



The Regulation and
Quality Improvement
Authority

**THE REGULATION AND QUALITY IMPROVEMENT
AUTHORITY**

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ANNOUNCED ESTATES INSPECTION

Inspection No:	IN021855
Establishment ID No:	1255
Name of Establishment:	Glenmachan Tower House Nursing Home
Date of Inspection:	19 March 2015
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 Responsible Individual:	Dr. Albert Alan Stephens
Registered Manager:	Mrs. Helen Jane Murphy
Person in Charge of the Home at the time of Inspection:	Mrs. Helen Jane Murphy
Other person(s) present during inspection:	Ms. Elisabeth McAllister, Home Administrator and 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 Patients:	39
Date of previous Estates inspection:	04 June 2014
Date and time of inspection:	19 March 2015 (10:20am. – 11:50am.)
Names of Estates 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 Dr. Stephens, Mrs. Murphy, Ms. McAllister and Mr. McCrory
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 Dr. Stephens, Mrs. Murphy, Ms. McAllister and Mr. McCrory.

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
- Standard 36 - Fire Safety

The main focus during this Estates inspection was to review the provision of communal washing facilities in the home.

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 WCs 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 on 19 March 2015, 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 Dr. Stephens, Mrs. Murphy, Ms. McAllister and Mr. McCrory, throughout the inspection process.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from the previous Estates inspections on 04 June 2014:

The following issues should be noted with regard to the previous Estates Inspection on 04 June 2014:

Standard 35 - Safe and healthy working practices				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.1	Regulations 14(2)(a) 14(2)(c) 27(2)(c)	Previous QIP Item 1 (04 June 2014) 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.	A report for the gas safety inspection that was completed on 26 February 2015 to the gas equipment in the laundry was presented for review during this Estates inspection.	N/A

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from the previous Estates inspections on 04 June 2014:

Standard 35 - Safe and healthy working practices continued				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.2	Regulations 13(7) 14(2)(a) 14(2)(c) 27(2)(q)	Previous QIP Item 2 (04 June 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. The procedure for flushing the infrequently used water outlets should be changed to twice weekly instead of once weekly.	Mr. McCrory confirmed that the issues included in the report for the legionella risk assessment that was carried out on 19 August 2011 had been addressed. The legionella risk assessment was reviewed again on 16 August 2013 and the next routine review was scheduled for August 2015. One issue was identified for attention in the August 2013 review. This related to the provision of drawings for the water systems. Mr. McCrory confirmed that the drawings for the water systems were available in the home. The 'dead leg' in the ground floor bathroom had not been removed. The pipework at this 'dead leg' had however been altered so that it can be flushed twice each week. The procedure for flushing the infrequently used water outlets had been changed to twice each week. This flushing is carried out on Monday and Friday each week.	N/A

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from the previous Estates inspections on 04 June 2014:

Standard 35 - Safe and healthy working practices continued				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.3	Regulations 14(2)(a) 14(2)(c) 27(2)(c)	Previous QIP Item 3 (04 June 2014) 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.	Mr. McCrory confirmed that the leak at the ram seal for the passenger lift for the extension was very small and it was not affecting the safety of lift. This issue was however being followed up. The most recent thorough examinations for the lifts were completed on 28 February 2015. Thorough examinations for the stair lifts and the hoists had not been completed within the last six months.	Completion of the ram seal repairs should be confirmed to RQIA when achieved. The stair lifts and the patient lifting equipment should also be thoroughly examined every six months. Mr. McCrory made arrangements during this Estates inspection for these thorough examinations to be completed. Subsequent to this Estates inspection, RQIA received confirmation from Mrs. Murphy that the hoists had been inspected. Copies of the reports for the stair lifts and the hoists should be forwarded to RQIA. Reference should be made to item 2 in the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from the previous Estates inspections on 04 June 2014:

Standard 35 - Safe and healthy working practices continued				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.4	Regulations 14(2)(a) 14(2)(c) 27(2)(c)	Previous QIP Item 4 (04 June 2014) 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.	This issue was discussed during this Estates inspection. Mrs. Murphy confirmed that records are kept in relation to checking the Safety Alert Broadcasts on the Northern Ireland Adverse Incidents website.	Subsequent to this Estates inspection, information and access details for the four different types of Alerts were confirmed to Mrs. Murphy by RQIA in an email. The existing procedure in relation to this issue should be reviewed to ensure that each of the four different types of Alerts is checked each week. Reference should be made to item 3 in the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from the previous Estates inspections on 04 June 2014:

Standard 36 – Fire safety				
No	Regulation	Requirements	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.5	Regulations 27(4)(a) 27(4)(b) 27(4)(c) 27(4)(d)(iv)	Previous QIP Item 5 (04 June 2014) 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.	Further improvements had been carried out to the smoke sealing at the meeting edges of the double door between the dining room and the lounge on the ground floor. The position in relation to the most recent inspection and test to the emergency lighting was not reviewed during this Estates inspection. Refer to section 9.1.6 in the report for the current position regarding the fire risk assessment.	A copy of the report for the most recent inspection and test to the emergency lights should be forwarded to RQIA. Reference should be made to item 4 in the attached Quality Improvement Plan.

