



The Regulation and
Quality Improvement
Authority

Inspector: Gavin Doherty
Inspection ID: IN021478

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**Announced Estates Inspection
of
Seaview House**

4 November 2015

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

An announced estates inspection took place on 4 November 2015 from 10.30 to 13.00. Overall on the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Areas for improvement were identified and are set out in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Care Standards for Nursing Homes 2015.

1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last inspection.

1.2 Actions/Enforcement Resulting from this Inspection

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

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	3	3

The details of the QIP within this report were discussed with Ms Ruth Magowan and Mrs Clair O'Connor, registered manager for the home as part of the inspection process. The timescales for completion commence from the date of inspection.

2. Service Details

Registered Organisation/Registered Person: 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	Number of Registered Places: 22
Number of Patients Accommodated on Day of Inspection: 20	Weekly Tariff at Time of Inspection: Residential £470 Nursing £620 - £632

3. Inspection Focus

The inspection sought to assess progress with the issues raised during and since the previous inspection and to determine if the following standards have been met:

Standard 44: Premises

Standard 47: Safe and Healthy working Practices

Standard 48: Fire safety

4. Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to inspection the following records were analysed: Previous estates inspection report, statutory notifications over the past 12 months.

During the inspection the inspector met with Ms Ruth Magowan and Mrs Clair O'Connor, registered manager for the home.

The following records were examined during the inspection: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering services, legionellae risk assessment, and the fire risk assessment.

5. The Inspection

5.1 Review of Requirements and Recommendations from Previous Inspection

The previous inspection of the home was an unannounced care inspection dated 3 June 2015. The completed QIP was returned and approved by the specialist inspector on 18 August 2015.

5.2 Review of Requirements and Recommendations from *the last* Estates Inspection on 22 September 2014.

Previous Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 27	<p>Ensure that all patient hoists, slings and stair lifts used within the premises are serviced in accordance with the manufacturer's recommendations and receive suitable 'thorough examination' in accordance with the 'Lifting Operations Lifting Equipment Regulations' (LOLER), issued by the Health & Safety Executive. Records of all such servicing and 'thorough examinations' should be maintained and available for inspection within the home.</p> <p>Action taken as confirmed during the inspection: Confirmation provided by home on 12 November 2015.</p>	Partially Met
Requirement 2 Ref: Regulation 27	<p>Ensure that all gas powered equipment used within the premises receives suitable inspection and testing on an annual basis from a suitably approved 'Gas Safe' engineer.</p> <p>Action taken as confirmed during the inspection: Gas cooker and hood are scheduled for replacement, but this work has not yet been completed.</p>	Not Met
Requirement 3 Ref: Regulation 27	<p>Ensure that the risk assessment review for the 'control of Legionella bacteria within the home's hot and cold water systems' is undertaken on 26 September 2014 as arranged. Ensure that <u>ALL</u> control measures required as a result of this risk assessment review are fully implemented within the stipulated timescales.</p> <p>Action taken as confirmed during the inspection: The risk assessment has been undertaken but is yet to be fully implemented within the home.</p>	Partially Met

<p>Requirement 4 Ref: Regulation 27</p>	<p>Ensure that the thermostatic mixing valves located throughout the premises are regularly serviced in line with the manufacturer's recommendations or at least annually.</p>	<p>Not Met</p>
<p>Action taken as confirmed during the inspection: No evidence available in the home at the time of the inspection.</p>		
<p>Requirement 5 Ref: Regulation 27</p>	<p>Confirmation should be provided to RQIA, that a current certificate (in accordance with BS7671 'Requirements for electrical installations') is in place for the home's fixed electrical installation. Any remedial works required as a result of this inspection should also have been completed and the certificate should state that the installation is in a 'satisfactory' condition</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection: Current inspection is still valid as carried out on 10 November 2010.</p>		
<p>Requirement 6 Ref: Regulation 27</p>	<p>Ensure that the significant findings identified in the most recent fire risk assessment are fully implemented within the stated timescales and signed-off accordingly.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection: Confirmed during inspection. Review of fire risk assessment undertaken on 9 February 2015.</p>		
<p>Requirement 7 Ref: Regulation 27</p>	<p>The most recent fire safety training was provided in the home in March 2014. Ensure that suitable fire safety training is provided to all staff by a competent person on a twice yearly basis.</p>	<p>Met</p>
<p>Action taken as confirmed during the inspection: Evidence available for training undertaken on 11 November 2014.</p>		

5.3 Standard 44: Premises Is Care Safe? (Quality of Life)

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

Is Care Effective? (Quality of Management)

A range of accommodation, facilities and support services is provided in the premises. This supports the delivery of effective care.

