded program implemented for the refurbishment or replacement of any such damaged vanity units. (Item 1 in the attached Quality improvement plan)
- 9.2.3 At the time of the inspection, the Boiler House / Switch Room had a quantity of combustible materials stored therein. It is essential that these hazard rooms are kept clear of combustible materials at all times.  
(Item 2 in the attached Quality improvement plan)
- 9.2.4 An electrical extension lead was observed as being inappropriately used in Dining Room. This lead should be removed and steps taken to provide suitable fixed socket outlets if required.  
(Item 3 in the attached Quality improvement plan)

### 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. Records indicate that the patient lifting equipment is being serviced and is subject to suitable thorough examination. The home's heating installation and electrical systems (fixed installation and portable appliances) are also subject to regular service, inspection and testing.

However, two requirements have been made in relation to this standard. 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 The existing generator provision is no longer operational at the home. It is essential that this generator is replaced, or, that suitable arrangements are implemented to allow the home to continue to operate during any interruption to the mains electrical supply.  
(Item 4 in the attached Quality improvement plan)

9.3.3 Ensure that suitable temperature checks are carried out with regards to the control of legionella bacteria in the home's water systems. Records of the same should be maintained and be available for inspection within the home.  
(Item 5 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 generally in line with this standard. Records inspected demonstrated good attention to fire safety matters and the fire risk assessment was suitably reviewed in February 2014. Fire drills are carried out regularly and the most recent was undertaken on 12 November 2013. The fire alarm and detection system, emergency lighting installation and fire-fighting equipment are suitably serviced and inspected by approved contractors. In-house checks are also carried out to the required standards. Three requirements have been made as a result of this inspection and in relation to this standard. These are detailed below and in the section of the attached quality improvement plan titled '**Standard 36 - Fire safety**'.

9.4.2 Ensure that the significant findings contained within the current Fire risk assessment completed in February 2014, are fully implemented and signed-off when completed. (Item 6 in the attached Quality improvement plan)

9.4.3 The doors to the 1<sup>st</sup> floor treatment room and several offices were wedged open at the time of the inspection. It is important that this practice is stopped. If there is an operational need for these doors to be held open, then a suitable hold open device, linked to the alarm and detection system should be installed. (Item 7 in the attached Quality improvement plan)

9.4.4 The electrical consumer units in the Linen Stores on the ground and 1<sup>st</sup> floor should be enclosed in 30 minute fire resisting construction.  
(Item 8 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 Mr Stevie McCormick 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 Nursing home to improve the quality of life experienced by patients.

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

<b>Name of Home</b>	Parkview Care Home
<b>Date of Inspection</b>	8 April 2014
<b>Name of Inspector</b>	Gavin Doherty

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.					
C.	Clarification or follow up required on some items.			✓	Gavin Doherty	20/8/2014

Estates Inspection – QIP sign off sheet

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## **NOTES:**

The details of the quality improvement plan were discussed with Mr Stevie McCormick 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 Nursing 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 signed below by the registered provider and registered manager and returned to:

**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>	Gill Finlay
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	Jim McCall  CAROL COUSINS

Announced Estates Inspection to Parkview Care Home Private Nursing Home on 8 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	Regulation Reference	Requirement	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulation 27 (2)(b)(d)	A survey of the vanity units in the Strathearn Suite should be undertaken and an appropriate time bounded program implemented for the refurbishment or replacement of any damaged vanity units. (Refer to 9.2.2 in the Report)	12 Weeks	A survey of the vanity units in Strathearn Suite has been undertaken and a refurbishment plan has been drawn up.
2	Regulation 27 (2)(b)(d)	Ensure that the Boiler House / Switch Room are kept clear of combustible materials at all times. (Refer to 9.2.3 in the Report)	Immediate & on-going	This has been addressed, all materials have been removed from the boiler house/switch room.
3	Regulation 27 (2)(q)	Remove the electrical extension lead being inappropriately used in Dining Room. Provide suitable fixed electrical socket outlets as required. (Refer to 9.2.3 in the Report)	12 Weeks	The electrical contractor has been given the order to address this.

Announced Estates Inspection to Parkview Care Home Private Nursing Home on 8 April 2014

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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	Requirement	Timescale	Details Of Action Taken By Registered Person (S)
4	Regulation 14 (2)(c)	The existing generator provision is no longer operational at the home. It is essential that this generator is replaced, or, that suitable arrangements are implemented to allow the home to continue to operate during any interruption to the mains electrical supply. (Refer to 9.3.2 in the Report)	8 Weeks	FSHC Estates team are currently reviewing the need to install a hook up point.
5	Regulation 14 (2)(c)	Ensure that suitable temperature checks are carried out with regards to the control of legionella bacteria in the home's water systems. Records of the same should be maintained and be available for inspection within the home. (Refer to 9.3.3 in the Report)	Immediate & on-going	The maintenance man in the home has had Legionella awareness training. Temperature checks are being carried out and records of same are maintained in the home.

Announced Estates Inspection to Parkview Care Home Private Nursing Home on 8 April 2014

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**Standard 36 – Fire Safety.**

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

Item	Regulation Reference	Requirement	Timescale	Details Of Action Taken By Registered Person (S)
6	Regulation 27 (4)(a)	Ensure that the significant findings contained within the current Fire risk assessment completed in February 2014, are fully implemented and signed-off when completed. (Refer to 9.4.2 in the Report)	As stipulated in Fire Risk Assessment	The findings contained within the home's fire risk assessment completed in February 2014 have been fully implemented and signed off.
7	Regulation 27 (4)(b)	Ensure that no fire doors are wedged open at any time. If there is an operational need for any fire door to be held open, then a suitable hold open device, linked to the alarm and detection system should be installed. (Refer to 9.4.3 in the Report)	Immediate & on-going	No fire doors are being wedged open in the home. Hold open devices have been installed where required.
8	Regulation 27 (4)(b)	The electrical consumer units in the Linen Stores on the ground and 1 <sup>st</sup> floor should be enclosed in 30 minute fire resisting construction. (Refer to 9.4.4 in the Report)	12 Weeks	This has been addressed.

Announced Estates Inspection to Parkview Care Home Private Nursing Home on 8 April 2014

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