



The Regulation and  
Quality Improvement  
Authority

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**Announced Estates Inspection  
of  
Drummaul House  
  
2 December 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 2 December 2015 from 10:30 to 13.00. 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	1

The details of the QIP within this report were discussed with Mr Stephen Montgomery, Hutchinson Care Homes 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> Hutchinson Care Homes.	<b>Registered Manager:</b> Mrs Maria Bothwell
<b>Person in Charge of the Home at the Time of Inspection:</b> Mrs Maria Bothwell	<b>Date Manager Registered:</b> 1 April 2005
<b>Categories of Care:</b> RC-I, RC-MP(E), RC-PH(E), NH-I, NH-PH	<b>Number of Registered Places:</b> 43
<b>Number of Patients Accommodated on Day of Inspection:</b> 41	<b>Weekly Tariff at Time of Inspection:</b> £623

## 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 44: Premises**
- Standard 47: Safe and Healthy working Practices**
- 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 Maria Bothwell and Mr Stephen Montgomery.

The following records were examined during the inspection: Copies of service records and in-house log books relating to the maintenance and upkeep of the building and engineering 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 6 October 2015. The completed QIP was returned and approved by the specialist inspector on 10 December 2015.

##### 5.2 Review of Requirements and Recommendations from *the last* Estates Inspection undertaken on 8 May 2012

Previous Inspection Statutory Requirements		Validation of Compliance
<b>Requirement 1</b> Ref: Regulation 27	A record must be maintained indicating when the on-site generator is tested and serviced. These records should be available for inspection within the home.  <b>Action taken as confirmed during the inspection:</b> Confirmed during inspection.	<b>Met</b>
<b>Requirement 2</b> Ref: Regulation 14	Records must be maintained with regards to the control measures highlighted in the Legionella risk assessment. These include the: <ul style="list-style-type: none"> <li>• Hot and Cold temperatures at the tanks and sentinel outlets,</li> <li>• Flushing of all infrequently used outlets, and</li> <li>• Quarterly disinfection of the shower heads and associated hoses.</li> </ul> These records should be available for inspection within the home.	<b>Met</b>

	<p><b>Action taken as confirmed during the inspection:</b> Control measures confirmed during inspection.</p>	
<p><b>Requirement 3</b> Ref: Regulation 27</p>	<p>The current Fire risk assessment must be expanded to record all the relevant information relating to the risk assessment and its significant findings. It is important that assessment of the 'likely consequences to people in the event of fire' and the 'risk of fire occurring' are made and that a suitable time bound action plan is documented and implemented. (Such a methodology for undertaking a fire risk assessment may be found in PAS79:2007 as developed and published by the British Standards Institution.)</p> <p><b>Action taken as confirmed during the inspection:</b> A new risk assessment was undertaken on 10 March 2015. This was undertaken by a suitably accredited fire risk assessor.</p>	<b>Met</b>
<p><b>Requirement 4</b> Ref: Regulation 27</p>	<p>Ensure the Kitchen door is not wedged open. If there is an identified operational need for this door to be held open, a suitable hold open device linked to the fire alarm and detection system should be installed.</p> <p><b>Action taken as confirmed during the inspection:</b> Confirmed during inspection.</p>	<b>Met</b>
<p><b>Requirement 5</b> Ref: Regulation 27</p>	<p>Ensure all fire doors throughout the building effectively self-close. Several doors failed to latch fully during the course of the inspection.</p> <p><b>Action taken as confirmed during the inspection:</b> Confirmed during inspection.</p>	<b>Met</b>
<p><b>Requirement 6</b> Ref: Regulation 27</p>	<p>Relocate the new Garden shed off the perimeter path, so that it does not impede the safe movement of residents in the event of an emergency evacuation.</p> <p><b>Action taken as confirmed during the inspection:</b> Confirmed during inspection.</p>	<b>Met</b>

### 5.3 Standard 44: Premises

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

A range of documentation in relation to the maintenance and upkeep of the premises was presented for review during this Estates inspection. This documentation included inspection and test reports for various elements of the engineering services and risk assessments. This supports the delivery of safe care.

