



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	18065
Establishment ID No:	1255
Name of Establishment:	Glenmachan Tower House Nursing Home
Date of Inspection:	04 June 2014
Inspector's Name:	K. Monaghan

1.0 GENERAL INFORMATION

Name of Home:	Glenmachan Tower House Nursing Home
Address:	13 Glenmachan Road, Belfast BT4 2NN
Telephone Number:	028 90 763 441
Registered Organisation/Provider:	Dr. Albert Alan Stephens (Registration pending)
Registered Manager:	Mrs. Helen Jane Murphy
Person in Charge of the Home at the time of Inspection:	Mrs. Helen Jane Murphy, Registered Manager
Other person(s) present during inspection:	Mr. Martin McCrory who deals with the ongoing maintenance issues in the home.
Type of establishment:	Nursing Home (NH)
Categories of Care:	NH-I ,NH-PH ,NH-PH(E) ,NH-TI
Conditions of Registration:	N/A
Number of Registered Places:	39
Date of previous Estates inspection:	17 August 2011
Date and time of inspection:	04 June 2014 (10:25am. – 12:00pm.)
Name of Inspector:	K. Monaghan

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 and
- 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:

1. Discussions with Mr. Martin McCrory who deals with the ongoing maintenance issues in the home
2. Inspection of the home internally and externally. Patients' private bedrooms were only inspected when unoccupied and permission was granted
3. 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. Martin McCrory who deals with the ongoing maintenance issues in the home.

6.0 INSPECTION FOCUS

This inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Nursing Homes Minimum Standards with the focus on assessing 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 and
- Standard 36 - Fire Safety

7.0 PROFILE OF SERVICE

Glenmachan Tower House Nursing Home is situated in private grounds in the Glenmachan area of east Belfast. It overlooks the Belfast Lough with panoramic views of the surrounding area. There is a good car park within the grounds of the Home. The home is within a 10 minute car drive to the main shopping areas and community services.

The home is a 39-bedded converted Georgian residence which provides accommodation and services on two floors. Day rooms comprise - two day/dining rooms on the ground floor and one sitting room on the first floor. Bath/shower rooms and WC's are accessible to all communal and bedroom areas throughout the Home.

The Home is owned by the Church of God, Glenmachan. Mrs J Murphy is the registered manager. The home is registered to accommodate patients who require nursing care within the categories of old age, not falling within any other category, physical disablement under and over pension age and terminal illness.

8.0 SUMMARY

During this Estates inspection a number of issues were identified for attention. Following this Estates Inspection of Glenmachan Tower House Nursing Home in Belfast on 04 June 2014, improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criteria outlined in the following standards:

- Standard 32 - Premises and grounds
- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

This resulted in five requirements and one recommendation. These are outlined in the quality improvement plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Mr. Martin McCrory who deals with the ongoing maintenance issues in the home, throughout the inspection process.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from previous Estates inspection on 17 August 2011

- 9.1.1 The following should be noted with regard to the issues included in the Quality Improvement Plan for the previous Estates inspection that was carried out on 17 August 2011:
- 9.1.2 Mr. McCrory confirmed that the extract fans were being checked and that the most recent inspection had identified the need to replace the extract fans for the ensuite facilities in bedrooms 18 and 21. Mr. McCrory also confirmed that the new fans were on order and that these would be installed as soon as they arrive in the home.
- 9.1.3 Mr. McCrory confirmed that the kitchen equipment was electric powered and the laundry equipment was gas powered. The laundry equipment was inspected recently by the service company although the gas safety certificate for this inspection was not presented for review during this Estates inspection. The certificate for the most recent inspection and test to the gas equipment in the laundry should be followed up and retained in the home available for review at future inspections. Reference should be made to item 1 in the Quality Improvement Plan.
- 9.1.4 The home had in place a policy for the management of legionella bacteria in the water systems. The risk assessment for the prevention or control of legionella bacteria in the water systems was reviewed on 19 August 2011 and a further review had been arranged for August 2014. The water systems were chlorinated on 16 August 2013 and the water temperatures were being checked and recorded each week. In addition the showers were disinfected on 14 May 2014. The action plan in the report for the review of the legionella risk assessment that was completed on 19 August 2011 should be signed off by the Registered Manager. The outcome of the risk assessment that is planned for August 2014 should also be confirmed to RQIA. In addition the 'dead leg' in the ground floor bathroom should be removed or flushed twice each week. Reference should be made to item 2 in the Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

