

# Announced Premises Follow-up Report 30 November 2017



## Broadways

**Type of Service: Nursing Home**  
**Address: Broadway, Main Street, Larne, BT40 1LT**  
**Tel No: 028 2827 3464**  
**Inspector: Gavin Doherty**

[www.rqia.org.uk](http://www.rqia.org.uk)

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

## 1.0 What we look for



## 2.0 Profile of service

This is a registered nursing home which is registered to provide nursing care for up to 33 persons.

### 3.0 Service details

<b>Organisation/Registered Provider:</b> Mrs Barbara Sloan	<b>Registered manager:</b> Mrs. Jacqueline Davey
<b>Person in charge at the time of inspection:</b> Mrs. Jacqueline Davey	<b>Date manager registered:</b> 7 March 2012
<b>Categories of care:</b> Nursing Home (NH) I – Old age not falling within any other category. PH – Physical disability other than sensory impairment.	<b>Number of registered places:</b> 33 comprising: NH-PH, NH-I  A maximum of 2 patients in category NH-PH.

### 4.0 Inspection summary

An announced pre-registration estates inspection of Broadways took place on 30 November 2017 from 0930 to 1200 hours.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003; The Regulation and Improvement Authority (Registration) Regulations (Northern Ireland) 2005; The Nursing Homes Regulations (Northern Ireland) 2005; and the DHSSPS Care Standards for Nursing Homes 2015.

The purpose of the inspection was to follow up on a notification submitted to RQIA on 22 November 2017 in relation to a positive test for legionella bacteria in the premises hot and cold water systems.

The findings of this report will provide the home with the necessary information to assist them to fulfil their responsibilities, enhance practice and patients' experience.

### 4.1 Inspection outcome

	Regulations	Standards
<b>Total number of areas for improvement</b>	1	0

Areas for improvement and details of the Quality Improvement Plan (QIP) were discussed with Jacqueline Davey, registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

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

## 4.2 Action/enforcement taken following the most recent medicines management inspection

The most recent inspection of the home was an unannounced medicines management inspection undertaken on 26 September 2017. Other than those actions detailed in the QIP no further actions were required to be taken. Enforcement action did not result from the findings of this inspection.

## 5.0 How we inspect

Prior to the inspection a range of information relevant to the service was reviewed. This included the following records:

- notifiable events since the previous premises inspection
- previous care and premises inspection reports

During the inspection the inspector met with;

- Mrs Jacqueline Davey, registered manager
- Mrs Barbara Sloan, Responsible Person
- Mr Douglas Wheeler, Proprietor
- Mr Alan Tipping, Mechanical Engineer

The findings of the inspection were provided to the registered manager at the conclusion of the inspection.

## 6.0 The inspection

### 6.1 Inspection findings

#### Premises/environment

This premises inspection was arranged following a notification to RQIA on 22 November 2017 (NT188537) relating to positive test for legionella bacteria in the home's hot and cold water systems.

The water samples were taken following the discovery of dead leg pipework in the premises plumbing system. These dead legs were associated with baths that had previously been present in the bedroom en-suite accommodation at the home. It was understood prior to this discovery that all pipework associated with these baths had been disconnected from the plumbing system. Previous Legionella risk assessments carried out by external consultants on 12 March 2013, and again on 13 June 2016 had not identified this issue.

Mr Alan Tipping stated that the location of the dead legs in the existing duct work meant that removing them from the system would be very difficult, and dangerous for those undertaking the work.

He also stated that the design of the existing plumbing system was not acceptable by current standards and may lead to further water safety issues going forward. It was therefore agreed that plans should be drawn up for the complete replacement of the hot and cold water system within the premises.

In the interim period it was agreed that:

- Point of use filters would be installed and maintained at the main bath and shower room and at locations where staff would draw of water for the personal care of service users.
- Toilet seats would be lowered before toilets are flushed to reduce the amount of aerosol released into the environment
- Wash hand basins in the service users en-suites would be removed from service. Staff would provide water for personal care and bottled water would be available for service users personal use.

It was also agreed that details of the positive test would be passed to the Health and Safety Executive (NI) who have responsibility for the legislation and guidance concerning water safety.

### Areas for Improvement

It is essential that suitable action is taken in relation to the control of legionella bacteria in the premises hot and cold water systems. In accordance with current best practice guidance (HSG274 Part 2: ‘Legionnaires’ disease, The control of legionella bacteria bacteria in hot and cold water systems’), this will include:

- Implementing and monitoring the interim remedial controls as agreed by the specialist mechanical contractor/consultant
- Implementing the remedial plumbing works as agreed with the specialist mechanical contractor/consultant
- Undertaking a new risk assessment
- Preparing a scheme to prevent or control the risk
- Implenting, managing and monitoring the scheme
- Keeping suitable and sufficient records (ongoing).

	Regulations	Standards
<b>Total number of areas for improvement</b>	1	0

### 7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the quality improvement plan (QIP). Details of the QIP were discussed with Jacqueline Davey, registered manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified 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 the home. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

### **7.1 Areas for improvement**

Areas for improvement have been identified where action is required to ensure compliance with The Nursing Homes Regulations (Northern Ireland) 2005 and The Care Standards for Nursing Homes (2015).

### **7.2 Actions to be taken by the service**

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

## Quality Improvement Plan

**Action required to ensure compliance with** The Nursing Homes Regulations (Northern Ireland) 2005

**Area for improvement 1**

**Ref:** Regulation 27(2)

**Stated:** First time

**To be completed by:**  
As soon as reasonably practicable

The Registered Person shall ensure that suitable action is taken in relation to the control of legionella bacteria in the premises hot and cold water systems. In accordance with current best practice guidance (HSG274 Part 2: 'Legionnaires' disease, The control of legionella bacteria in hot and cold water systems'), this will include:

- Implementing and monitoring the interim remedial controls as agreed by the specialist mechanical contractor/consultant
- Implementing the remedial plumbing works as agreed with the specialist mechanical contractor/consultant
- Undertaking a new risk assessment
- Preparing a scheme to prevent or control the risk
- Implementing, managing and monitoring the scheme
- Keeping suitable and sufficient records (ongoing).

**Response by registered person detailing the actions taken:**

A new legionella risk assessment has been completed. Temporary plumbing measures have been installed. Regular water testing is being carried out by our mechanical service contractors. A complete new plumbing system has been designed and we are awaiting building control authorisation. The Home continues to minimise the risk to all Residents. The Home will continue to liaise with our Estates Inspector regarding the progress of all stages of continuing works. management of the Home are available to Residents and Relatives in relation to any queries.

***\*Please ensure this document is completed in full and returned via Web Portal***



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