9.0 INSPECTION FINDINGS

9.1 Recommendations and requirements from the previous Estates inspections on 04 June 2014:

Standard 36 – Fire safety continued				
No	Regulation	Recommendations	Action taken - As confirmed during this inspection	Inspector's Comments
9.1.6	Standard 36.1	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:	Mr. McCrory confirmed that a new fire risk assessment had been carried out by a person with third party UKAS accreditation on 16 March 2015. The report for this fire risk assessment was still pending.	The report for the fire risk assessment that was carried out on 16 March 2015 should be followed up and any issues identified for attention should be addressed and signed off by the registered manager. Reference should be made to item 6 in the attached Quality Improvement Plan.
9.1.7	The above issues where appropriate are restated 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 a new heating boiler and a new cooker had recently been installed in the home. This is to be commended. The following issue should be noted for attention in relation to this standard:
- 9.2.2 The provision of communal washing facilities was reviewed during this Estates inspection. It was agreed that it would be beneficial for patients and staff if additional assisted shower facilities were to be provided in the main bathroom on the first floor of the extension and in the room on the first floor of the original section of the premises which is currently used for hairdressing. It may also be beneficial to provide assisted shower facilities in the large toilet on the ground floor in the extension. Proposals to move forward with these improvements should be forwarded to RQIA for consideration. Reference should be made to item 1 in the attached Quality Improvement Plan.
- 9.2.3 The shower chair in shower room 1 on the ground floor was not in a good condition. Subsequent to this Estates inspection Mrs. Murphy confirmed to RQIA that this shower chair had been replaced.
- 9.2.4 The above issues are detailed as appropriate in the section of the attached Quality Improvement Plan entitled 'Standard 32 – Premises and grounds'.

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 no additional issues were identified for attention in relation to this standard. This is to be commended.

9.0 INSPECTION FINDINGS CONTINUED

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 The following issue should be noted in relation to this standard:
- 9.4.2 Some minor changes had been made to the enclosure to the main staircase in the original section of the premises. An additional fire detector should be installed in this staircase to ensure that fire detection is provided at the highest level. Subsequent to this Estates inspection, Mrs. Murphy confirmed to RQIA that arrangements had been made for the installation of this additional fire detector. Completion of this work should be confirmed to RQIA. Reference should be made to item 5 in the attached Quality Improvement Plan.
- 9.4.3 The above issue is detailed in the section of the attached Quality Improvement Plan entitled 'Standard 36 – Fire Safety'.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Dr. Stephens, Mrs. Murphy, Ms. McAllister and Mr. McCrory, 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 IN021855

- to -

GLENMACHAN TOWER HOUSE NURSING HOME, BELFAST RQIA ID 1255

- on -

19 MARCH 2015

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	14 May 2015

NOTES:

The details of the quality improvement plan were discussed with Dr. Stephens, Mrs. Murphy, Ms. McAllister and Mr. McCrory, 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**.

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	JEAN MURPHY
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	DR ALAN STEPHENS

Announced Estates Inspection IN021855 – 19 March 2015 Glenmachan Tower House Nursing Home, Belfast RQIA ID 1255

Assurance, Challenge, Improvement in Health and Social Care

The following requirement should be noted for action in relation to Standard 32 – Premises and grounds:

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1.	Regulations 27(2)(j)	Proposals to move forward with improvements to the communal washing facilities should be forwarded to RQIA for consideration. Reference should be made to section 9.2.2 in the report	Three months	Plan to install shower in hairdressing room in old wing of the building. Shower also to be installed in communal bathroom on first floor. Plans emailed to Mr Monaghan on 15 th April 2015

Announced Estates Inspection IN021855 – 19 March 2015 Glenmachan Tower House Nursing Home, Belfast RQIA ID 1255

Assurance, Challenge, Improvement in Health and Social Care

The following requirement 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)
2.	Regulations 14(2)(a) 14(2)(c) 27(2)(c)	Completion of the ram seal repairs should be confirmed to RQIA when achieved. Copies of the reports for the most recent thorough examinations for the stair lifts and the hoists should be forwarded to RQIA. The stair lifts and the patient lifting equipment should also be thoroughly examined every six months. Reference should be made to section 9.1.3 in the report.	One month and ongoing	Patient lifting equipment is now serviced on 6 monthly basis. Examinations for the stair lifts and hoists have been completed documentation was forwarded via email to Mr Monaghan on 15 th April 2015.
Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3.	Regulations 14(2)(a) 14(2)(c) 27(2)(c)	The existing procedure in relation to the Safety Alerts should be reviewed to ensure that each of the four different types of Alerts is checked each week. Reference should be made to section 9.1.4 in the report.	One month	Medical Device alerts, Estates and Facilities alerts, NIAIC alerts and Patient Safety alerts are now checked weekly.

Announced Estates Inspection IN021855 – 19 March 2015 Glenmachan Tower House Nursing Home, Belfast RQIA ID 1255

Assurance, Challenge, Improvement in Health and Social Care

The following requirement 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)
4.	Regulations 27(4)(b) 27(4)(c) 27(4)(d)(iv)	A copy of the report for the most recent inspection and test to the emergency lights should be forwarded to RQIA. Reference should be made to section 9.1.5 in the report.	One month	Emergency Lighting Inspection and Testing report for work carried out on 2 nd August 2014 is attached.
5.	Regulations 27(2)(b) 27(2)(d)(i)	An additional fire detector should be installed in this staircase to ensure that fire detection is provided at the highest level. Reference should be made to section 9.4.2 in the report.	One month	Additional fire detector will be installed by BPS on 13 th May 2015.
Item	Regulation Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
6.	Standard 36.1	The report for the fire risk assessment that was carried out on 16 March 2015 should be followed up and any issues identified for attention should be addressed and signed off by the registered manager. Reference should be made to section 9.1.6 in the report.	One month	Fire Risk Assessment was carried out 16 March 2015. All issues identified for attention have now been addressed and signed off by Registered Manager.