9.1 Recommendations and requirements from previous Estates inspection on 17 August 2011 continued:

- 9.1.5 Mr. McCrory confirmed that a new control panel had recently been installed for one of the passenger lifts. The passenger lifts and the chair lifts were also serviced on 16 April 2014. The reports for this work identified some issues for attention in relation to one of the passenger lifts and one of the stair lifts. Mr. McCrory confirmed that the issues in relation to the chair lift had been addressed. The issue in relation to the passenger lift (ram seal leaking) should be followed up. The most recent thorough examination report presented for review during this Estates inspection was dated 25 October 2011. Thorough examinations in accordance with The Lifting Operations and Lifting Equipment Regulations should be carried out on a six monthly basis to the passenger lifts, the stair lifts and the patient lifting equipment. Reference should be made to item 3 in the Quality Improvement Plan.
- 9.1.6 The log for recording the dates for visiting the Northern Ireland Adverse Incidents website and the action details in relation to the Safety Alert Broadcasts was not presented for review during this Estates inspection. Mr. McCrory advised that this log was kept by the Registered Manager. The Registered Manager should confirm that the Northern Ireland Adverse Incidents website is visited once each week to review (and action as required) the Safety Alert Broadcasts. Reference should be made to item 4 in the Quality Improvement Plan.
- 9.1.7 The water temperatures at the outlets accessible to patients are checked on a regular basis. The thermostatic mixers were also checked including a fail-safe test on 16 May 2014. The procedure for flushing the infrequently used water outlets should be changed to twice weekly instead of once weekly. Reference should be made to item 2 in the Quality Improvement Plan.
- 9.1.8 The above issues are restated where appropriate in the relevant sections of the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS CONTINUED

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 It is good to report that the premises being used for the purposes of Glenmachan Tower House Nursing Home were in good order and offered comfortable accommodation for the patients. The home was clean and odour free. This is to be commended.

9.3 Standard 35 - Safe and healthy working practices

The home is maintained in a safe manner

- 9.3.1 It is good to report that new automatic non touch sensor type liquid soap dispensers had been fitted throughout the premises at all hand hygiene points. This is to be commended.

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 It is good to report that the fire detection and alarm system was upgraded in Sept/Oct 2013. There is now a fully addressable fire detection and alarm system throughout the premises. This work represents a very valuable improvement in the standard of the physical fire protection measures in place for the premises. A new telephone had also been installed on the first floor beside the fire alarm repeater panel to assist with contacting the emergency services. In addition to these fire safety improvements, all bedroom doors have been fitted with self-closing devices coupled with hold open units linked to the fire detection and alarm system. This is in line with the recent guidance from the Northern Ireland Fire and Rescue Service.

9.0 INSPECTION FINDINGS CONTINUED

9.4 Standard 36 – Fire Safety Continued

9.4.2 Further improvements should be carried out to the smoke sealing at the meeting edges of the double doors between the dining room and the lounge on the ground floor. Reference should be made to item 5 in the Quality Improvement Plan.

9.4.3 Fire drills were being carried out every two weeks. Fire training had been provided for the day staff on 10 and 14 March 2014. Arrangements had also been made for a further fire training session to be provided for night staff on 20 June 2014. The next inspection and test to the emergency lighting should also be completed. Reference should be made to item 5 in the Quality Improvement Plan.

9.4.4 The most recent review of the fire risk assessment was completed on May 2013. The next annual review of the fire risk assessment should be completed. It is recommended that all future annual reviews of the fire risk assessment should be carried out by a person or a company certified by a third party UKAS accredited certification body or a person who is registered with one of the fire safety professional bodies.
Reference should be made to correspondence issued by RQIA to all Registered Persons on 13 January 2013 and the following guidance contained therein:

http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf

http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf

Reference should be made to items 5 and 6 in the Quality Improvement Plan.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Mr. Martin McCrory who deals with the ongoing maintenance issues in the home, 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

- for -

ANNOUNCED ESTATES INSPECTION

- to -

GLENMACHAN TOWER HOUSE NURSING HOME, BELFAST RQIA ID 1255

- on -

04 JUNE 2014

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.	√	—	√	K. Monaghan	20 August 2014

NOTES:

The details of the quality improvement plan were discussed with Mr. Martin McCrory who deals with the ongoing maintenance issues in the home, 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 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	Mrs Helen Jean Murphy
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	Dr Alan Stephens