#### 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.

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

The areas of the premises reviewed during this Estates inspection were well presented, clean and free from malodours. A program of painting and redecoration throughout the premises is ongoing and preparations were in place for the refurbishment and redecoration of the main Lounges and Hallway. This supports the delivery of compassionate care.

#### Areas for Improvement

No areas for improvement were identified as a result of this estates inspection.

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>0</b>
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### 5.4 Standard 47: Safe and Healthy Working Practices

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

A range of documentation relating 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.

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

The nature and needs of the patients 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.

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

There are health & safety procedures and control measures in place which support the delivery of compassionate care. One issue was however identified for attention during this Estates inspection. This is detailed in the 'areas for improvement' section below.

## Areas for Improvement

A risk assessment with regards to 'the control of legionella bacteria in the premises hot and cold water systems', had been undertaken in-house. Many comprehensive control measures have also been implemented and continue to be maintained within the home. However, it is important that this risk assessment is reviewed in light of recent significant changes made to the relevant 'approved code of practice' issued by the Health and Safety Executive (Legionnaires' disease. The control of legionella bacteria in water systems, L8 Fourth Edition, 2013). A downloadable copy of this document may be obtained at the following link: <http://www.hse.gov.uk/pubns/priced/l8.pdf>

The Health and Safety Executive have also recently issued significant new guidance for providers in relation to this area. Again, a downloadable copy of this document may be obtained at the following link: <http://www.hse.gov.uk/pubns/priced/hsg274part2.pdf>.

This provides detailed guidance on the necessary control measures required for the premises hot and cold water systems. It is recommended that the home employ the services of a suitably accredited water safety consultant in undertaking any review of this important risk assessment. (Recommendation 1 in the attached Quality Improvement Plan)

<b>Number of Requirements</b>	<b>0</b>	<b>Number Recommendations:</b>	<b>1</b>
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## 5.5 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.

### 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 which was undertaken by a suitably accredited fire risk assessor. This supports the delivery of effective care.

### 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.

## Areas for Improvement

No areas for improvement were identified as a result of this estates inspection.

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

No additional areas were examined during this estates inspection.

## 6. Quality Improvement Plan

The issue identified during this inspection is detailed in the QIP. Details of this QIP were discussed with Mr Stephen Montgomery 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, Nursing Homes Regulations (Northern Ireland) 2005.

### 6.2 Recommendations

This section outlines the recommended actions based on research, recognised sources and Care Standards for Nursing Homes 2015. 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 Persons

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

### Recommendations

<p><b>Recommendation 1</b></p> <p><b>Ref:</b> Standard 44</p> <p><b>Stated:</b> First time</p> <p><b>To be Completed by:</b> 3 February 2015</p>	<p>Review the current risk assessment in relation to the 'control of legionella bacteria in the premises hot and cold water systems', in a timely manner. It is recommended that this risk assessment is undertaken by a suitably accredited water safety consultant.</p> <p>Ensure that all requirements recorded in the risk assessment are fully implemented within the timescale stipulated in the assessment.</p>
<p><b>Response by Registered Manager Detailing the Actions Taken:</b></p> <p>The home is employing the services of Owen Bennet to do the risk assessment in relation to the 'control of legionella bacteria in the premises hot and cold water systems'.</p> <p>Legionella awareness training is being carried out for appropriate staff on the 13<sup>th</sup> January 2016.</p>	

<b>Registered Manager Completing QIP</b>	Maria Bothwell	<b>Date Completed</b>	6 <sup>th</sup> January 2016
<b>Registered Person Approving QIP</b>	Janet Montgomery	<b>Date Approved</b>	6 <sup>th</sup> January 2016
<b>RQIA Inspector Assessing Response</b>	Gavin Doherty	<b>Date Approved</b>	7/1/2016

*\*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\**