



The Regulation and  
Quality Improvement  
Authority

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**Announced Estates Inspection  
of  
Hollybank**

**17 September 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](http://www.rqia.org.uk)

## 1. Summary of Inspection

An announced estates inspection took place on 17 September 2015 from 10.00 to 12.50hours. On the day of the inspection the premises supported the delivery of safe, effective and compassionate care. Areas for improvement were identified and listed in the Quality Improvement Plan (QIP) appended to this report. This inspection was underpinned by the Residential Care Homes Minimum Standards 2011.

### 1.1 Actions/Enforcement Taken Following the Last Inspection

Other than those items 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
<b>Total number of requirements and recommendations made at this inspection</b>	2	6

The details of the QIP within this report were discussed with the Ms Arlene Stewart, (Manager) and Mr Paul Wilson, (Northern HSC Trust Estates Officer) as part of the inspection process. The timescales for completion commence from the date of inspection.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Northern HSC Trust/Dr Anthony Baxter Stevens	<b>Registered Manager:</b> Mrs Arlene Elizabeth Stewart
<b>Person in Charge of the Home at the Time of Inspection:</b> Mrs Arlene Elizabeth Stewart	<b>Date Manager Registered:</b> 01 April 2005
<b>Categories of Care:</b> RC-LD & RC-LD(E)	<b>Number of Registered Places:</b> 9
<b>Number of Residents Accommodated on Day of Inspection:</b> 4	<b>Weekly Tariff at Time of Inspection:</b> Trust rates

### **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 27: Premises and Grounds**

**Standard 28: Safe and Healthy working Practices**

**Standard 29: 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 and statutory notifications over the past 12 months' period.

During the inspection the inspector met with Ms Arlene Stewart and Mr Paul Wilson.

The following records were examined during the inspection: Copies of building service maintenance certificates, building user maintenance control checks of building services, legionellae risk assessment, and 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 27 August 2015. The completed QIP response has not yet been returned to the care inspector for approval.

## 5.2 Review of Requirements and Recommendations from the last Estates Inspection

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b>  Ref: Regulation 27.(2)(b)	Repair defective wall tiles in first floor shower room.	Met
	<b>Action taken as confirmed during the inspection:</b> Works completed.	
<b>Requirement 2</b>  Ref: Regulations 14.(2)(a) & (c)	“Implement an inspection and maintenance regime on all window opening casements, to ensure that opening casements are secured thereby preventing the passage of an object measuring greater than 100mm diameter through the window opening.”	Met
	<b>Action taken as confirmed during the inspection:</b> Works completed.	
<b>Requirement 3</b>  Ref: Regulation 14.(2)(c)	Submit a copy of the laundry Gas Safe Register report dated 27/11/12 to the RQIA Estates inspector.	Met
	<b>Action taken as confirmed during the inspection:</b> Works completed.	
<b>Requirement 4</b>  Ref: Regulation 27.(4)(a)	Confirm that NIHTM84 report recommendations have been implemented, or indicate proposed completion dates.	Met
	<b>Action taken as confirmed during the inspection:</b> Works completed.	
Previous Inspection Recommendations		Validation of Compliance
<b>Recommendation 1</b>  Ref: Standard 27.1	“Examine all internal door openings, consider installing surface protection to architraves, frames and stops where impact is deemed likely to occur.”	Not Met
	<b>Action taken as confirmed during the inspection:</b> Await implementation of minor works request.	

<b>Recommendation 2</b>  <b>Ref: Standard 28.1</b>	“Assess laundry accommodation gas safety emergency control precautions and consider installing an easily accessible emergency isolation control valve.”	<b>Met</b>
<b>Action taken as confirmed during the inspection:</b> Emergency control valve moved from behind machine to accessible location.		
<b>Recommendation 3</b>  <b>Ref: Standard 28.1</b>	“Complete an examination of bedroom fire doors, listing any non-compliance with NIHTM84 recommendations, consult with a fire safety advisor and consider the installation of free-swing” self-closer devices on bedroom fire doors.  Record management control precautions implemented to eliminate/reduce fire safety risk.”	<b>Met</b>
<b>Action taken as confirmed during the inspection:</b> Self-closer devices installed.		