Is Care Compassionate? (Quality of Care)

The areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. This supports the delivery of compassionate care. A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Areas for Improvement

1. The floor finish in the newly created bedroom requires attention and the flooring in bedroom 21 was in poor condition and should be replaced with a suitable slip resistant finish. (Recommendation 1 in the attached Quality Improvement Plan)

Number of Requirements	0	Number Recommendations:	1
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5.4 Standard 47: Safe and Healthy Working Practices

Is Care Safe? (Quality of Life)

A range of documentation relating to the safe operation of the premises, installations and engineering services was presented for review during this Estates inspection. This supports the delivery of safe care. A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Effective? (Quality of Management)

The nature and needs of the patients are considered as part of the risk assessment processes and this is reflected in the management of the home. This supports the delivery of effective care. A number of issues were however identified for attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Is Care Compassionate? (Quality of Care)

There are health & safety procedures and control measures in place which support the delivery of compassionate care. A number of issues were however identified for

attention during this Estates inspection. These are detailed in the 'areas for improvement' section below.

Areas for Improvement

1. It was good to note that the washer disinfectant had been brought back into service within the home. However, it is essential that this piece of equipment is serviced and validated in accordance with the manufacturer's recommendations or at least annually. (Recommendation 2 in the attached Quality Improvement Plan)
2. It was good to note that the home have entered into a contract for the regular servicing of the stair lifts within the premises. However, it is also essential, as with the patient hoists, that the stair lifts are also thoroughly examined at least every six months and you should be provided with a report of thorough examination containing the information outlined in Schedule 1 of the 'Lifting operations, lifting equipment regulations' (LOLER) as issued by the Health and Safety Executive NI. Suitable guidance on this requirement can be obtained from:
<http://www.hse.gov.uk/pubns/indg422.pdf>
(Requirement 1 in the attached Quality Improvement Plan)

It is also good to note that 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.
(Requirement 2 in the attached Quality Improvement Plan)

3. It was noted that a new Legionella risk assessment had been very recently undertaken within the home. When this is received by the home it is essential that any remedial actions required are implemented in a timely manner and within the timescales stipulated within the risk assessment. It will also be 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 the guidance recently provided by the Health and Safety Executive. This is freely available from the following link:
<http://www.hse.gov.uk/pubns/priced/hsg274part2.pdf>

Control measures will include suitable:

- Temperature monitoring at calorifiers and cold water storage tanks
- Examination and chemical treatment of any cold water storage tanks
- Temperature monitoring at all sentinel outlets
- Examination and maintenance of all installed thermostatic mixing valves
- Regular cleaning, descaling and disinfection of shower heads and hoses
- Flushing (twice weekly) of all seldom used outlets.

(Requirement 3 in the attached Quality Improvement Plan)

4. The home's fixed electrical installation is now due inspection and examination in accordance with current best practice guidance (BS7671: Requirements for electrical installations, IEE Wiring Regulations). This important work should be undertaken in a timely manner ensuring that all remedial works are implemented within the stipulated timescales. (Recommendation 3 in the attached Quality Improvement Plan)

Number of Requirements	3	Number Recommendations:	2
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5.5 Standard 48: Fire Safety

Is Care Safe? (Quality of Life)

A range of fire protection measures are in place for the premises. This includes a fire detection and alarm system, emergency lighting, first aid fire-fighting equipment, structural fire separation and protection to the means of escape. This supports the delivery of safe care. Service records for the fire alarm and detection system and the emergency lighting installation were not available in the home at the time of the inspection. However copies of these reports were subsequently forwarded to RQIA on 12 November 2015.

