



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

ANNOUNCED ESTATES INSPECTION

Inspection No:	16755
Establishment ID No:	1392
Name of Establishment:	Karina Lodge
Date of Inspection:	16 May 2014
Inspector's Name:	Raymond Sayers

1.0 GENERAL INFORMATION

Name of Home:	Karina Lodge
Address:	40 Drumsaragh Road Kilrea BT51 5XN
Telephone Number:	02829541111
Registered Organisation/Provider:	Mr Thomas Girvan
Registered Manager:	Mrs Mary A Doherty
Person in Charge of the Home at the time of Inspection:	Mrs Mary A Doherty
Other person(s) consulted during inspection:	Mr Thomas Girvan (Responsible Person)
Type of establishment:	Nursing Home
Number of Registered Places:	15; NH-I
Date and time of inspection:	16 May 2014 from 10.00 – 13.15hrs
Date of previous estates inspection:	12 March 2013
Name of Inspector:	Raymond Sayers

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 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 following:

- The HPSS (Quality, Improvement and Regulation) (Northern Ireland) Order 2003;
- The 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 Mr Thomas Girvan;
- 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 Mr Thomas Girvan.

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

Karina Lodge Private Nursing Home is a two storey building which has been converted and extended to provide accommodation for persons needing nursing care.

Accommodation is provided in seven single and four double bedrooms on both floors. Access to the first floor is via a chair lift and stairs. The home is situated in a quiet location, a few miles out of Kilrea, towards Maghera.

The home was first registered on the 6th October 1987, and is currently registered in the Old Age category of Nursing Care, (I), providing care for up to 15 patients.

8.0 SUMMARY

Following the Estates Inspection of Karina Lodge on 16 May 2014 improvements are required to comply with the Nursing Homes Regulations (Northern Ireland) 2005 and the criterion outlined in the following standards:

- Standard 32 - Premises and grounds
- Standard 35 - Safe and healthy working practices
- Standard 36 - Fire Safety

This resulted in six requirements and one recommendation, outlined in the quality improvement plan appended to this report.

Improvements to interior decorative finishes have been completed.
Fire safety controls are implemented, although an annual HTM84 fire safety review must be completed by a competent person.

The Estates Inspector would like to acknowledge the assistance of Mr Thomas Girvan during the inspection process.

9.0 INSPECTOR'S FINDINGS

9.1 Recommendations and requirements from previous inspection

The issues raised in the report of the previous estates inspection on 12 March 2013 have been addressed and no issues remain unresolved.

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 evidence of maintenance activity and procedures; however the building and engineering services require some attention in order to comply with this standard. Items requiring corrective action by the registered person are detailed in report items 9.2.2 - 9.2.4 and in the attached Quality Improvement Plan section titled '**Standard 32 - Premises and grounds**'.

9.2.2 Bedroom 8 dado paint finish was scratched/stained.
Bedroom 9 skirting was scratched/stained.
Bedroom 1 wall finish was scratched/stained at low level adjacent bed.
Bedroom 4 wall finish is damaged adjacent the bed due to bed movement.
Laundry wall decoration is stained & in a dilapidated condition.
(Reference: Quality Improvement Plan Item 2)

9.2.3 Bedroom 2 vinyl floor finish is blistered.
(Reference: Quality Improvement Plan Item 1)

9.2.4 Sluice room adjacent day-lounge has a tiled painted floor finish, which is scratched & deteriorating.
(Reference: Quality Improvement Plan Item 1)

9.3 Standard 35 - Safe and healthy working practices - *The home is maintained in a safe manner*

9.3.1 Safe and healthy working practices are evident in the home, compliant with this standard, although some issues have been identified for attention by the registered person. Items requiring corrective/improvement action are detailed in report items 9.3.2- 9.3.4 and in the attached Quality Improvement Plan section titled '**Standard 35 - Safe and healthy working practices**'.

- 9.3.2 A Lifting Operations and Lifting Equipment Regulations (LOLER) thorough examination inspection report for the stair-lift was requested for inspection but was not available for examination.
(Reference: Quality Improvement Plan Item 3)
- 9.3.3 Mr Girvan stated that the only stored water on the premises was to supply the WC cisterns, and that rising mains water supplies all other cold water outlets. Mr Girvan was informed that that the water distribution and storage arrangements for the facility should be noted on the facility legionella risk assessment, and control measures to prevent legionella proliferation should be documented.
(Reference: Quality Improvement Plan Item 4)
- 9.3.4 The BS7671 Periodic Inspection Report for the electrical installation, reference LD-TG515XN was presented for examination, the reporting engineer did not list a review date for the subsequent re-test/inspection of the installation.
(Reference: Quality Improvement Plan Item 5)
- 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 implemented in the home comply with this standard, records inspected demonstrate good attention to fire safety matters. There are however issues which need to be addressed, detailed and listed in the report sections 9.4.2 and 9.4.3, and in the attached quality improvement plan section titled '**Standard 36: Fire safety**'.
- 9.4.2 A fire risk assessment (FRA) was completed by Neil Rea on 26 November 2012; the fire risk was evaluated as moderate, and subject to the implementation of FRA report recommendations then the risk evaluation could be reduced to tolerable.
It was noted that some of the recommended improvement/corrective works had been implemented; the FRA consultant had not conducted a review to verify completion of the recommended improvement works.
(Reference: Quality Improvement Plan Item 6)
- 9.4.3 A BS5839 fire detection and alarm maintenance service certificate dated 25 November 2013 was inspected;
(Reference: Quality Improvement Plan Item 7)
- 9.4.4 A BS5266 emergency lighting maintenance test/inspection verification certificate dated 25 November 2014 was presented for examination.

