

Announced Follow Up Premises Inspection Report 15 August 2017



Seaview House

Type of Service: Nursing Home
Address: 276 Seacliff Road, Ballyholme, Bangor, BT20 5HS
Tel no: 028 9146 0833
Inspector: Gavin Doherty

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

This is a registered nursing home which is registered to provide nursing care and residential care for up to 22 persons.

3.0 Service details

Registered organisation/registered person: Seaview House Private Nursing Home / Ms. Fiona Gilmore	Registered manager: Mrs Clair O'Connor
Person in charge of the home at the time of inspection: Mrs Clair O'Connor	Date manager registered: 21 April 2015
Categories of care: RC-I, NH-I, NH-PH, NH-PH(E), NH-TI Category RC-I for 2 identified residents only.	Number of registered places: 22

4.0 Inspection summary

An announced follow up premises inspection of Seaview House took place on 15 August 2017 from 10.00 to 11.00 hours.

The inspection sought to assess progress with any issues raised during and since the last premises inspection on 4 November 2015.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003; The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005; The Nursing Homes Regulations (Northern Ireland) 2005; and the DHSSPS Care Standards for Nursing Homes 2015.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients' experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	0	0

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Clair O'Connor, registered manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. During the inspection the inspector met with Clair O'Connor, registered manager.

The findings of the inspection were provided to the registered manager at the conclusion of the inspection.

6.0 The inspection

6.1 Inspection findings

Premises/environment

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this premises inspection. This documentation included inspection and test reports for various elements of the engineering services, and risk assessments.

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting installation, portable fire-fighting equipment, structural fire separation and protection to the means of escape. A current fire risk assessment was in place and was available in the premises at the time of the inspection.

There are arrangements in place for routine premises management and upkeep as well as timely breakdown/repair maintenance.

The premises were found to be well maintained and in a satisfactory condition throughout and no further requirements or recommendations have been made in respect of the premises.

6.2 Review of areas for improvement from the last premises inspection dated 04 November 2015

Areas for improvement from the last premises inspection		
Action required to ensure compliance with		Validation of compliance
<ul style="list-style-type: none"> The Nursing Homes Regulations (Northern Ireland) 2005 		
Area for improvement 1 Ref: Regulation 27(2) Stated: Second time	<p>The registered person shall ensure that the stair lifts are thoroughly examined at least every six months in accordance with Schedule 1 of the 'Lifting operations, lifting equipment regulations' (LOLER) as issued by the Health and Safety Executive NI.</p>	Met
	<p>Action taken as confirmed during the inspection: Inspector confirmed that this work had been completed during the inspection.</p>	
Area for improvement 2 Ref: Regulation 27(2) Stated: Second time	<p>The kitchen cooker and extract system are in the process of being upgraded to meet current gas safe requirements. Confirmation should be provided to RQIA on the completion of this work along with a current and 'satisfactory' gas safe certificate for the installation.</p>	Met
	<p>Action taken as confirmed during the inspection: Inspector confirmed that this work had been completed during the inspection.</p>	
Area for improvement 1 Ref: Regulation 13(7) Stated: Second time	<p>The registered person shall ensure that any remedial actions flowing from the recently completed legionella risk assessment are implemented in a timely manner and within the timescales stipulated. It is also essential that all control measures and monitoring requirements outlined in the risk assessment are fully implemented and maintained in accordance with the risk assessment and current best practice guidance.</p>	Met
	<p>Action taken as confirmed during the inspection: Inspector confirmed that this work had been completed during the inspection.</p>	

Action required to ensure compliance with		Validation of compliance
<ul style="list-style-type: none"> Department of Health, Social Services and Public Safety (DHSSPS) Care Standards for Nursing Homes, April 2015 		
Area for improvement 1 Ref: Standard 44 Stated: First time	The registered person shall ensure that the floor finish in the newly created bedroom is repaired and the flooring in bedroom is replaced with a suitable slip resistant finish.	Met
	Action taken as confirmed during the inspection: Inspector confirmed that this work had been completed during the inspection.	
Area for improvement 2 Ref: Standard 47 Stated: First time	The registered person shall ensure that the washer disinfectant installed in the home is serviced and validated in accordance with the manufacturer's recommendations or at least annually.	Met
	Action taken as confirmed during the inspection: The registered manager confirmed to RQIA on 10 February 2016, that this work had been successfully undertaken.	
Area for improvement 3 Ref: Standard 47 Stated: First time	The registered person shall ensure that the home's fixed electrical installation undergoes inspection and examination in accordance with current best practice guidance (BS7671: Requirements for electrical installations, IEE Wiring Regulations). Ensure that all identified remedial works are implemented within the stipulated timescales.	Met
	Action taken as confirmed during the inspection: The registered manager confirmed to RQIA on 10 February 2016, that this work had been successfully undertaken. The system was deemed to be in a 'satisfactory' condition.	

7.0 Quality improvement plan

There were no areas for improvement identified during this inspection, and a QIP is not required or included, as part of this inspection report.

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