Is Care Effective? (Quality of Management)

The standard used by the registered person to determine the overall level of fire safety within the premises takes account of the interaction between the physical fire precautions, the fire hazards, the number of patients, the management policies and the availability of adequately trained staff. This standard has been referenced in the fire risk assessment which was undertaken on 9 February 2015 by a suitably accredited fire risk assessor. This supports the delivery of effective care.

Is Care Compassionate? (Quality of Care)

The standard used by the registered persons to determine the extent of fire safety protection measures that are appropriate for the premises recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

Areas for Improvement

No areas for improvement were required against this standard as a result of this estates inspection.

Number of Requirements	0	Number Recommendations:	0
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5.6 Additional Areas Examined

No additional areas were examined during this estates inspection.

6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Ruth Magowan and Mrs Clair O'Connor, registered manager for the home as part of the inspection process. The timescales commence from the date of inspection.

The registered person/manager should note that failure to comply with regulations may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered person/manager to ensure that all requirements and recommendations contained within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of your premises. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises the RQIA would apply standards current at the time of that application.

6.1 Statutory Requirements

This section outlines the actions which must be taken so that the registered person/s meets legislative requirements based on The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, Nursing Homes Regulations (Northern Ireland) 2005.

6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Care Standards for Nursing Homes 2015. They promote current good practice and if adopted by the registered person may enhance service, quality and delivery.

6.3 Actions Taken by the Registered Persons

The QIP should be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to estates.mailbox@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the home. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the home.

Quality Improvement Plan

Statutory Requirements

<p>Requirement 1</p> <p>Ref: Regulation 27(2)</p> <p>Stated: Second time</p> <p>To be Completed by: 13 January 2015</p>	<p>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> <p>Response by Registered Manager Detailing the Actions Taken: <i>Stair lift Servicing Contract in place with Xpress Lifts. Stairlifts serviced 05/01/16.</i></p>
<p>Requirement 2</p> <p>Ref: Regulation 27(2)</p> <p>Stated: Second time</p> <p>To be Completed by: 13 January 2015</p>	<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> <p>Response by Registered Manager Detailing the Actions Taken: <i>Confirmation and Certificates will be provided when work completed as requested</i></p>
<p>Requirement 3</p> <p>Ref: Regulation 13(7)</p> <p>Stated: Second time</p> <p>To be Completed by: 13 January 2015</p>	<p>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> <p>Response by Registered Manager Detailing the Actions Taken: <i>Risk assessment discussed with maintenance and remedial actions are being undertaken</i></p>

Recommendations

<p>Recommendation 1</p> <p>Ref: Standard 44</p> <p>Stated: First time</p> <p>To be Completed by: 13 January 2016</p>	<p>Ensure that the washer disinfectant installed in the home is serviced and validated in accordance with the manufacturer's recommendations or at least annually.</p> <p>Response by Registered Manager Detailing the Actions Taken: <i>Servicing contract and maintenance with S+E care trade. Washer repaired and serviced 2015</i></p>
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Recommendation 2 Ref: Standard 47	Ensure that the washer disinfectant installed in the home is serviced and validated in accordance with the manufacturer's recommendations or at least annually.		
Stated: First time To be Completed by: Immediate & Ongoing	Response by Registered Manager Detailing the Actions Taken: <i>Servicing contract and maintenance with STE caretrade. Washer repaired and Serviced 2015.</i>		
Recommendation 3 Ref: Standard 47 Stated: First time	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.		
To be Completed by: As stipulated	Response by Registered Manager Detailing the Actions Taken: <i>Fixed electrical inspection and installation with Woodrow HAC - Certificates provided to RQIA</i>		
Registered Manager Completing QIP	<i>C. Connor</i>	Date Completed	<i>07/01/16</i>
Registered Person Approving QIP	<i>F. Gilmore</i>	Date Approved	<i>7.1.16</i>
RQIA Inspector Assessing Response	Gavin Doherty	Date Approved	20/01/2016

Please ensure the QIP is completed in full and returned to estates.mailbox@rqia.org.uk from the authorised email address