



The Regulation and  
Quality Improvement  
Authority

**THE REGULATION AND QUALITY IMPROVEMENT  
AUTHORITY**

9th floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT  
Tel: 028 9051 7500 Fax: 028 9051 7501

**ESTATES INSPECTION**

**Inspection No:** IN0020427  
**Establishment ID No:** 1368  
**Name of Establishment:** Ellis Court Respite Unit  
**Date of Inspection:** 26 August 2014  
**Inspector's Name:** Phil Cunningham

## 1.0 GENERAL INFORMATION

<b>Name of Home:</b>	Ellis Court Respite Unit
<b>Address:</b>	Ellis Street Carrickfergus BT38 8AZ
<b>Telephone Number:</b>	02893315113
<b>Registered Organisation/Provider:</b>	Northern Health and Social Care Trust
<b>Registered Manager:</b>	Rosemary Wray
<b>Person in Charge of the Home at the time of Inspection:</b>	Elaine Hall Senior Social Worker, Ellis Court
<b>Other person(s) consulted during inspection:</b>	Caitriona McEldowney, Water Safety Manager, NHSCCT Estates Department
<b>Type of establishment:</b>	Residential Home
<b>Number of Registered Places:</b>	6
<b>Date and time of inspection:</b>	26 August 2014 from 09.30 – 10.30
<b>Name of Inspector:</b>	Phil Cunningham

## **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 residential care 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 assess the suitability of the arrangements around management of the home's hot and cold water distribution system in compliance with legislative requirements and current approved code of practices. This was carried out following communications from the home's management to RQIA on Thursday 21<sup>st</sup> August 2014 when concerns were outlined around ongoing problems in maintaining a suitable temperature regime in line with recognized legionellae control procedures.

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 relevant documentation to determine the provider's compliance with the following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Residential Care Homes Regulations (Northern Ireland) 2005
- Residential Care Homes Minimum Standards (DHSSPS, 2011)

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
- 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 Estates Inspector spoke to Rosemary Wray and Caitriona McEldowney.

The Estates Inspector also spoke with other relevant personnel from the NHSCT Estates Department in order to obtain further relevant information relating to the issue.

## **6.0 INSPECTION FOCUS**

The inspection sought to establish the level of compliance achieved with respect to the following DHSSPS Residential Care Homes Minimum Standards and to assess progress with the issues raised during and since the previous inspection:

### **Standards inspected:**

- Standard 28 - Safe and healthy working practices

## **7.0 SUMMARY**

Following the Estates Inspection of Ellis Court Residential Home on 1 July 2014, some improvements are required to comply with the Residential Care Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

- Standard 28 - Safe and healthy working practices

This resulted in four requirements. These are outlined in the Quality Improvement Plan appended to this report.

The Estates Inspector would like to acknowledge the assistance of Rosemary Wray and Caitriona McEldowney during the inspection process.

## 8.0 INSPECTOR'S FINDINGS

### 8.1 **Standard 28 - Safe and healthy working practices** - *The home is maintained in a safe manner*

- 8.1.1 Records indicate that there are difficulties in maintaining the temperature of the water in the home's domestic water distribution system at acceptable levels in line with current best practice for the control of legionellae bacteria in domestic water systems.

Records indicate particularly that in bedroom 1, bedroom 6 and shower room, the temperatures of cold water remained significantly in excess of 20°C after running for periods in excess of 2 minutes.

- 8.1.2 In addition it is further noted that in June 2014, sampling of water in the home indicated levels of legionellae bacteria well in excess of recommended safe levels. Following flushing, the system was resampled and those results indicated significantly lower levels at that time (also in June 2014).

- 8.1.3 It is understood that numerous attempts have been made to identify and rectify the cause of the raised cold water temperature although this to date has proved unsuccessful.

In the meantime a range of contingency control measures have been put in place to reduce the risk of proliferation and spread of bacteria in the system including regular flushing of all outlets daily (initiated / increased from twice weekly on 21 August 2014,) provision of point of use filters on the shower heads being used in the home (fitted on 21 August 2014).

- 8.1.4 It is required that the provider carry out a number of measures to resolve this situation.  
See items 1, 2, 3 and 4 in the attached Quality Improvement Plan.

## **9.0 QUALITY IMPROVEMENT PLAN**

The details of the Quality Improvement Plan appended to this report were discussed with Rosemary Wray 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 Residential 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 residents.

