



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

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**ANNOUNCED ESTATES INSPECTION**

<b>Inspection No:</b>	17911
<b>Establishment ID No:</b>	1274
<b>Name of Establishment:</b>	Nicholson House
<b>Date of Inspection:</b>	20 May 2014
<b>Inspector's Name:</b>	Gavin Doherty

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	Nicholson House
<b>Address:</b>	8 Antrim Road Lisburn BT28 3DH
<b>Telephone Number:</b>	028 9267 4126
<b>Registered Organisation/Provider:</b>	Mr Andrew Johnston Mrs Ruth Johnston
<b>Registered Manager:</b>	Mrs Ruth Johnston
<b>Person in Charge of the Home at the time of Inspection:</b>	Mrs Ruth Johnston
<b>Other person(s) consulted during inspection:</b>	Mr Andrew Johnston
<b>Type of establishment:</b>	Nursing Home
<b>Number of Registered Places:</b>	32 (NH-I ,NH-PH ,NH-PH(E) ,NH-TI)
<b>Date and time of inspection:</b>	20 May 2014 from 1030-1300
<b>Date of previous inspection:</b>	20 September 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 Mrs Ruth Johnston and Mr Andrew Johnston
- 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 Mrs Ruth Johnston the Home's Manager and Mr Andrew Johnston.

## **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**

Nicholson House Private Nursing Home is situated on the Antrim Road area of Lisburn. It is afforded privacy with hedges and trees at the side and back of the Home. There is good car parking within the grounds of the Home. Local bus services and main routes to and from Lisburn are directly outside the Home. It is centrally located with the local community. The original house had been adapted and extended to provide accommodation over two floors. The home is registered to provide care for 32 people within the categories of NH - I, old age not falling within any other category, NH-PH and NH -PH(E) – physical disability under and over 65 and NH-TI terminal illness.

## **8.0 SUMMARY**

Following the Estates Inspection of Nicholson House on 20 May 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 three requirements and no recommendations. These are outlined in the following section and the Quality Improvement Plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Mrs Ruth Johnston, Mr Andrew Johnston 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 issue raised in the report of the previous estates inspection on 20 September 2011 had 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 ongoing maintenance activities within the home and the home appeared very clean and well kept. Maintenance procedures for the building and engineering services were in place and good records are maintained and were available for inspection within the home. There is an ongoing program of refurbishment within the home. New carpets and curtains have been provided in all bedrooms. These on-going improvement works are to be commended. There are therefore no requirements or recommendations made against this standard as a result of 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 in the home in accordance with this standard. Records indicate that the lifting equipment is being suitably 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. Comprehensive control measures are in place for the control of legionella bacteria within the home's hot and cold water systems. Records for the monitoring of temperatures to the hot and cold water system where available for inspection and the hot and cold water systems were subject to a chemical treatment on 3 February 2014. 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 home's passenger lift currently undergoes a 'Thorough examination' in relation to the 'Lifting Operations, Lifting Equipment Regulations' on an annual basis. However the regulations stipulate that this examination should be carried out within a period not exceeding six months.  
(Item 1 in the attached Quality improvement plan)

9.3.3 As stated, comprehensive control measures are being implemented within the home in relation to the control of Legionella bacteria within the hot and cold

water systems. However, a risk assessment detailing the adequacy of these control measures was not available for inspection within the home. It is important that a suitable and sufficient baseline risk assessment is in place within the home. Further guidance can be obtained in HSG274 part2 'The control of legionella bacteria in hot and cold water systems', issued by the Health and Safety Executive. ([www.hse.gov.uk/pubns/priced/hsg274part2.pdf](http://www.hse.gov.uk/pubns/priced/hsg274part2.pdf)) (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 home are generally in line with this standard. Records inspected demonstrated good attention to fire safety matters and a fire risk assessment was undertaken on 11 April 2013. Fire drills are carried out periodically for both day and night staff, with the latest one recorded on 4 April 2014. The fire alarm and detection system, the emergency lighting installation and the portable fire-fighting equipment are suitably serviced and inspected by approved contractors in accordance with current best practice guidance. The in-house checks for the above are also maintained at the required intervals, and records were available for inspection within the home. However, one requirement has been made in relation to this standard. This is detailed below and in the section of the attached quality improvement plan titled '**Standard 32 – Premises and grounds**'.

9.4.2 Health Technical Memorandum 84 'Fire risk assessment in residential care premises' stipulates that:

*The assessment should be reviewed, and if necessary revised and actioned each year or as required:*

- *there is reason to believe that it is no longer realistic; or*
- *there has been a significant change in the activity carried out in the premises; or*
- *there has been a significant change in the number or dependency of the residents.*

It is therefore essential that the home's fire risk assessor carries out this review, and, gives an assurance that the risk assessment remains valid or indicates the additional actions required to be taken by the home. (Item 3 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 Ruth Johnston and Mr Andrew Johnston 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**



The **Regulation** and  
**Quality Improvement**  
Authority

## Quality Improvement Plan

- for -

## Announced Estates Inspection

- of -

## Nicholson House

- on -

**20 May 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.			✓	Gavin Doherty	27/10/2014
C.	Clarification or follow up required on some items.					



**NOTES:**

The details of the quality improvement plan were discussed with Mrs Ruth Johnston and Mr Andrew Johnston 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>	Ruth Johnston
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	Andrew Johnston

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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)
1	Regulation 27 (2)(q) 14 (2)(a)(c)	Ensure that the home's passenger lift is thoroughly examined in accordance with the requirements of the 'Lifting Operations, Lifting Equipment Regulations' within an on-going period not exceeding six months. (Refer to 9.3.2 in the Report)	8 Weeks	Arrange were put in place on 20/05/14 for a complete bi - annual inspections
2	Regulation 27 (2)(q) 14 (2)(a)(c)	Ensure that a suitable and sufficient baseline risk assessment for the control of legionella bacteria in the home's hot and cold water systems is in place within the home. (Refer to 9.3.3 in the Report)	12 Weeks	Base line assessment completed 27/05/2014

**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)
3	Regulation 27 (4)(a)	Ensure that the home's fire risk assessor carries out a review of the Home's current fire risk assessment. He should then give an assurance that it remains valid or, indicate the additional actions required to be taken by the home. (Refer to 9.4.2 in the Report)	Timescales stipulated in review of risk assessment	Rewiew of the homes fire risk assessment completed on 21/05/2014

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