### 5.3 Standard 27: Premises and Grounds

#### Is Care Safe? (Quality of Life)

Documents related to the maintenance of the premises were presented for review during this Estates inspection. This documentation included: inspection and test reports for various elements of the engineering services and associated risk assessments. This supports the delivery of safe care.

[Issues were however identified for attention during this Estates inspection, and are detailed in the ‘areas for improvement’ section below.]

#### 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.

[A number of issues were however identified for attention during this Estates inspection and are detailed in the ‘areas for improvement’ section below.]

#### Is Care Compassionate? (Quality of Care)

The accommodation reviewed during this Estates inspection was well maintained, clean and free from malodours. This supports the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection.]

### **Areas for Improvement**

Bedroom 5 floor covering butt joint was deteriorating and required renewal.  
Refer to Quality Improvement Plan Recommendation 2.

A number of plumber works repairs/alterations had been implemented in several rooms; however wall decoration surface repairs had not yet been completed.  
Refer to Quality Improvement Plan Recommendation 1.

Vegetable preparation room wall surfaces had sustained some minor impact damage.  
Refer to Quality Improvement Plan Recommendation 1.

Exterior door finishes at Boiler and Emergency generator room are deteriorating.  
Refer to Quality Improvement Plan Recommendation 1.

Some door architraves, frames, and stops had sustained damage as a result of impacts with wheelchairs.  
Refer to Quality Improvement Plan Recommendation 5.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>3</b>
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## **5.4 Standard 28: Safe and Healthy Working Practices**

### **Is Care Safe? (Quality of Life)**

A range of documents related 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 identified for attention during this Estates inspection and are detailed in the 'areas for improvement' section below.]

### **Is Care Effective? (Quality of Management)**

The dependency needs of the residents 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 and safety procedures and control measures in place which support the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection.]

## Areas for Improvement

Verification was not presented to provide assurance that the electrical installation was currently compliant with BS7671. Mr Wilson stated that a works order has been issued to have the test & inspection works completed.

Refer to Quality Improvement Plan Requirement 1.

Bedroom 6 was currently used as a store; no record of flushing water services in the room was presented for examination.

Refer to Quality Improvement Plan Recommendation 4.

Some electrical appliances were noted as not displaying PAT verification labels.

Refer to Quality Improvement Plan Recommendation 3.

Gas Safe Register inspection/safety certificate for laundry gas appliances was not presented for examination.

Refer to Quality Improvement Plan Requirement 2.

<b>Number of Requirements</b>	<b>2</b>	<b>Number Recommendations:</b>	<b>2</b>
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## 5.5 Standard 29: 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.

[There were no issues identified for attention during this Estates inspection.]

### Is Care Effective? (Quality of Management)

The standard used to determine the level of fire safety within the premises takes account of: the interaction between the physical fire precautions, the fire hazards, the number of residents, the management policies and the availability of adequately trained staff. This standard has been listed in the fire risk assessment. This supports the delivery of effective care.

[There was one issue identified for attention during this Estates inspection and is detailed in the 'areas for improvement' section below.]

### Is Care Compassionate? (Quality of Care)

The standard used to determine the extent of fire safety protection measures required recognises the need to maintain a homely, non-institutionalised environment. This supports the delivery of compassionate care.

[There were no issues identified for attention during this Estates inspection.]

## Areas for Improvement

It was not verified that the facility fire risk assessor had achieved accredited status as recommended in RQIA communication to care providers: "Competence of persons carrying out fire risk assessments in regulated residential care and nursing homes" dated 02 April 2015. Refer to Quality Improvement Plan Recommendation 6.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>1</b>
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### 5.6 Additional Areas Examined

Not applicable.