The registered provider is required to record comments on the Quality Improvement Plan.

## **10.0 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**

---

**Phil Cunningham  
Senior Estates Officer**

**Date**            27 August 2014



## Quality Improvement Plan

- for -

**Estates Inspection**

- of -

**Ellis Court Respite Unit**

- on -

**26 August 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.			X	P.Cunningham	<b>3/10/2014</b>
C.	Clarification or follow up required on some items.					

**NOTES:**

The details of the Quality Improvement Plan were discussed with Elaine Hall and Caitriona McEldowney 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 Residential 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 residential home to improve the quality of life experienced by residents.

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 estates@rqia.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:**

<b>NAME OF REGISTERED MANAGER COMPLETING QIP</b>	ROSEMARY WRAY
<b>NAME OF RESPONSIBLE PERSON / IDENTIFIED RESPONSIBLE PERSON APPROVING QIP</b>	ANTHONY STEVENS



## Standard 28 - Safe and healthy working practices

The following requirements and recommendations should be noted for action in relation to Standard 28 - Safe and healthy working practices

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1	13 (7) 14 (2)(c)	<p>Carry out investigation and subsequent remedial measures to address the issue of raised water temperature in the cold water distribution system.</p> <p>See 8.1 in report</p>	By 29 August 2014	<p>Detailed investigation completed 26<sup>th</sup> to 28<sup>th</sup> August 2014.</p> <p>Remedial Works have included: Replacement of TMV in bedroom 6. Decommissioning of 1 off 2 No cold water storage tanks, removal of shower in Ground Floor Bathroom adjacent to Bedroom 6, which is no longer required (this is the outlet that has a positive result). Pressure Reducing Valves were adjusted in B/R 1 &amp; 6 to increase cold water flow.</p> <p>Investigation has highlighted dead leg pipe-work to be removed and pipe-work to be insulated within Ground Floor ceiling void.</p> <p>Completion of this work is subject to Pre-Refurbishment and Demolition Asbestos Survey. It is anticipated that this work will be completed by 30<sup>th</sup> September 14.</p> <p>Water temperatures have been taken on a daily basis since RQIA visit on 26<sup>th</sup> August. All outlets were compliant with exception of B/R 1 &amp; 6. Following remedial work on 27<sup>th</sup> August, these outlets were</p>

				<p>compliant; results from 29<sup>th</sup> August show: Bedroom 1, Cold Water Supply was 16.4 C at 1m 42s. Bedroom 6 Cold Water Supply was 15.7 C at 1m 37s.</p> <p>Estates Services Department will continue to carry out daily checks on Sentinel cold water outlets to ensure compliance until sample results are returned from the lab. If satisfactory results are received from lab, Estates will revert back to monthly monitoring programme. Site will continue with enhanced flushing programme, this will include first floor areas until all remedial actions are completed. This will be completed by staff on site and recorded on standard template.</p>
2	13 (7) 14 (2)(c)	<p>Carry out disinfection of the domestic hot and cold water services. This should include the parts of the system which are situated outside the respite unite on the first floor office accommodation.</p> <p>See 8.1 in report</p>	By 29 August 2014	<p>Clean and disinfection of domestic hot and cold water services was completed on 27<sup>th</sup> of August, in addition a pasteurisation was carried out on the domestic hot water system.</p> <p>This included all areas of Ellis Court.</p> <p>Certificate available.</p>
3	13 (7) 14 (2)(c)	<p>a) Carry out sampling of the of the domestic hot and cold water services and</p> <p>b) provide RQIA with confirmation of test results.</p>	<p>a) By 29 August 2014</p> <p>b) when</p>	<p>Samples were taken on 28<sup>th</sup> of August. 32 pre and post samples were taken from hot and cold services outlets, including; ground floor shower rooms, bedrooms 1 &amp;</p>

		See 8.1 in report	same are available	6. Caitriona McEldowney will issue results of sampling to Phil Cunningham (RQIA) on receipt from lab which is anticipated within 14 days.
--	--	-------------------	--------------------	--

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
4	13 (7) 14 (2)(c)	Carry out review of the legionellae risk assessment.	On completion of and where appropriate in conjunction with above items.	A review of the current LRA was completed as part of this investigation. A new LRA will be commissioned on completion of all remedial work.