Announced Estates Inspection to Glenmachan Tower House Nursing Home, Belfast RQIA ID 1255 on 04 June 2014 - (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

The following requirements should be noted for action in relation to Standard 35 - Safe and healthy working practices:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1.	Regulations 14(2)(a) 14(2)(c) 27(2)(c)	The certificate for the most recent inspection and test to the gas equipment in the laundry should be followed up and retained in the home available for review at future inspections. Reference should be made to paragraphs 9.1.3 in the Report.	1 Month & Ongoing	The Certificate has now been received and will be available for review at future Inspections.
2.	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(q)	The action plan in the report for the review of the legionella risk assessment that was completed on 19 August 2011 should be signed off by the Registered Manager. The outcome of the risk assessment that is planned for August 2014 should also be confirmed to RQIA. In addition the 'dead leg' in the ground floor bathroom should be removed or flushed twice each week. The procedure for flushing the infrequently used water outlets should be changed to twice weekly instead of once weekly. Reference should be made to paragraphs 9.1.4 and 9.1.7 in the Report.	3 Months & Ongoing	The procedure for flushing the infrequently used water outlets has now been changed to twice weekly as requested.

Announced Estates Inspection to Glenmachan Tower House Nursing Home, Belfast RQIA ID 1255 on 04 June 2014 - (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

The following requirements should be noted for action in relation to Standard 35 - Safe and healthy working practices:

Item	Regulation Reference	Restated Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3.	Regulations 14(2)(a) 14(2)(c) 27(2)(c)	The issue in relation to the passenger lift (ram seal leaking) should be followed up. Thorough examinations in accordance with The Lifting Operations and Lifting Equipment Regulations should be carried out on a six monthly basis to the passenger lifts, the stair lifts and the patient lifting equipment. Reference should be made to paragraphs 9.1.5 in the Report.	Ongoing	Lift examinations are now being carried out on a six monthly basis.
4.	Regulations 14(2)(a) 14(2)(c) 27(2)(c)	Confirmation should be provided to RQIA that the Northern Ireland Adverse Incidents website is visited once each week to review (and action as required) the Safety Alert Broadcasts. Reference should be made to paragraphs 9.1.6 in the Report.	1 Month	Records of visits to the Northern Ireland Adverse Incidents website is available in the Manager's Office. This has been in place for some time now.

Announced Estates Inspection to Glenmachan Tower House Nursing Home, Belfast RQIA ID 1255 on 04 June 2014 - (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

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

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
5.	Regulations 27(4)(a) 27(4)(b) 27(4)(c) 27(4)(d)(iv)	Further improvements should be carried out to the smoke sealing at the meeting edges of the double doors between the dining room and the lounge on the ground floor. The next inspection and test to the emergency lighting should be completed. The next annual review of the fire risk assessment should be completed. Reference should be made to paragraphs 9.4.2, 9.4.3 and 9.4.4 in the Report.	1 Month	- New smoke seals are being fitted to edges of the double doors between the dining room and the lounge on ground floor. - Awaiting date from next inspection test to the emergency lighting. These inspections/test are carried out quarterly.

Announced Estates Inspection to Glenmachan Tower House Nursing Home, Belfast RQIA ID 1255 on 04 June 2014 - (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care

The following requirements 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)
6.	Standard 36.1	<p>It is recommended that the annual reviews of the fire risk assessment should be carried out by a person or a company certified by a third party UKAS accredited certification body or a person who is registered with one of the fire safety professional bodies. Reference should be made to correspondence issued by RQIA to all Registered Persons on 13 January 2013 and the following guidance contained therein:</p> <p>http://www.rqia.org.uk/cms_resources/Competence%20of%20persons%20carrying%20out%20Fire%20Risk%20Assessment.pdf</p> <p>http://www.rqia.org.uk/cms_resources/A%20Guide%20to%20Choosing%20a%20Competent%20Fire%20Risk%20Assessor.pdf</p> <p>Reference should be made to paragraph 9.4.4 in the Report.</p>	Ongoing	Annual review of the Fire Assessment is being carried out by a third party - a person registered with a Fire Safety Professional Body.

Announced Estates Inspection to Glenmachan Tower House Nursing Home, Belfast RQIA ID 1255 on 04 June 2014 - (K. Monaghan)

Assurance, Challenge, Improvement in Health and Social Care