

THE REGULATION AND QUALITY IMPROVEMENT AUTHORITY

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ANNOUNCED ESTATES INSPECTION

Inspection No: IN017924

Establishment ID No: 1265

Name of Establishment: Lisburn Care Home

Date of Inspection: 26 August 2014

Inspector's Name: Mr Gavin Doherty

1.0 GENERAL INFORMATION

Name of Home:	Lisburn Care Home
Address:	119a Hillsborough Road Lisburn BT28 1JX
Telephone Number:	9266 6763
Registered Organisation/Provider:	Four Seasons Health Care
Registered Manager:	Mrs Karen Moriarty
Person in Charge of the Home at the time of Inspection:	Mrs Karen Moriarty
Other person(s) consulted during inspection:	Mr Stevie McCormick
Type of establishment:	Nursing Home
Number of Registered Places:	38
Date and time of inspection:	26 August 2014 from 10:30 – 12:30
Date of previous inspection:	Date of previous inspection
Name of Inspector:	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. Patient's 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 Karen Moriarty, Home manager and Mr Stevie McCormick, Estates 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

Lisburn Care Home is a 38 bedded purpose built Nursing Home situated in Lisburn, close to the Lagan Valley Hospital and in close proximity to Sprucefield Shopping Centre. The gardens and associated grounds are well maintained and car parking is provided to the rear of the home. The home is a split level facility with patient accommodation on the upper floor and ancillary services below. There are 34 single bedrooms. There is a range of toilet and bathing facilities appropriately located within the home along with four communal sitting rooms and a dining room.

8.0 SUMMARY

Following the Estates Inspection of Lisburn Care Home on 26 August 2014 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 five requirements and no 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 Karen Moriarty, 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
It is good to note that the issues raised in the report of the previous estates inspection on 18 January 2012 have been fully addressed.

No	Regulation Ref.	Requirements	Action taken - as confirmed during this inspection	Inspector's Comments
1	14(2)(a),(c)	Ensure that the shelving throughout the home has suitably sealed surfaces in accordance with current infection control protocols.	The shelving had been painted or varnished to seal any bare wood.	Requirement fulfilled.

No	Minimum Standard Ref.	Recommendations	Action Taken – as confirmed during this inspection	Inspector's Comments
1	32.1	Ensure that the remaining bedroom carpets are closely monitored in relation to condition & wear and are replaced when required.	The manager and housekeeper review rooms regularly and highlight carpets or flooring that should be replaced.	All floor finishes throughout the home were in a satisfactory condition.
2	32.8	Ensure that the roof valleys and gullies are kept clear of moss and leaves, to prevent the build-up of surface water and damage to the fabric of the building.	Contractors were employed to remove moss from the roof tiles and clear the gutters. The home's maintenance man continues to clear the gutters on an ongoing basis.	The roof and gutters were clear of moss and leaves at the time of the inspection.

9.1 Recommendations and requirements from previous inspection

It is good to note that the issues raised in the report of the previous estates inspection on 18 January 2012 have been fully 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. Maintenance procedures for the building and engineering services are in place and appear to comply with this standard. At the time of the inspection the home was being redecorated and this ongoing commitment to the quality of the premises is to be commended. As a result, there were no issues identified during this inspection against this standard.
- **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. A legionella risk assessment was undertaken on 22 July 2013 and suitable control measures appear to have been implemented and are suitably maintained. The hoists and goods lift within the home receive suitable regular 'Thorough Examination' and the premises fixed electrical installation was inspected on 24 August 2011 and is in a 'satisfactory' condition. Portable appliance testing was undertaken on 11 April 2014 and no failures were identified. The top score of '5' was awarded by the local council during their most recent inspection by their Environmental Health department. However, several 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 The most recent certificate for the servicing of the thermostatic mixing valves installed throughout the home was dated 7 April 2013. Mr McCormick stated that these valves had been further serviced in 2014 and agreed to forward a copy of the report to RQIA to confirm. (Item 1 in the attached Quality improvement plan)
- 9.3.3 A current 'Gas Safe' certificate for the gas powered laundry equipment was not available for inspection within the home. Mr McCormick stated that this inspection had been undertaken and agreed to forward details to RQIA to confirm. (Item 2 in the attached Quality improvement plan)
- 9.3.4 The shelving in the laundry area had been damaged in areas and should be repaired or replaced in accordance with current infection control protocols. (Item 3 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, in the main, generally in line with this standard. A fire risk assessment was undertaken on 28 May 2014 and the significant issues recorded in this have been implemented. Records inspected during the inspection demonstrated good attention to fire safety matters. However, two issues have been identified for attention by the registered manager. These are detailed below and in the section and in the section of the attached quality improvement plan titled 'Standard 36: Fire safety'.
- 9.4.2 The inspection certificate for the annual inspection of the Home's emergency lighting installation was not available for inspection within the home. Confirmation should be provided that a current inspection certificate is in place, that any remedial works required as a result of this inspection have been completed and the installation is in a 'satisfactory' condition.

 (Item 4 in the attached Quality improvement plan)
- 9.4.3 The existing light fitting in the linen store could constitute an ignition source and should be replaced with a suitable concealed bulk head light fitting. (Item 5 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 Karen Moriarty and 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 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



The returned quality improvement plan for this service is not currently available. However, it is anticipated that it will be available soon. If you have any further enquiries regarding this report please contact RQIA through the e-mail address info@rqia.org.uk



Quality Improvement Plan

Announced Estates Inspection

Lisburn Care Home Nursing Home

26 August 2014

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.					
C.	Clarification or follow up required on some items.					

NOTES:

The details of the quality improvement plan were discussed with Mrs Karen Moriarty and 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 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@rgia.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	
NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP	

Announced Estates Inspection to Lisburn Care Home Nursing Home on 26 August 2014

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) 27 (2)(q)	Forward a copy of the most recent certificate for the servicing of the thermostatic mixing valves installed throughout the home as agreed during the inspection. (9.3.2 in the Report)	8 weeks	
2	Regulation 14 (2)(a),(c) 27 (2)(q)	Forward a copy of the current 'Gas Safe' certificate for the gas powered laundry equipment as agreed during the inspection. (9.3.3 in the Report)	8 weeks	
3	Regulation 14 (2)(a),(c)	The shelving in the laundry area had been damaged in areas and should be repaired or replaced in accordance with current infection control protocols. (9.3.4 in the Report)	12 weeks	

Standard 36 - Fire Safety

The following requirements and recommendations 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	Regulation 27(4)(d)(iv)	The inspection certificate for the annual inspection of the Home's emergency lighting installation was not available for inspection within the home. Confirmation should be provided that a current inspection certificate is in place, that any remedial works required as a result of this inspection have been completed and the installation is in a 'satisfactory' condition. (9.4.2 in the Report)	8 Weeks	
5	Regulation 27(4)(b)	The existing light fitting in the linen store could constitute an ignition source and should be replaced with a suitable concealed bulk head light fitting. (9.4.3 in the Report)	12 Weeks	