10.0 QUALITY IMPROVEMENT PLAN

The details of the Quality Improvement plan appended to this report were discussed with Mr Thomas Girvan during 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.

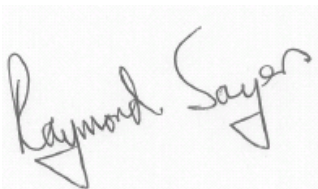
Recommendations are based on the Department of Health, Social Services and Public Safety's minimum standards for registration and inspection, promote current good practice and should be considered by the management of the home to improve the quality of life experienced by residents.

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



Raymond Sayers
Estates Inspector

20 June 2014

Date



The Regulation and
Quality Improvement
Authority

Quality Improvement Plan

- for -

Announced Estates Inspection

- of -

Karina Lodge Nursing Home; Reg.1392

- on -

16 May 2014

QIP Position Based on Comments from Registered Persons (for RQIA use only)		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.				
C.	Clarification or follow up required on some items.				

NOTES:

The details of the quality improvement plan were discussed with M Thomas Girvan during 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 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:

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower
5 Lanyon Place
BELFAST
BT1 3BT

SIGNED: _____

SIGNED: _____

NAME: _____
(print) REGISTERED PROVIDER

NAME: _____
(print) REGISTERED MANAGER

DATE: _____

DATE: _____

Announced Estates Inspection to Karina Lodge Nursing Home on 16 May 2014

Assurance, Challenge and Improvement in Health and Social Care

Standard 32 - Premises and grounds

The following requirements and recommendations should be noted for action in relation to Standard 32 - Premises and grounds

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
1	Regulation 27 (2)(b)	Repair/replace defective floor coverings in sluice room & bedroom 2. (Reference: Report sections 9.2.3 & 9.2.4)	12 weeks	
Item	Standard Reference	Recommendations	Timescale	Details Of Action Taken By Registered Person (S)
2	Standard 32.1	Complete a decoration condition survey and implement repairs to defective decorated surfaces. (Reference: Report section 9.2.2)	12 weeks	

Announced Estates Inspection to Karina Lodge Nursing Home on 16 May 2014

Assurance, Challenge and Improvement in Health and Social Care

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	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
3	Regulations 14 (2)(a),(b) & (c)	Submit a valid copy of a Lifting Operations & Lifting Equipment (LOLER) thorough examination report for the stair-lift. (Reference: Report section 9.3.2)	8 weeks	
4	Regulations 14 (2)(a),(b) & (c)	Complete a written legionella risk assessment and document control measures implemented. (Reference: Report section 9.3.3)	8 weeks	
5	Regulations 14 (2)(a),(b) & (c)	Verify that the BS7671 Periodic Inspection report for the electrical installation LD-TG515XN is currently valid and that the electrical installation is compliant with the electricity at work regulations. (Reference: Report section 9.3.4)	12 weeks	

Announced Estates Inspection to Karina Lodge Nursing Home on 16 May 2014

Assurance, Challenge and Improvement in Health and Social Care

Standard 36 - Fire Safety

The following requirements and recommendations should be noted for action in relation to Standard 36 - Fire Safety

Item	Regulation Reference	Requirements	Timescale	Details Of Action Taken By Registered Person (S)
6	Regulation 27.(4)(a)	Complete a fire risk assessment compliant with Health Technical Memorandum 84 and in accordance with RQIA guidance document "Competence of persons carrying fire risk assessments in regulated residential care establishments", dated 31 January 2013. (Reference: Report section 9.4.2)	12 Weeks	
7	Regulation 27.(4)(d)(iv)	Submit copies of BS5839 fire detection and alarm service certificates completed during the period 23 November 2013 to 13 June 2014. (Reference: Report section 9.4.3)	8 Weeks	

Announced Estates Inspection to Karina Lodge Nursing Home on 16 May 2014

Assurance, Challenge and Improvement in Health and Social Care