



The Regulation and  
Quality Improvement  
Authority

**Broadways Private Nursing Home**

**RQIA ID: 1397**

**Broadway**

**Main Street**

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**Inspector: Gavin Doherty**

**Inspection ID: IN023875**

**Unannounced Estates Inspection  
of  
Broadways Private Nursing Home**

**30 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 unannounced estates inspection took place on 30 September 2015 from 13.00 to 14.00. The purpose of this inspection was to specifically assess the Home's fire safety provision following a care inspection undertaken on 11 September 2015. 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
<b>Total number of requirements and recommendations made at this inspection</b>	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

## 2. Service Details

<b>Registered Organisation/Registered Person:</b> Mrs Barbara Sloan	<b>Registered Manager:</b> Mrs Jacqueline Davey
<b>Person in Charge of the Home at the Time of Inspection:</b> Mrs Jacqueline Davey	<b>Date Manager Registered:</b> 7 March 2012
<b>Categories of Care:</b> 33	<b>Number of Registered Places:</b> NH-PH, NH-I
<b>Number of Patients Accommodated on Day of Inspection:</b> Not ascertained	<b>Weekly Tariff at Time of Inspection:</b> Not ascertained

### 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 standard had been met:

#### **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 Mrs Jacqueline Davey, Home Manager.

The following records were examined during the inspection: Copies of service records and in-house log books relating to the fire detection and alarm system, emergency lighting installation, fire-fighting equipment, 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 11 September 2015. Details provided by this inspection will be used by the care inspector in the preparation of this report and any requirements or recommendations deemed necessary.

The inspector asked that this estates follow-up inspection be undertaken, focusing specifically on fire safety matters as not all documentation was available at the time of the care inspection.

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

A full review of the requirements and recommendations from the last estates inspection will be undertaken during the next primary estates inspection for the home.

#### 5.3 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.

Records for the servicing, maintenance and in-house checks were available for inspection and all appeared to be in order.

### 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. This supports the delivery of effective care.

A valid fire risk assessment carried out by an accredited fire risk assessor was undertaken on 20 January 2015. This fire risk assessment has been implemented and there are no outstanding requirements or recommendations in association with this risk assessment.

### 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.

Suitable fire safety training appears to be in place ensuring all staff are trained at six monthly intervals. Fire drills are carried out regularly involving all staff who are on duty. The frequency of drills should ensure that all staff participate in a drill at least once annually.

### Areas for Improvement

No areas for improvement were identified at the time of this inspection.

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

No additional areas were inspected as part of this inspection.

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 service. 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.

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.

<b>Registered Manager</b>	Jacqueline Davey	<b>Date Completed</b>	16.11.15
<b>Registered Person</b>	Barbara Sloan	<b>Date Approved</b>	16.11.15
<b>RQIA Inspector Assessing Response</b>	<b>Gavin Doherty</b>	<b>Date Approved</b>	<b>16.12.15</b>

Please provide any additional comments or observations you may wish to make below:

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