## 6. Quality Improvement Plan

The issue(s) identified during this inspection are detailed in the QIP. Details of this QIP were discussed with Ms Arlene Stewart (Manager) and Mr Paul Wilson (Northern HSC Trust Estates Officer) 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, The Residential Care Homes Regulations (Northern Ireland) 2005.

### 6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Residential Care Homes Minimum Standards 2011. 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 Manager/Registered Person

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](mailto: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><b>Requirement 1</b></p> <p>Ref: Regulations 14.(2)(a),(b)&amp;(c)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> <b>12 November 2015</b></p>	<p>Complete a periodic inspection and test of the electrical installation in accordance with BS7671, and implement prioritised remedial/improvement works.</p> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> Work carried out by contractor 6th November 2105. Awaiting results (job card attached)</p>
<p><b>Requirement 2</b></p> <p>Ref: Regulations 14.(2)(a),(b)&amp;(c)</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> <b>12 November 2015</b></p>	<p>Verify that the laundry gas appliances are inspected and tested in compliance with current gas safety regulations.</p> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> Testing has been completed and certificates are attached.</p>
Recommendations	
<p><b>Recommendation 1</b></p> <p>Ref: Standard 27.1</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> <b>28 March 2016</b></p>	<p>Complete an interior and exterior decoration condition survey and schedule redecoration repairs in a works action plan.</p> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> Minor re-decoration works to be completed by Estate Services as identified by Unit Manager. Minor Works Request to be submitted for major internal / external re-decoration works required.</p>
<p><b>Recommendation 2</b></p> <p>Ref: Standard 27.1</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> <b>28 March 2016</b></p>	<p>Repair floor covering butt joint in Bedroom 5.</p> <p><b>Response by Registered Manager Detailing the Actions Taken:</b> Work submitted to Estate Services for action - Job No 444489</p>

<b>Recommendation 3</b> <b>Ref:</b> Standard 27.9 <b>Stated:</b> First time <b>To be Completed by:</b> <b>12 November 2015</b>	Confirm that all electrical appliances are inspected and tested in accordance with HSG107 Maintaining Portable and Transportable Electrical Equipment.		
<b>Recommendation 4</b> <b>Ref:</b> Standard 28.1 <b>Stated:</b> First time <b>To be Completed by:</b> <b>12 November 2015</b>	<b>Response by Registered Manager Detailing the Actions Taken:</b> Contractor attended site 6th November to complete task. Awaiting results (Job card attached)		
<b>Recommendation 5</b> <b>Ref:</b> Standard 27.1 <b>Stated:</b> Second time <b>To be Completed by:</b> <b>28 March 2016</b>	Implement a flushing regime on any infrequently used water outlets, or remove risk by removing water outlet and associated service pipe.		
<b>Recommendation 6</b> <b>Ref:</b> Standard 29.1 <b>Stated:</b> First time <b>To be Completed by:</b> <b>12 April 2016</b>	<b>Response by Registered Manager Detailing the Actions Taken:</b> Manager has confirmed this outlet has been added to the flushing regime carried out by staff.		
	“Examine all internal door openings, consider installing surface protection to architraves, frames and stops where impact damage is deemed likely to occur.”		
	<b>Response by Registered Manager Detailing the Actions Taken:</b> Work submitted to Estate Services for action - Job No 440413		
<b>Registered Manager Completing QIP</b>	Arlene Stewart	<b>Date Completed</b>	16.11.2015
<b>Registered Person Approving QIP</b>	Tony Stevens	<b>Date Approved</b>	16/11/15
<b>RQIA Inspector Assessing Response</b>	Raymond Sayers	<b>**Date Approved</b>	18/11/15

\*\* Additional clarification required on some items

*\*Please ensure the QIP is completed in full and returned to [estates.mailbox@rqia.org.uk](mailto:estates.mailbox@rqia.org.uk) from the authorised email address\**